

Colorectal Cancer Screening

Fact Sheet for Health Care Providers



What is the Impact of Colorectal Cancer?

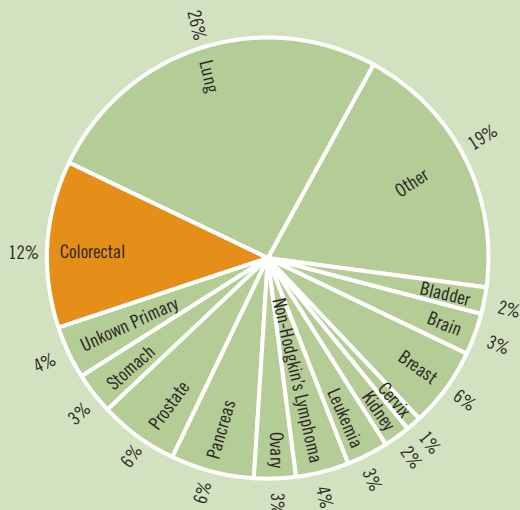
In Canada,

- It is the second leading cause of death from cancer for both men and women ^[4, 8, 11]
- It is the third most commonly diagnosed cancer in Canada ^[4, 10, 11]
- In 2007, an estimated 20,800 people (11,400 men, 9400 women) were diagnosed with colorectal cancer and 8700 (4700 men, 4000 women) died from it ^[4]
- It accounts for 13.8% of estimated new cancer cases and 12.2% of cancer deaths for men in Canada ^[4, 11]
- It accounts for 12.2% of estimated new cancer cases and 11.7% of cancer deaths for women in Canada ^[4, 11]

In Alberta,

- It is the second leading cause of death from cancer for both men and women ^[2]
- It is the fourth most commonly diagnosed cancer, and the second most commonly diagnosed cancer in men ^[2]
- In 2007, an estimated 1,670 people (950 men, 720 women) were diagnosed and 610 (340 men, 270 women) died from it ^[4]
- It accounts for 12% of estimated new cancer cases and 12% of cancer deaths for men and women in Alberta ^[2]

Cancer deaths by site, Alberta 2004 ^[2]



In Canada

- Colorectal cancer will develop in 1 in 14 men and 1 in 16 women throughout their lifetime ^[4]
- The life time risk of dying from colorectal cancer is 1 in 28 men and 1 in 32 women ^[4]

In Alberta

- Colorectal cancer will develop in 1 in 14 men and 1 in 17 women throughout their lifetime ^[2]
- The life time risk of dying from colorectal cancer is 1 in 27 men and 1 in 34 women ^[2]

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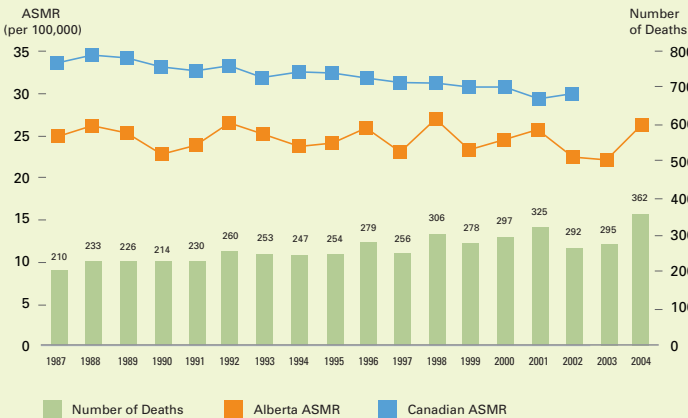
What are the Outcomes of Colorectal Cancer?

In Canada,

- Mortality rates continue to decline in both men and women with a decrease of 1.3% and 1.7% respectively between 1994-2003 ^[4, 11]
- Incidence rates are stable in both men and women with an increase of 0.3% in men and decrease of 0.8% in women between 1994-2003 ^[4, 11]
- The Potential Years of Life Lost (PYLL) due to colorectal cancer was 12% in men and 10.2% in women in 2003 ^[4]
- The Five-year Relative Survival Ratio for colorectal cancer in both men and women of all ages diagnosed in 1996-1998 was 60% ^[4]
- The estimated 2007 Age-Standardized Incidence Rates for colorectal cancer were 62 men and 41 women per 100,000 ^[4]
- The estimated 2007 Age-Standardized Mortality Rates for colorectal cancer were 26 men and 16 women per 100,000 ^[4]

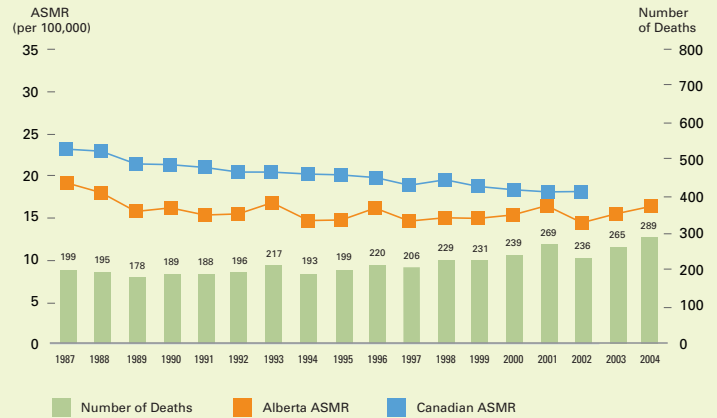
In Alberta,

- The Five-year Relative Survival Ratio from colorectal cancer in both men and women of all ages diagnosed in 1996-1998 was 58% ^[4]
- The estimated 2007 Age-Standardized Incidence Rates for colorectal cancer were 59 men and 38 women per 100,000 ^[4]
- The estimated 2007 Age-Standardized Mortality Rates for colorectal cancer were 22 men and 13 women per 100,000 ^[4]



Number of deaths for male invasive colorectal cancer, Alberta (1987-2004):

Comparing age-standardized mortality rates (ASMR) in Alberta with rates in Canada ^[2]



Number of deaths for female invasive colorectal cancer, Alberta (1987-2004):

Comparing age-standardized mortality rates (ASMR) in Alberta with rates in Canada ^[2]

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What are the Risk Factors for Colorectal Cancer?

Non-modifiable (unchangeable) risk factors for developing colorectal cancer ^[1, 2, 7, 9]

- Age
 - > Risk increases with age
 - > About 90% of people who develop colorectal cancer are over the age of 50
- Family History
 - > Risk increases when more relatives have the disease
 - > A small portion may inherit genetic susceptibility with 1% from Familial Adenomatous Polyposis (FAP) and 3–4% from Hereditary Non-Polyposis Colorectal Cancer (HNPCC)
- Gender
 - > Men are two times more likely to develop colorectal cancer than women
- Previous Cancer History
 - > Risk increases with a personal history of cancer, including uterine, ovarian, breast, or small bowels
- Ulcerative Colitis and Crohn's Disease
- Diabetes Mellitus

Modifiable (changeable) risk factors for developing colorectal cancer ^[1, 2, 7, 9]

- Diet
 - > Risk decreases with increased fiber, fruits, and vegetables intake
 - > Decreasing the intake of refined sugars and animal fats and having moderate/low alcohol consumption can also reduce the risk
- Physical Activity
 - > Risk decreases by up to 30%–40% with increased physical activity
- Body Weight
 - > Risk decreases with maintaining a healthy body weight
- Tobacco
 - > Risk decreases with being smoke and tobacco free

What is Colorectal Cancer Screening?

- Screening for colorectal cancer can reduce both incidence and mortality ^[12, 13]
- Annual or biennial FOBT in the periodic health examinations of asymptomatic individuals aged 50 to 74 is recommended ^[1, 2, 3, 4, 5, 11, 12, 13]
- FOBT can reduce colorectal cancer mortality by 15–33% ^[3, 5, 12, 13]
- Follow up colonoscopy for a positive FOBT results is recommended ^[1, 2, 3, 4, 5, 11, 12, 13]
 - > If colonoscopy is performed as a screening test, repeat colonoscopy is recommended in 10 years for negative results ^[1, 2]
 - > If Flexible Sigmoidoscopy (FS) is performed as a screening test, repeat FS is recommended in 5 years for negative results ^[1, 2]
 - > If Double Contrast Barium Enema (DCBE) is performed as a screening test, repeat DCBE is recommended in 10 years for negative results ^[1, 2]

Who is Getting Screened for Colorectal Cancer?

In Canada,

- Overall, less than 15% of individuals over the age of 50 report getting screened by FOBT within 2 years ^[11]

In Alberta,

- Less than 15% of individuals aged 50 to 74 report getting screened by FOBT within 2 years ^[10]
- The Alberta Colorectal Cancer Screening Program is a province-wide organized, population-based cancer screening program that aims to improve the early detection of colorectal cancer and save the lives of Albertans who may be at risk ^[1]

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- Alberta Colorectal Cancer Screening Program implementation activities include ^[1]
 - > Developing and distributing information and education materials to the public and health care providers
 - > Engaging directly and indirectly in recruitment activities with the target populations
 - > Providing direct communication to program participants and their health care providers regarding the need for screening, screening test results, follow-up diagnostic tests, and reminders when screening is overdue
 - > Monitoring and reporting on the quality of program services
 - > Making improvements to the program based on feedback and evaluation

Where can I get more information about the Alberta Colorectal Cancer Screening Program?

For more information on this program, please contact:

Alberta Cancer Board
Cancer Screening Programs
Population Health & Information
Holy Cross Site
2202 – 2nd Street S.W.
Calgary, Alberta T2S 3C1

Tel 1.866.727.3926
Fax 1.888.944.3388
cancerscreening@cancerboard.ab.ca
www.cancerboard.ab.ca/PS

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