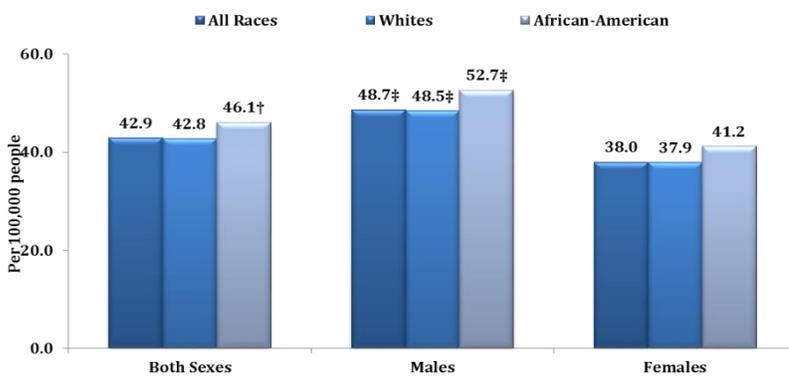




COLORECTAL CANCER is the third most commonly diagnosed cancer and cause of cancer-related death among both males and females in the United States, according to the American Cancer Society (ACS).¹ In 2019, the ACS estimates that 3,360 Hoosiers will be diagnosed with colorectal cancer, and 1,110 will die because of the disease.² During 2012-2016, Indiana's colorectal cancer incidence rate was 42.9 per 100,000 people, and the mortality rate was 15.4 per 100,000 people. In Indiana, African-Americans have higher colorectal cancer incidence and mortality than whites, and men have higher rates than women.³

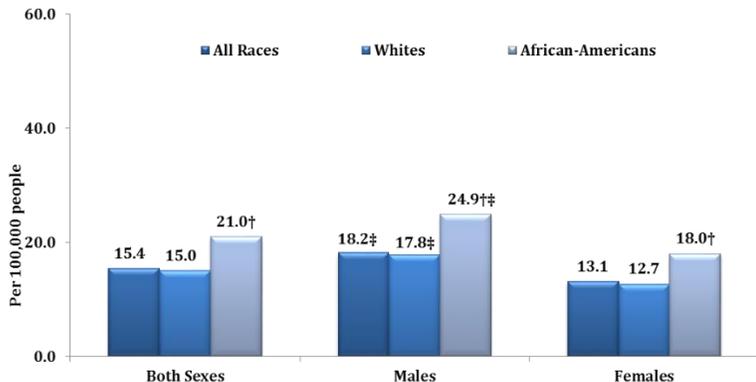
Figure 1. Colorectal Cancer Incidence Rates by Sex and Race*—Indiana, 2012-2016



*Age-adjusted to the US 2000 Standard Population.
†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 2012-2016, colorectal cancer incidence rates were 25 percent higher among Indiana men than women [Figure 1].³ In addition, 90 percent of colorectal cases diagnosed in Indiana were among residents age 50 and older during this same time period.³

Figure 2. Colorectal Cancer Mortality Rates by Sex and Race*—Indiana, 2012-2016



*Age-adjusted to the US 2000 Standard Population.
†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?²

Sex and age are the two greatest risk factors for developing colorectal cancer.² Additional risk factors include:

- ❑ **Race.** In Indiana, during 2012–2016, African-Americans had a 7 percent higher incidence rate [Figure 1] and a 33 percent higher mortality rate [Figure 2] when compared with whites.³
- ❑ **Smoking.** Smoking causes colorectal cancer, and the association appears to be stronger for rectal cancer than for colon cancers.² Smoking is also associated with lower survival rates, particularly for current smokers.²
- ❑ **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.²
- ❑ **Modifiable risk factors.** Obesity, physical inactivity, a diet high in red or processed meat, and moderate to high alcohol consumption have a strong link to increased colorectal cancer risk.²

Common Signs and Symptoms of Colorectal Cancer²

- ❑ **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
 - Dark or black stools
 - Change in bowel habits or shape of stool (e.g., more narrow than usual)
 - 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



Can Colorectal Cancer Be Detected Early?

- ❑ Overall, colorectal cancer incidence has decreased over the past several decades, due to increased screening, resulting in the detection and removal of precancerous polyps, and changes in risk factor exposures.²
- ❑ When detected at the local stage, the five-year survival rate is 90 percent.⁵ In Indiana, during 2012-2016, only 37.7 percent of colorectal cancers were identified in the local stage.³ If the cancer has spread regionally, the five-year survival rate drops to 71 percent.⁵ If the cancer has spread distantly, the five-year survival rate drops to only 14 percent.⁵
- ❑ According to the Indiana Behavioral Risk Factor Surveillance System (BRFSS), in Indiana, during 2016, only 65 percent of adults age 50 or older reported ever having a colonoscopy or sigmoidoscopy.⁶
- ❑ 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) every year; a multitargeted stool DNA test (FIT-DNA) every one to three years; a flexible sigmoidoscopy or CT colonography every five years; or a colonoscopy or a flexible sigmoidoscopy with FIT (every year) every 10 years.⁷ Talk to your doctor about which test or tests are right for you.⁷ 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.² From 2006 to 2015, incidence rates increased by 1.8% annually among those younger than age 55.² A 2017 Siegel et al. [study](#), found that three in 10 rectal cancer diagnoses are now occurring in patients younger than age 55.⁷ 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.⁷

TAKE ACTION: Help prevent colorectal cancer²

- ❑ Get regular screenings
- ❑ Avoid tobacco products
- ❑ Maintain a healthy weight throughout life
- ❑ Adopt a physically active lifestyle
- ❑ Limit consumption of alcohol
- ❑ Consume a healthy diet that:
 - High in fruits and vegetables
 - Supports a healthy weight
 - Has minimal processed and red meats
- ❑ Support initiatives, such as the National Colorectal Cancer Roundtable's (NCCRT's) [80% in Every Community](#) campaign, which aim to increase colorectal cancer screening. Visit the [NCCRT website](#) to take the [80% in Every Community](#) 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 survivorship.
- ❑ 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 how to decrease the cancer burden in Indiana, refer to the [Indiana Cancer Control Plan 2018-2020](#) 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.

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