



Although there is still much work to do in the fight against the disease, the FDA has approved several treatments that have helped to improve survival rates for those living with colorectal cancer.

FDA encourages diverse participation in clinical trials.

If you think a clinical trial may be right for you, talk to your health care provider.

You can also search for clinical trials in your area at www.clinicaltrials.gov.

FOR MORE INFORMATION

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COLORECTAL CANCER: STAGES AND TREATMENT



FDA Office of Minority
Health and Health Equity



What is colorectal cancer?

Colorectal cancer usually forms when malignant (cancerous) cells form an abnormal growth inside the large intestine (comprised of the colon and rectum). Colorectal cancer may be called “colon cancer” for short. Colorectal cancer doesn’t always cause symptoms, especially at first. If you have symptoms, they may include:

- Changes in bowel movements (like constipation or diarrhea, narrow or bloody stools, feeling bowel is not fully empty)
- Vomiting
- Sudden weight loss
- Gas pains or cramps
- Feeling tired or weak

The cancer can metastasize (spread) from where it began to other parts of the body. The earliest stage of colorectal cancer is stage 0 (a very early cancer). Advanced cancers range from stage 1 to 4 depending on how much they have spread.



Stage 0	The cancer is only in the innermost lining of the large intestine.
Stage 1	The cancer has spread deeper into the lining of the large intestine.
Stage 2	The cancer has spread through the lining of the large intestine and may have spread to nearby tissues or organs.
Stage 3	The cancer has spread to nearby lymph nodes.
Stage 4	The cancer has spread through the blood and lymph nodes to other parts of the body.

COLORECTAL CANCER SCREENING

If you are age 45 and older or have a higher risk of colorectal cancer, regular screening can result in earlier interventions that lower your chances of dying from cancer. Screening tests can find both precancerous and cancerous changes in stool, tissues, blood, and genes. The survival rate for 9 out of 10 people is high if the cancer is found early and treated appropriately.

How is colorectal cancer treated?

Patients have multiple options for the treatment of colorectal cancer, including medications and procedures to remove or destroy the cancer cells.

Treatments generally fall under one of three categories:

Chemotherapy medications destroy cancer cells so they can no longer grow or divide.

Targeted therapy medications block the spread of cancer cells in specific genes, proteins, or tissues.

Immunotherapy medications boost the immune system’s ability to recognize, fight, and destroy cancer cells.



Other treatments may be used alone or in combination with medications:

Surgery removes growths, affected areas, or all or parts of certain organs.

Ablation destroys small tumors with high-energy radio waves, microwaves, alcohol, or cold gasses.

Embolization reduces blood flow to cancer cells by injecting particles into an artery.

Radiation therapy destroys cancer cells using high-energy x-rays or particles.

Your health care provider will consider several factors when recommending a treatment plan, such as the stage of cancer, possible side effects, and your preferences and overall health. You should also talk to your health care provider about what type of diet and exercise regimen to follow during treatment and how to quit smoking if you smoke.

