



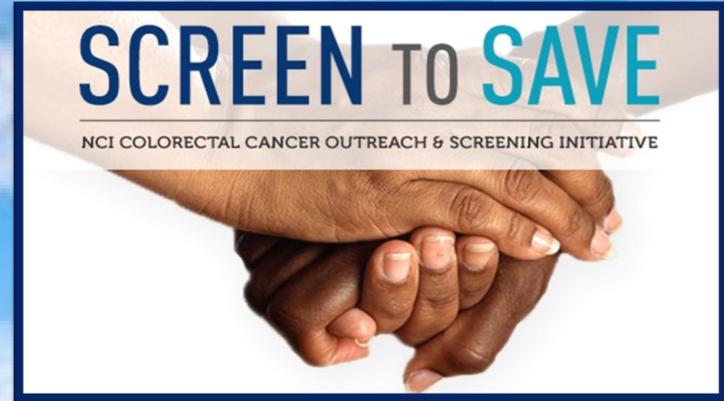
**SCREENING SAVES LIVES**

If you are 50 or older, talk with your doctor about getting screened.

For more information, go to:  
CDC: [www.cdc.gov/screenforlife](http://www.cdc.gov/screenforlife)  
ACS: [www.cancer.org](http://www.cancer.org)  
NCI: [www.cancer.gov](http://www.cancer.gov)

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Community Outreach Core  
#27 Dean's Circle, UOG Station  
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# GUAM COLORECTAL CANCER BASICS



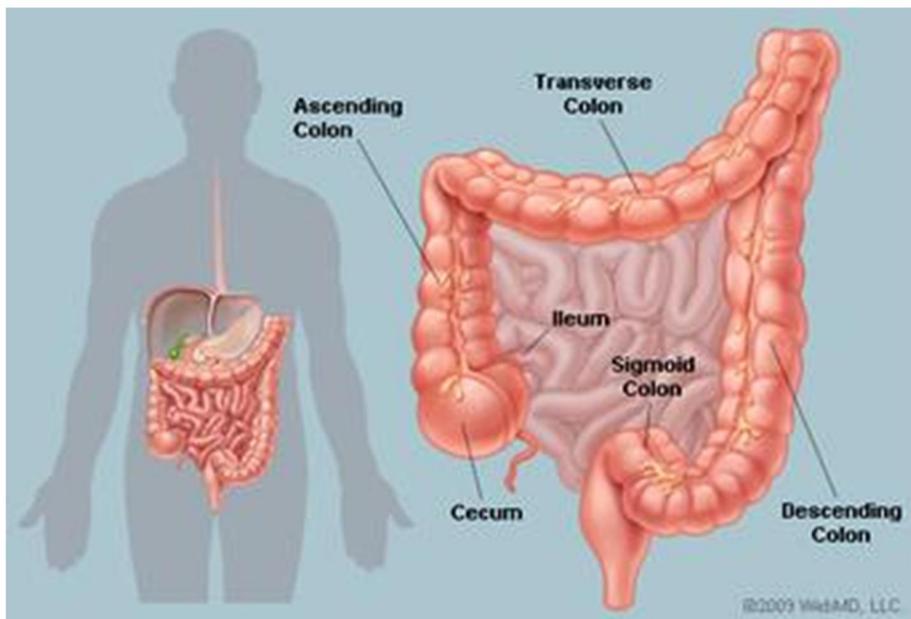
**PARTNERSHIPS**



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Source: National Cancer Institute and American Cancer Society

Background photo of Adelup Point, Guam, courtesy of Francis Garrido.  
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## What is Colorectal Cancer (CRC)?

Cancer is an abnormal growth inside your body that should not be there. Most colorectal cancer starts from polyps in the colon or rectum.

The colon is the large intestine. The rectum connects the colon to the anus and holds waste until you have a bowel movement.

A polyp is a growth inside the colon or rectum that is not normal. Over time, polyps can turn into cancer if they are not removed.

Many people with polyps or colorectal cancer do NOT experience any symptoms.

## Screening Tests

**Fecal Occult Blood Test (FOBT)** and the **Fecal Immunochemical Test (FIT)** are two tests used to check stool (solid waste or poop) for blood that can only be seen with a microscope.

**Sigmoidoscopy** is a procedure to look inside the rectum and sigmoid (lower) colon for polyps, abnormal areas, or cancer.

**Colonoscopy** is a procedure to look inside the rectum and colon for polyps, abnormal areas, or cancer.

**Barium Enema** is a series of x-ray images of the colon and rectum taken after the patient is given an enema with a barium solution.

## Symptoms

Don't wait for symptoms to be tested for colorectal cancer. Precancerous polyps and early-stage colorectal cancer don't always cause symptoms. But if there are symptoms, they may include:

- ◇ Blood in or on your stool (bowel movement).
- ◇ Pains, aches, or cramps in your stomach that do not go away.
- ◇ Changes in bowel habits or consistency of stools
- ◇ Feelings of being very tired or weak
- ◇ Losing weight and you don't know why.

They may be caused by something other than cancer, but the only way to know is to see your doctor. **If you have any of these symptoms, talk to your doctor about being screened.**

## Is Colorectal Cancer Common among Guam's People?



Colorectal cancer (CRC) can affect anyone, men and women alike. Colorectal cancer is most frequently found in people age 50 and older.

### Guam Colorectal Cancer Data

- ⇒ CRC is the **4th** most common cancer.
- ⇒ **38** people are diagnosed with CRC annually.
  - ⇒ Half were in the **late stages** of CRC.
- ⇒ CRC is the 3rd leading cause of cancer deaths and
  - ⇒ **15 people die** from CRC each year.

### Risk Factors That Increase CRC Risk

**Age.** The risk of colorectal cancer increases after age 50.

**Family history of colorectal cancer.** Having a parent, brother, sister, or child with colorectal cancer doubles a person's risk of colorectal cancer.

**Personal history.** Having a personal history of the following conditions increases the risk of colorectal cancer:

- ◇ previous colorectal cancer;
- ◇ high-risk adenomas (colorectal polyps that are 1 centimeter or larger in size or that have cells that look abnormal under a microscope);
- ◇ ovarian cancer;
- ◇ inflammatory bowel disease (such as ulcerative colitis or Crohn's disease).

**Inherited risk.** The risk of colorectal cancer is increased when certain gene changes linked to familial adenomatous polyposis (FAP) or hereditary nonpolyposis colon cancer (HNPCC or Lynch Syndrome) are inherited.

#### Lifestyle Risks

- ◇ **Alcohol** Drinking 3 or more alcoholic beverages per day increases the risk of colorectal cancer.
- ◇ **Cigarette smoking**
- ◇ **Diet low in fruits and vegetables**
- ◇ **Eating low-fiber & high fat foods**
- ◇ **Lack of regular physical activity**
- ◇ **Obesity**



## A Colorectal Cancer Survivor's Story



Maria Blas, colorectal cancer survivor, is shown with her husband, former Mayor Roque Blas. Both were former long time residents of Sinajana, Guam, now residing in New Mexico.

“Early detection is key to outliving the dreaded disease known to us as ‘cancer’”, says Mrs. Maria Blas, who was diagnosed with colorectal cancer in February 2007 at the age of 57.

When she was told by her doctor that she had cancer, she was in shock, uttering, “How could this be? I did not have the symptoms of colorectal cancer!”

“My husband and I were determined to fight this disease together. Part of our journey was to educate ourselves in defeating the disease and praying for healing from our Lord, Jesus Christ.”

She was scheduled for surgery at Anaheim Memorial Hospital in California, which was successful. Her surgeon informed her that the cancer did not spread and that chemotherapy was not needed. Maria remarked, “I nearly fell off my bed, overjoyed with the results! Praise the Lord for answering my prayers.”

## — *Maria Blas*

Since then Maria and her husband made a commitment to spread the good news in preventing cancer to both men and women 50 years and older. She shares that early detection and strengthening the immune system are both crucial in getting rid of this disease.

She schedules a yearly physical exam, eats healthy, stays physically active, drinks 8 glasses of water daily, sleeps at least 6 to 8 hours nightly, avoids alcohol and smoking. Most importantly, she continues to live a full happy life with laughter and prayers for protection from “Mr. Cancer.”



## Is CRC Preventable?

Prevention is taking action to lower your risk of cancer. Lifestyle changes can **decrease** your risk:

- ◇ Eating diets high in fruits and vegetables
- ◇ Daily physical activity
- ◇ No smoking/tobacco use.

Cancer screening can help find cancer **before** you have symptoms. Screening helps **decrease chances of dying** from the disease.

- ⇒ Screening can find the disease early.
- ⇒ Polyps can be removed before they turn into cancer.