



Colon cancer is **PREVENTABLE**

A screening could save your life!

Colorectal cancer – cancer of the colon or rectum – is the third most common cancer in both men and women in the United States and currently ranks as the second most common cause of death due to cancer. Unfortunately more than 50,000 people will die from colorectal cancer this year.

The good news is that colorectal cancer, unlike many cancers, is largely preventable and often curable when caught early.

The American College of Gastroenterology currently recommends that patients who are at average risk for colorectal cancer have a colonoscopy every 10 years and a stool FIT test on an annual basis. **Colonoscopy remains the gold standard for colorectal cancer screening and is the reference used to evaluate all other screening methods.**

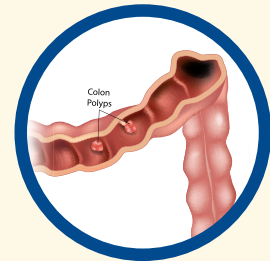
Early detection is key. Our goal is to help ensure that all eligible patients are screened for colon cancer.

Your primary care provider can help answer questions, review your health history, and schedule a colonoscopy.

To find a primary care provider near you,
call 833-602-CARE (2273)

[Schedule your colonoscopy screening.](#)

Take charge of your health! Call today to schedule your screening.
833-391-0654



What is colon cancer?

Most colon cancers develop from polyps, which are glandular growths that develop on the inner lining of the colon (large intestine). Polyps typically begin very small and over time transform into larger polyps and then further transform into colon cancer.

Early identification and removal of polyps reduces the risk of developing colon cancer.

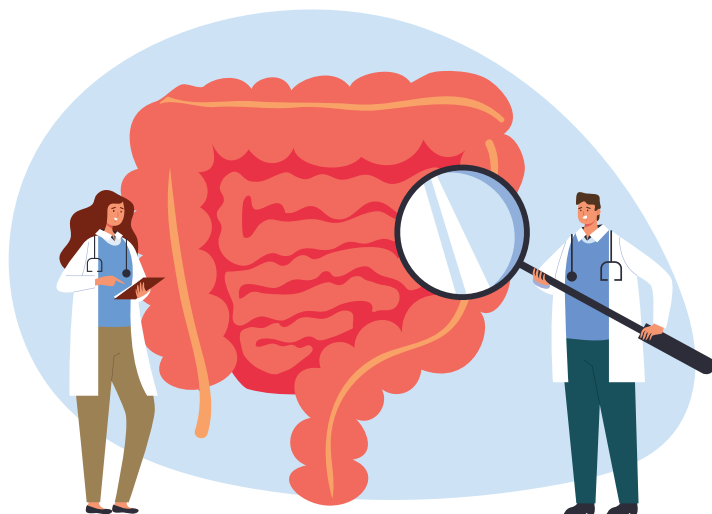
 **BHS**
Benbrook
Gastroenterology
Associates

104 Technology Drive, Suite 202
Butler, PA 16001

Why screen for colorectal cancer?



90%
Survival rate
when cancer is found and treated early



Screening Options

1 COLONOSCOPY GOLD STANDARD

A one-step test that examines the colon for polyps and, when identified, can remove the polyps at the same time.

Able to detect colorectal cancer 94% of the time.

Able to detect 75-95% of precancerous colon polyps.

The procedure is completed while the patient is sedated and kept comfortable under the direction of an anesthesiologist.

Test repeated every 10 years, if normal.

2 FIT Fecal Immunochemical Test

- Stool-based test performed at home and is sent to a lab, which looks for trace amounts of blood.
- Able to detect colorectal cancer 80% of the time and approximately.
- Able to detect approximately 50% of precancerous polyps.
- A positive test could indicate the presence of colon polyps or colon cancer.
- A positive test means that a colonoscopy is required to rule out colon polyps or colon cancer.
- Test repeated annually, if normal.

3 COLOGUARD Multitarget Stool DNA

Stool-based test performed at home and is sent out for review. Looks for abnormal DNA associated with colorectal cancer or precancerous polyps.

Able to detect colorectal cancer 92% of the time.

Able to detect precancerous polyps 42% of the time.

A positive test means that a colonoscopy is required to rule out colon polyps or colon cancer.

Has a 13.4% false positive result (positive test result without the presence of colorectal cancer or polyps) which may increase with advancing age.

Test repeated every 3 years, if normal.



Ages 45-75

Adults who are at average risk for colorectal cancer should be screened from the age of 45 to 75. The recommendation to screen patients over the age of 75 is made on an individual basis.