

Colorectal Cancer Awareness Month

March is Colorectal Cancer Awareness Month. This is a great time to learn more about the importance of colorectal health. Excluding some kinds of skin cancer, colorectal cancer is the fourth most common cancer that affects both men and women, and it's the fourth leading cause of cancer-related deaths in the U.S. (source: [CDC](#)) The good news is that colon cancer is more treatable, and sometimes curable, with early detection from screening.

There are various screening tests for colorectal cancers, such as FIT test, Cologuard and colonoscopy. It is important to know that research studies have not shown one type to be better than another in terms of reducing death from colorectal cancer. Discuss with your primary care provider which option is best for you and how often you should be screened given your health history.



Participate in the following activities to learn more:

Activity 1: Wear Blue Day, Fri. March 3

Activity 2: Move with a Doc: Polyps & Prevention - Colorectal Health

Activity 3: Facts & Lowering Risk

Activity 4: Word Search

Activity 5: Throwin' for Colons

Overall, the lifetime risk of developing colorectal cancer is about **1 in 23 (4.3%) for men and 1 in 25 (4.0%) for women** (Source: [ACS](#))

For questions or more information, email wellness@wellfirstbenefits.com.

Health Disparities

“Health disparities” are preventable differences in health among different social or racial groups. Health Disparities are a complex and challenging problem across the world. Social factors play the largest role in shaping the overall health of communities. For example, the ability to access healthcare, a safe living environment, racial equity, nutritious food, quality education, and supportive relationships free of discrimination is incredibly important to your overall health.

Those who face health disparities often have a higher risk for colorectal cancer. In the U.S., certain racial and ethnic groups experience a higher risk of colorectal cancer and an increased likelihood of being diagnosed when the disease has already advanced to the metastatic stage.

Did You Know?

- Black/African Americans have the highest colorectal cancer incidence and mortality rates of all racial groups in the U.S., with a 20% higher likelihood of getting colorectal cancer and a 35% higher death rate. (Source: [Colorectal Cancer Alliance](#))
- Colorectal Cancer is the second most common cancer and the second leading cause of cancer death among Native Americans. (Source: [AICAF](#))

For more information, please visit:

- [CDC: Colorectal Cancer](#)
- [Colorectal Cancer Alliance](#)
- [CDC: Informational Video](#)

Activity 1: Wear Blue Day

The first Friday in March is National Wear Blue Day. Wear blue on Friday, March 3, 2023, to show your support and raise awareness for colorectal cancer. Ask your team, family and friends to join you!

Activity 2: Move with a Doc

Join Dr. Shah as she talks about the signs, symptoms and treatment of colon cancer, as well as important prevention measures. You are encouraged to get moving (in any way you choose) while you listen and learn about colorectal health.

[Watch Here](#)

Activity 3: Colorectal Cancer Fact Sheet

Read through the following colorectal cancer fact sheet and use this information to gain new knowledge. Discuss any questions or concerns you have with your health care provider.

- Colorectal cancer is cancer of the colon or rectum, both parts of the large intestine, and these cancers are often grouped together because they have many features in common.
- Colorectal cancer affects men and women of all racial and ethnic groups.
- Colorectal cancer is most common in people who are 45 years old or older.
- Colon polyps are small clumps of cells on the lining of the colon. Most polyps are harmless, but some will eventually change into cancers.
- Colorectal polyps and early colorectal cancer commonly don't cause symptoms, especially early on. However, screening tests can find polyps and colorectal cancer before symptoms appear.
- Symptoms may include blood in or on stool; pains, aches or cramps in the stomach that don't go away; unknown weight loss. Talk with your provider immediately if you experience these symptoms.
- The U.S. Preventive Services Task Force currently recommends screening beginning at age 45 for people at average risk for colorectal cancer.
- People with average risk for colorectal cancer can use any screening method:
 - Stool-based methods like FIT testing or Cologuard can be done at home and do not require preparation by taking laxatives the night before. These tests have to be repeated more frequently than colonoscopy screening.
 - Colonoscopy does require a laxative to prepare and involves sedation. But, people with average risk and a normal screening colonoscopy don't have to repeat it for 10 years.
- Some individuals with higher risk should start screening before age 45 with colonoscopy. Family history and personal health may determine when you should begin screening. Consult with your primary doctor if you think you may be in a higher risk group. For example:
 - You may have an increased risk of colorectal cancer if you have inflammatory bowel disease, Crohn's disease, or ulcerative colitis.
 - You may have an increased risk of colorectal cancer if you have certain genetic syndromes, like familial adenomatous polyposis (FAP) or hereditary non-polyposis colorectal cancer (also known as Lynch syndrome).
- A colonoscopy can find and remove precancerous polyps/abnormal growths in the colon or rectum before they turn into cancer—and thereby prevent cancer.

Activity 3: Lowering Your Risk with Lifestyle Changes

Watch Your Weight: Being obese or overweight increases your risk of developing and dying from colon or rectal cancer. Physical activity and eating a diet high in vegetables, fruits and whole grains can help regulate weight.

Eat a lot of Vegetables, Fruits, and Whole Grains: Having a diet that includes a lot of vegetables, fruits and whole grains has been linked to a decreased risk of colorectal cancer. On the flip side, having a diet high in red meats and processed meats (certain deli meats and hotdogs) are linked to an increased risk for colorectal cancer.

Limit Alcohol Consumption: The American Cancer Society recommends no more than two drinks a day for men and one drink a day for women. A single drink amounts to 12 ounces of beer, five ounces of wine or 1½ ounces of 80-proof distilled spirits (hard liquor).

Move Your Body Regularly: You may have a higher risk of developing colon or rectal cancer if you are not physically active. Some studies show that increasing your movement may help lower your risk.

Don't Smoke: Long-term smokers are more likely than non-smokers to develop and die from colon or rectal cancer.

Resources

Health Promotion has many tools and resources to support you in adopting a healthier lifestyle and lowering your risk of developing cancer.

- **[Nicotine Cessation:](#)** For help quitting.
- **[Daily Habits*:](#)** Goal-tracking tools accessed through your Living Healthy/WebMD account*. Options include a balanced diet, weight loss, exercise, quitting tobacco, and more.
- **[Real Goals:](#)** Preset goals and education on specific topics within the eight dimensions of wellness. (e.g., reduce alcohol use, eating better, portion control, increase movement, seven-minute workout, Tri-fitness challenge)
- **[Events:](#)** Browse upcoming programs and topics to support you in adopting a healthy lifestyle to lower your risk. The [video library](#) has recordings of past events.
 - Move with a Doc
 - Webinars
 - WebMD challenges*
- **[Nutrition:](#)** Access to WebMD resources*, webinars, monthly newsletter, and nutrition consults with a registered dietician*.

**Resources are available to everyone, regardless of insurance, unless otherwise noted*

Activity 4: Word Search

Words can be found in any direction (including diagonals) and can overlap each other. Use the list of words below.

X W A C F Y D V M P F U E C N L S I V C
D S K J X O Q R V I L O C T O R Z U B I
H C D V X Y S G T A P R E V A L E N T N
F R W H F T N T T K R E C T U M O S V T
B E J A S Z E C A D A V Y M Y G M N Y E
D E U B Z S E Z V R T I I Y N Q N P F S
P N W X T R P E C N P N R E C N A C T T
S I W I O A J P G O V S L G O Y I P H I
W N N L F B J X E B L O L G O O Y T B N
T G O P R E V E N T K O D Y I L L Q Y E
J C Q T W K B N E I M A G J Y A L F P E
Z A Z Y S Y R O T S I H W U E E C Z O K
A G G I G K H E I D H J E H A H N V C J
S F R I Q H D G C L M A Z S C R Y D S T
P I F D J O J R W L J N H Z N A D Q O Y
Y W L E U O X Y R A T I D E R E H H N K
L Q Q K C Z G H G N I Y R C S A F H O F
O L H T M T T Q M T N D H Y M M E Z L B
P Q Q Z T W S Y M P T O M S Y P X G O Z
C R W V H Z Y R O T A M M A L F N I C B

colorectal
cancer
colon
rectum
intestine

affects
prevalent
polyps
symptoms
risk

screening
FIT testing
Cologuard
colonoscopy
history

health
inflammatory
genetic
hereditary
prevent

