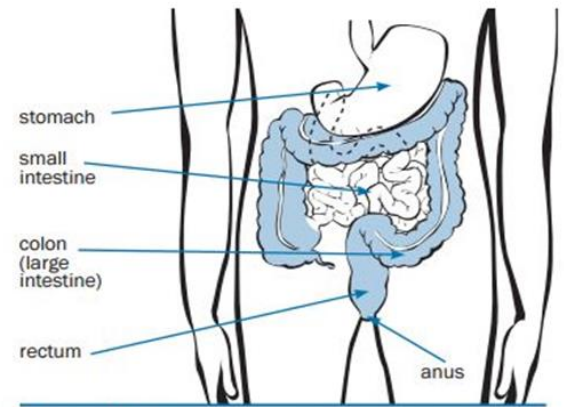


COLORECTAL CANCER IN TENNESSEE

What is Colorectal Cancer?

Colorectal cancer is a common cancer that starts in the colon or the rectum. Most colorectal cancer is derived from abnormal growths called polyps, inside the colon or rectum.

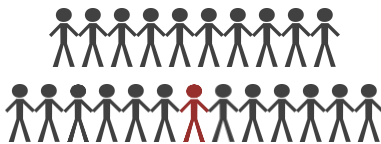
From 2005 until 2014, colorectal cancer was the fourth most commonly diagnosed cancer in men and women combined in Tennessee and the United States. Colorectal cancer was the second leading cause of cancer-related deaths among men and women in Tennessee and the United States during the same time period.



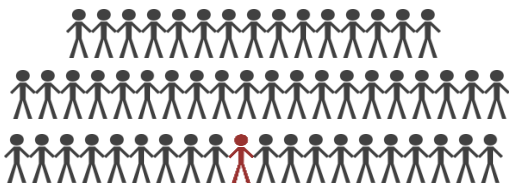
Colon and Rectum

Image courtesy of the Centers for Disease Control and Prevention

RISK FACTORS



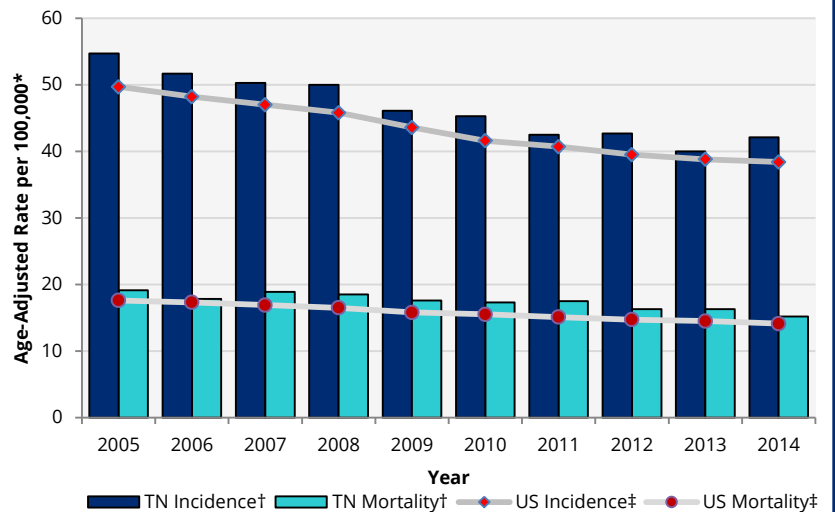
Roughly **ONE** in 23 Americans will get colorectal cancer in their lifetime.



Roughly **ONE** in 55 Americans will die from colorectal cancer in their lifetime.

TRENDS IN TENNESSEE AND UNITED STATES

FIGURE 1. COLORECTAL CANCER INCIDENCE AND MORTALITY TRENDS, TENNESSEE AND UNITED STATES, 2005-2014



*Age-adjusted to the 2000 US standard population (19 age groups – Census P25-1130) standard.

† Source: Office of Cancer Surveillance, Division of Policy, Planning and Assessment, Tennessee Department of Health.

‡ Source: United States Cancer Statistics: 1999-2014 Incidence and Mortality, WONDER Online Database. United States Department of Health and Human Services, Centers for Disease Control and Prevention; 2016.

- From 2005 to 2014, colorectal cancer incidence and mortality rates in Tennessee have declined by 23.1 percent and 20.3 percent, respectively.
- During 2005-2014, colorectal cancer incidence and mortality rates in the United States declined by 22.7 percent and 19.9 percent, respectively.
- In 2014, Tennessee had the 16th highest colorectal cancer incidence rate (tied with Georgia) and the 16th highest colorectal cancer mortality rate in the United States.

Risk Factors You Can Change

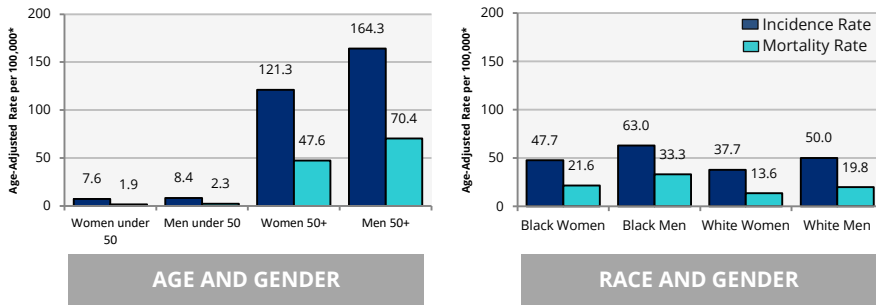
- Being overweight or obese
- Physical inactivity
- Diets high in red and processed meats
- Tobacco use
- Heavy alcohol use

Risk Factors You Cannot Change

- Being over 50 years of age
- Personal history of inflammatory bowel disease
- Personal history of colorectal polyps
- Family history of colorectal cancer
- Having an inherited syndrome

COLORECTAL CANCER IN TENNESSEE

FIGURE 2. COLORECTAL CANCER INCIDENCE AND MORTALITY RATES BY AGE, RACE, AND GENDER, TENNESSEE, 2005-2014



*Age-adjusted to the 2000 US standard population (19 age groups - Census P25-1130) standard.
 Note: Sample sizes in other racial/ethnic populations were small resulting in unstable rates; thus, rates are only presented for black and white individuals.

- Men in Tennessee have higher incidence and mortality rates than women in Tennessee regardless of age.

STAGES OF COLORECTAL CANCER

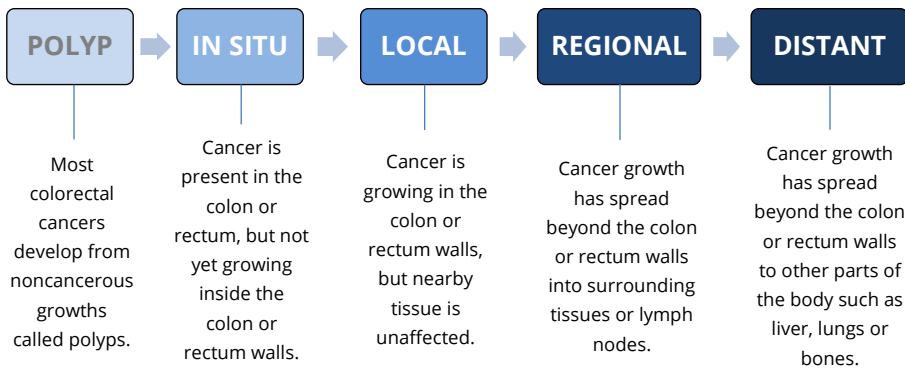
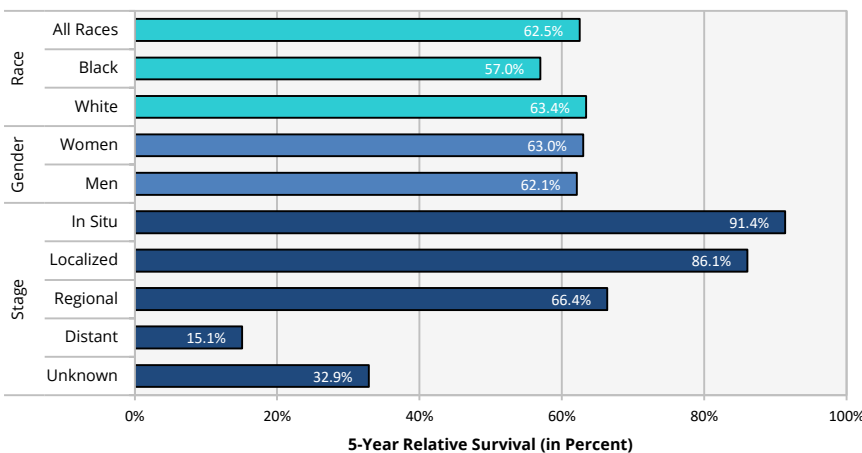


FIGURE 3. COLORECTAL CANCER 5-YEAR RELATIVE SURVIVAL, BY STAGE OF DIAGNOSIS, RACE, AND GENDER, TENNESSEE, 2005-2014



Source: Office of Cancer Surveillance, Division of Policy, Planning and Assessment, Tennessee Department of Health.

- During 2005 to 2014, approximately 62.5 percent of colorectal cancer patients in Tennessee survived five years or more after their initial diagnosis.
- The relative survival rates were higher for individuals diagnosed with colorectal cancer in the early stages (i.e., in situ and localized) as opposed to the late stages (i.e., regional and distant).

COLORECTAL SCREENING

What are the Symptoms?

Some individuals with colorectal polyps or cancer have symptoms that may include:

- Blood in or on your stool
- Constant stomach pain, aches or cramps
- Unexplained weight loss

How can I lower my risk of colorectal cancer?

- Maintain a healthy weight
- Add exercise into your routine
- Limit alcohol intake
- Participate in screening

When should I get tested?

If you're 50 or older, getting a colorectal cancer screening test could save your life.

Tests used for colorectal screening include:

Sigmoidoscopy

- A flexible, lighted tube is passed into the rectum and lower colon to look for cancer.

Colonoscopy

- A longer, flexible tube is used to look at the entire colon and rectum.

Blood Stool Test

- A sample stool is checked for disease.

Double Contrast Barium Enema

- X-rays of the colon and rectum are taken after liquid containing barium is inserted into the rectum.



According to the 2014 Behavioral Risk Factor Surveillance Survey, 68.8 percent or about seven in ten Tennesseans over the age of 50 had received a sigmoidoscopy or colonoscopy in their lifetime.



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