

#### **Colorectal Cancer Awareness Month**

Colon cancer is a type of cancer that begins in the large intestine (colon). The colon is the final part of the digestive tract. Colon cancer typically affects older adults, though it can happen at any age. It usually begins as small, noncancerous (benign) clumps of cells called polyps that form on the inside of the colon. Over time some of these polyps can become colon cancers.

The U.S. Preventive Services Task Force (Task Force) recommends that adults age 45 to 75 be screened for colorectal cancer. The decision to be screened between ages 76 and 85 should be made on an individual basis. If you are older than 75, talk to your doctor about screening. People at an increased risk of getting colorectal cancer should talk to their doctor about when to begin screening, which test is right for them, and how often to get tested.

Several screening tests can be used to find polyps or colorectal cancer. It is important to know that if your test result is positive or abnormal on some screening tests (stool tests, flexible sigmoidoscopy, and CT colonography), a colonoscopy test is needed to complete the screening process.

# **Colorectal Cancer Awareness Month**

**MARCH 2023** 

## THIS ISSUE:

COLORECTAL CANCER AWARENESS MONTH PAGE 01

COLORECTAL CANCER SIGNS, SYMPTOMS, & SCREENING PAGE 02

COLORECTAL CANCER & RACIAL DISPARITIES

PAGE 03

WOMEN'S HISTORY MONTH
PAGE 04

## Colorectal Cancer Signs, Symptoms, & Screening

Signs and symptoms of colon cancer include:

- A persistent change in your bowel habits, including diarrhea or constipation or a change in the consistency of your stool
- Rectal bleeding or blood in your stool
- Persistent abdominal discomfort, such as cramps, gas, or pain
- A feeling that your bowel doesn't empty completely
- Weakness or fatigue
- Unexplained weight loss

Many people with colon cancer experience no symptoms in the early stages of the disease. When symptoms appear, they'll likely vary, depending on the cancer's size and location in your large intestine.

Several screening tests can be used to find polyps or colorectal cancer. It is important to know that if your test result is positive or abnormal on some screening tests (stool tests, flexible sigmoidoscopy, and CT colonography), a colonoscopy test is needed to complete the screening process. Talk to your doctor about which test is right for you.

#### **Stool Tests**

- The guaiac-based fecal occult blood test (gFOBT) is done once a year. For this test, you receive a test kit from your healthcare provider. At home, you use a stick or brush to obtain a small amount of stool. You return the test kit to the doctor or a lab, where the stool samples are checked for the presence of blood.
- The fecal immunochemical test (FIT) uses antibodies to detect blood in the stool. It is also done once a year in the same way as a gFOBT.

**Colonoscopy** - The doctor uses a long, thin, flexible, lighted tube to check for polyps or cancer inside the rectum and the entire colon. During the test, the doctor can find and remove most polyps and some cancers. Colonoscopy also is used as a follow-up test if anything unusual is found during one of the other screening tests.

How often: Every 10 years (for people who do not have an increased risk of colorectal cancer). will get the test.

## DID YOU KNOW

Colorectal cancer is the third most common cause of cancer death in both men and women in the United States, and ranks second when men and women are combined.

In 2023, the American Cancer Society estimates that there will be 106,970 new cases of colon cancer and 46,050 cases of rectal cancer in the US and a total of 52,550 people will die from these cancers

Colon Cancer in Women

#### Early Stage Symptoms



Changes in bowel habits



Bloody stools



Pain or cramping in the abdomen



Unintended weight loss



#### **Advanced Stage Symptoms**



Cancer spreading to lymph nodes



Bowel obstructions



Cancer spreading to liver and other organs

verywell

NEWSLETTER PAGE 02

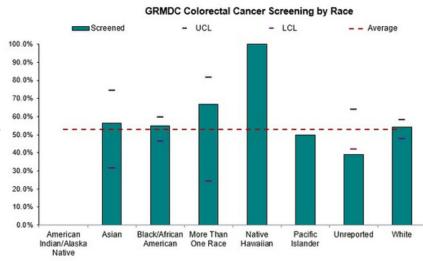
## Colorectal Cancer & Racial Disparities

Colorectal cancer (CRC) is the second leading cause of death from cancer in both men and women in the US. Thanks in large part to increased screening of those over age 50 in last decade, overall CRC rates have been falling among the general population. However, the incidence of CRC among younger individuals in the US is rising at an alarming rate. Over the past 20 years, the rate of CRC has increased by 2.2% per year in people under age 50. Hidden within these statistics are the significant disparities in CRC incidence and outcomes that exist for African Americans.

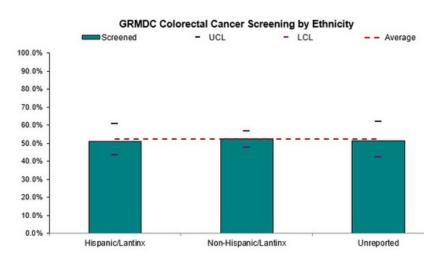
Compared to whites, African Americans have a 20% higher incidence of CRC. They are more likely to develop CRC at younger ages, be diagnosed further along in their illness, and are more likely to die of their disease. African Americans have the lowest five-year survival rate for CRC of any racial group in the US. Absolute rates of early-onset CRC, generally defined as CRC diagnosed before age 50 to 55, are higher among African Americans compared to whites. The recent deaths of Chadwick Boseman at age 43 and Natalie Desselle-Reid at age of 53 serve as tragic examples of the disproportionate impact of early-onset CRC among the African American community.

Colorectal cancer also disproportionately affects the Black community, where the rates are the highest of any racial/ethnic group in the US. African Americans are about 20% more likely to get colorectal cancer and about 40% more likely to die from it than most other groups.

The reasons for the differences are complex, but they largely reflect differences in risk factors and in healthcare access, both of which are related to socioeconomic status



This graph looks at GRMDC patients by race who have a screening for colorectal cancer.



This graph looks at GRMDC patients by ethnicity who have a screening for colorectal cancer.

In fact, African Americans are disproportionately burdened by cancer in general. They often experience greater obstacles to cancer prevention, detection, treatment, and survival, including systemic racial disparities that are complex and go beyond the obvious connection to cancer. These obstacles can include a lack of (or less comprehensive) health insurance, lack of access to healthy and affordable foods, low-quality education and housing, and unsafe environments.

NEWSLETTER PAGE 03

#### **Women's History Month**

Did you know that the youngest American astronaut to have traveled to space was a woman (Sally Ride)? Or that Hedy Lamarr was also the inventor of the precursor to Wi-Fi? When thinking about Impressionism, is the first name that comes to mind that of Claude Monet or Berthe Morisot?

Women have always played significant roles in all aspects of society—they just don't often get the recognition they deserve. March is Women's History Month and has been observed annually in the U.S. since 1987.

The theme for this year's Women's History Month is "Celebrating Women Who Tell Our Stories." This theme honors women in every community who have devoted their lives and talents to producing art, pursuing truth, and reflecting the human condition decade after decade. Women's stories, and the larger human story, expand our understanding and strengthen our connections with each other.

In 2022, women accounted for more than half of the college-educated labor force in the United States. In 2021, 57.8 percent of all women participated in the labor force. Nearly a million women returned to the workforce in 2021, compared to 666,000 men. According to The 19th, 3.3 million of all the jobs added to the economy went to women, while 3.1 million went to men. This, however, should not overlook the jobs women, in particular women of color, lost during the pandemic when responsibilities such as childcare often fell on their shoulders.

Despite the ever-growing number of women getting degrees, the gender pay gap has narrowed by less than half a cent per year since the Equal Pay Act was signed in 1963, according to Forbes. In 2020, women earned 84% of what men earned, according to a Pew Research Center analysis of both full- and part-time workers. The U.S. Census Bureau's most recent analysis of only full-time workers (2019) found that women earned 82% of what their male counterparts earned. While women are paid 82 cents for every dollar that a man makes, that gap widens even more for women of color, according to 2020 data by the National Women's Law Center.

"I raise up my voice

– not so I can shout
but so that those
without a voice can
be heard ... We
cannot succeed
when half us us are
held back."

Malala Yousafzai

Pakistani activist for female education and the youngest Nobel Peace Prize recipient





NEWSLETTER PAGE 04