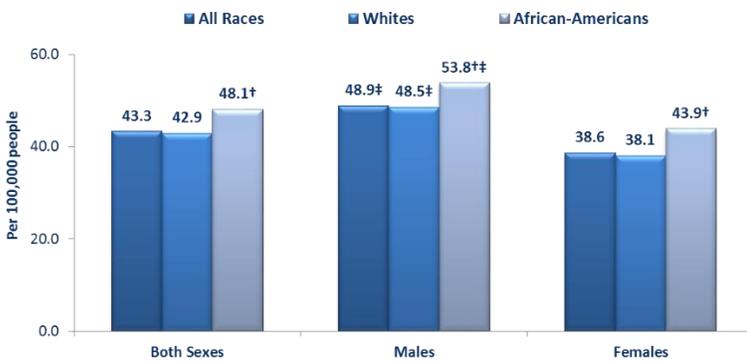




COLORECTAL CANCER is the third most commonly diagnosed cancer and cause of cancer-related death among both males and females in Indiana.¹ In 2017, the American Cancer Society (ACS) estimates that 3,080 Hoosiers will be diagnosed with colorectal cancer, and 1,110 will die because of the disease. During 2010–2014, Indiana’s colorectal cancer incidence rate was 43.3 per 100,000 people, and the mortality rate was 16.0 per 100,000 people. In Indiana, African-Americans have higher colorectal cancer incidence and mortality than whites, and men have higher rates than women.¹

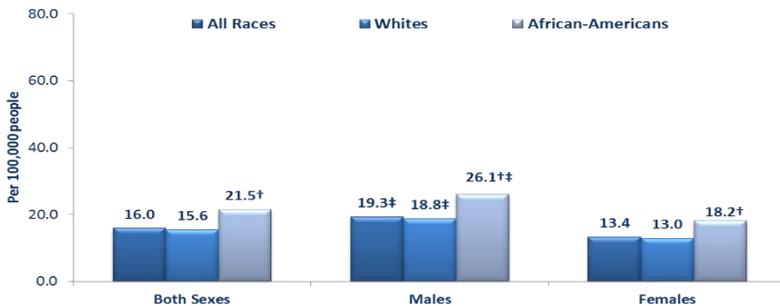
Figure 1. Colorectal Cancer Incidence Rates by Sex and Race*—Indiana, 2010–2014



*Age-adjusted
 †Rate among African-Americans is significantly higher ($P < .05$) than rate among whites
 ‡Rate among males is significantly higher ($P < .05$) than rate among females
 Source: Indiana State Cancer Registry

SEX AND AGE are the two greatest risk factors. During 2010–2014, colorectal cancer incidence rates were 27 percent higher among Indiana men than women [Figure 1]. In addition, 90 percent of colorectal cases diagnosed in Indiana were among residents age 50 and older during this same time period.

Figure 2. Colorectal Cancer Mortality Rates by Sex and Race*—Indiana, 2010–2014



*Age-adjusted
 †Rate among African-Americans is significantly higher ($P < .05$) than rate among whites
 ‡Rate among males is significantly higher ($P < .05$) than rate among females
 Source: Indiana State Cancer Registry

Who Gets Colorectal Cancer?

Sex and age are the two greatest risk factors for developing colorectal cancer. Additional risk factors include:

- ❑ **Race.** In Indiana, during 2010–2014, African-Americans had a 12 percent higher incidence rate [Figure 1] and a 38 percent higher mortality rate [Figure 2] when compared with whites.³
- ❑ **Smoking.** According to [The Health Consequences of Smoking – 50 Years of Progress](#), smoking is a known cause of colorectal cancer. In addition, smoking increases the failure rate of treatment for all cancers.
- ❑ **Diabetes.** Studies have found that individuals with Type 2 diabetes are at higher risk.² Although diabetes and colorectal cancer share similar risk factors, this increased risk remains even after those are taken into consideration.²
- ❑ **Personal or family history.** Although a majority of colorectal cancer cases occur when there is no family history, risk may be increased by having a personal or family history of colorectal cancer or polyps, a personal history of chronic inflammatory bowel disease, or certain inherited genetic conditions – for example, Lynch syndrome (also known as hereditary nonpolyposis colorectal cancer) and familial adenomatous polyposis.²
- ❑ **Modifiable risk factors.** Obesity, physical inactivity, a diet high in red or processed meat, and alcohol consumption have a strong link to increased colorectal cancer risk.²

Common Signs and Symptoms of Colorectal Cancer

- ❑ **Early Stage:** Often has no symptoms, which is why screening is so important.
- ❑ **Late Stage:**
 - Bleeding from the rectum
 - Blood in stool or toilet after bowel movement
 - Change in bowel habits or shape of stool
 - Cramping or discomfort in the lower abdomen
 - Urge to have bowel movement when bowel is empty
 - Constipation or diarrhea that lasts more than a few days
 - Decreased appetite
 - Unintentional weight loss
 - Dark or black stools



Can Colorectal Cancer Be Detected Early?

- ❑ Colorectal cancer incidence has decreased generally since the mid-1980s.² The acceleration in the decline of colorectal cancer rates, from two percent decline per year prior to the mid-2000s to three percent per year from 2004 to 2013, is thought to be a reflection of increased screening, resulting in the detection and removal of precancerous polyps.²
- ❑ When detected at the local stage, the five-year survival rate is 90 percent.² In Indiana, during 2010-2014, 42.6 percent of colorectal cancers were identified in either the in situ or the local stage.³ If the cancer has spread regionally, the five-year survival rate drops to 71 percent.² If the cancer has spread distantly, the five-year survival rate drops to only 14 percent.²
- ❑ According to the Indiana Behavioral Risk Factor Surveillance System (BRFSS), in Indiana, during 2014, only 65 percent of adults age 50 or older reported ever having a colonoscopy or sigmoidoscopy. Indiana ranks 41st in the nation for adults who have met USPSTF recommendations for colorectal cancer screening, according to the BRFSS.
- ❑ The U.S. Preventive Services Task Force recommends colorectal cancer screening for adults aged 50–75 using a guaiac-fecal occult blood test (gFOBT) or a fecal immunochemical test (FIT) once a year, a multitargeted stool DNA test (FIT-DNA) once a year or every three years, a flexible sigmoidoscopy every five years or every 10 years when done in combination with an annual FIT, a CT colonography (virtual colonoscopy) every five years, or colonoscopy every 10 years. Talk to your doctor about which test or tests are right for you. Most health insurance plans cover lifesaving preventive tests.
- ❑ Even as the overall incidence of colorectal cancer in the United States has been declining, incidence rates among adults under 55 have been increasing. A new [study](#), completed by ACS researchers found that three in 10 rectal cancer diagnoses are now occurring in patients younger than age 55. The rising rates in adults under age 50 highlight a need to respond to this trend, including raising awareness of preventive measures and risk factors.

TAKE ACTION: Help prevent colorectal cancer

- ❑ Get screened regularly
- ❑ Avoid tobacco products
- ❑ Maintain a healthy weight throughout life
- ❑ Adopt a physically active lifestyle
- ❑ Limit consumption of alcohol
- ❑ Consume a healthy diet that:
 - Emphasizes plant sources
 - Supports a healthy weight
 - Includes at least 2 ½ cups of a variety of vegetables and fruit each day
 - Includes whole grains in preference to processed grains
 - Has minimal processed and red meats
- ❑ Support initiatives, such as the National Colorectal Cancer Roundtable's (NCCRT's) [80% by 2018](#) campaign, which aim to increase colorectal cancer screening. Visit the [NCCRT website](#) to take the [80% by 2018](#) pledge today!
- ❑ Take advantage of free public service announcement materials, such as the Centers for Disease Control and Prevention's [Screen for Life](#) campaign, to help educate your community about the benefits of colorectal cancer screening.

GET INVOLVED: Join the Indiana Cancer Consortium (ICC)

- ❑ The ICC is a statewide network of over 100 agencies including the Indiana State Department of Health.
- ❑ The ICC seeks to reduce the cancer burden in Indiana through the development, implementation and evaluation of a comprehensive plan that addresses cancer across the continuum from prevention through palliation.
- ❑ Become a member at www.indianacancer.org.

Resources

- ❑ For a colorectal cancer toolkit with resources and information, visit <http://indianacancer.org/colorectal-cancer-toolkit/>.
- ❑ To learn more about the cancer burden in Indiana, refer to the [Indiana Cancer Facts and Figures 2015](#) report at www.indianacancer.org.
- ❑ Visit www.QuitNowIndiana.com or call 1-800-QUITNOW for help quitting smoking.
- ❑ To learn more about how to support healthy eating and physical activity throughout Indiana, visit the Indiana Healthy Weight Initiative at www.inhealthyweight.org.

Reference:

1. Indiana Cancer Consortium, Indiana State Department of Health and the American Cancer Society Great Lakes Division; Indiana Cancer Facts and Figures 2015. April, 2015. Available at indianacancer.org/indiana-cancer-facts-and-figures-2015/. Updated cancer statistics are available online from the Indiana State Cancer Registry Statistics Report Generator at <http://www.in.gov/isdh/24360.htm>.
2. American Cancer Society. Colorectal Cancer Facts & Figures 2017-2019. Atlanta. American Cancer Society, 2017. Available online at <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures-2017-2019.pdf> <http://www.cancer.org/research/cancerfactsstatistics/colorectal-cancer-facts-figures>.
3. Indiana State Cancer Registry Statistics Report Generator. Accessed at <http://www.in.gov/isdh/24360.htm> on February 23, 2017.