What Is Colorectal Cancer?

Cancer is caused by malignant (cancerous) cells that grow and multiply without control. When cancer begins in the tissues of the colon, it is called colon cancer. When it forms in the tissues of the rectum, it is called rectal cancer. Because colon cancer and rectal cancer have many features in common, they are sometimes referred to together as colorectal cancer.

According to the National Cancer Institute (NCI), roughly 137,000 new cases of colorectal cancer were reported in the United States in 2014. The NCI adds that colorectal cancer claimed more than 50,000 lives in 2014, making it the "second leading cause of death from cancer in the United States."

Colorectal Cancer Symptoms

Colon cancer symptoms may include:

- Abdominal pain
- Rectal pain or bleeding
- Change in bowel habits
- Bloody or black, sticky bowel movements
- Weight loss for no clear reason
- Fatigue from anemia (low blood count)
- Nausea and vomiting
- Swelling of the abdomen

Rectal cancer symptoms may include:

- Rectal pain or bleeding
- Change in bowel habits (for example, going more often)
- Bloody bowel movements
- A feeling of not being done after a bowel movement
- Weight loss for no clear or deliberate reason
- Fatigue from anemia
- Rectal or anal pain

The symptoms of colorectal cancer may look similar to those associated with other medical conditions. Please consult your doctor if you notice any of the above symptoms.

Colorectal Cancer Screening

Screening for cancer means testing for something abnormal before it gives you symptoms. This allows cancer to be found earlier. The earlier a cancer is found, the smaller—and more treatable—it is likely to be.

Tests commonly used to screen for colorectal cancer include:

- **Colonoscopy:** During a colonoscopy procedure, a long, flexible tube called a colonoscope is inserted through the rectum. It is used to examine the entire rectum and colon for cancer. If anything looks abnormal, the doctor can use the colonoscope to take a biopsy (small tissue sample) for further testing. A colonoscopy is considered the most effective technique to screen patients ages 50 to 75 for colorectal cancer

- **Flexible sigmoidoscopy:** During this procedure, a sigmoidoscope (a device similar to a colonoscope) is used to examine the rectum and lower part of the colon

- **Fecal occult blood test:** This test checks for occult (hidden) blood in the stool. It involves placing a very small amount of stool on a set of cards, which is then sent to a laboratory for analysis

- **Barium enema with air contrast:** Barium (a liquid used to coat the inside of the colon or rectum so they will show up on an X-ray) is given into the rectum to partially fill up the colon. Air is pumped in to expand
Diagnosing Colorectal Cancer
The first step in diagnosing any disease is to complete a medical history and physical examination. If necessary, more tests and procedures are used to find and diagnose colorectal cancer. (As outlined above, several of these are also used for screening purposes.)

- Colonoscopy
- Flexible sigmoidoscopy
- Fecal occult blood test
- Barium enema with air contrast
- Digital rectal examination: A doctor or other health care provider inserts a gloved and lubricated finger into the rectum to feel for anything unusual or abnormal. This test can detect some cancers of the rectum, but not the colon
- Biopsy: During a colonoscopy or surgery, polyps or tissue samples are removed for examination under a microscope to look for cancer or other abnormal cells
- Blood count: This test checks for anemia, which can be a result of bleeding from a tumor
- Imaging tests: Tests such as a computed tomography (CT) scan, positron emission tomography (PET) scan, ultrasound or magnetic resonance imaging (MRI) of the abdomen may be done to look for tumors or other problems

Staging Colorectal Cancer
Following a diagnosis of colorectal cancer, further tests are done to determine the location or density of cancer cells. This process, known as staging, helps your doctor choose the best treatment for you. Imaging tests, surgery and X-rays are among the common approaches for staging colorectal cancer.

Stages of colorectal cancer range from Stage I (early-stage cancer) to Stage IV (cancer is advanced and has spread to other parts of the body, or metastatic colorectal cancer).

Colorectal Cancer Treatment
Your care team will work with you to develop a treatment plan that is right for you. This plan will depend on many factors, including type and stage of colorectal cancer, your general health, and your treatment preferences.

Treatment may involve one or more of these options:

- Colorectal surgery is the primary treatment option for colorectal cancer. Surgery—which may be traditional (open) or minimally invasive—involves removal of the cancer, a strip of normal tissue on either side of the cancer and nearby lymph nodes. Minimally invasive approaches include natural orifice endoscopic surgery and sphincter-sparing rectal cancer surgery
- Radiation therapy uses high-energy radiation beams to kill or shrink tumors while sparing healthy tissue. Forms of radiation therapy to treat colorectal cancer include:
  - External radiation (external beam therapy) - a treatment that precisely sends high levels of radiation directly to the cancer cells
  - Intraoperative radiation therapy - in which radiation is given inside the body as close to the cancer as possible. In some cases, external radiation therapies are used along with this treatment
- Proton beam radiation – a precise form of radiation therapy designed to target tumors while helping to preserve surrounding healthy tissue

- **Chemotherapy** kills cancer cells through the use of intravenous or oral drugs. Studies have shown that chemotherapy after surgery may increase the survival rate for patients with some stages of colon cancer. It can also be helpful before or after surgery for some stages of rectal cancer. Chemotherapy can also help slow the growth or relieve the symptoms of advanced colorectal cancer.

- **Targeted therapy** refers to a new generation of "smart" drugs that target and interfere with the activity of specific proteins that drive tumor growth and spread.

- **Clinical trials**, which are available through some hospitals, may provide access to new and promising therapies for colorectal cancer.