

The Burden of Colorectal Cancer in North Dakota

Summer 2006

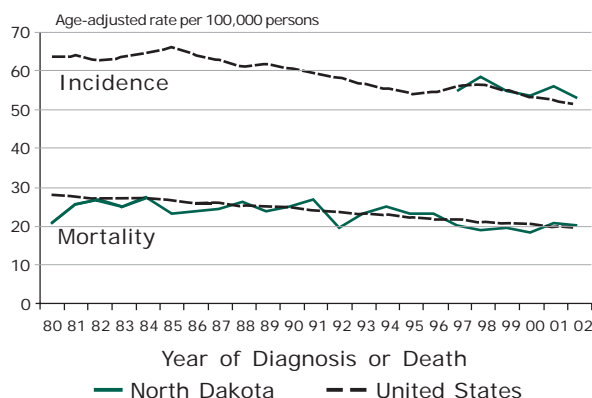
What Is Colorectal Cancer?¹

Colorectal cancer is an uncontrolled growth of cells that originates in the colon or rectum.

Colorectal Cancer in the United States²

- ❖ Colorectal cancer is the third most frequently diagnosed cancer in men and women.
- ❖ One in 17 men (5.9 percent) and one in 18 women (5.5 percent) will be diagnosed.
- ❖ Incidence and death rates have decreased over time (Figure 1).
- ❖ It is estimated that 106,000 colon cancer cases and 41,000 rectal cancers will be diagnosed in 2006.

Figure 1. Colorectal Cancer Rates, 1980-2002



Note: North Dakota has cancer incidence data for 1997-2002 only.

- ❖ An estimated 55,000 deaths due to colorectal cancer cases will occur in 2006.
- ❖ In 2006, it is estimated that about nine percent of all cancer deaths will be due to colorectal cancer.

Risk Factors¹

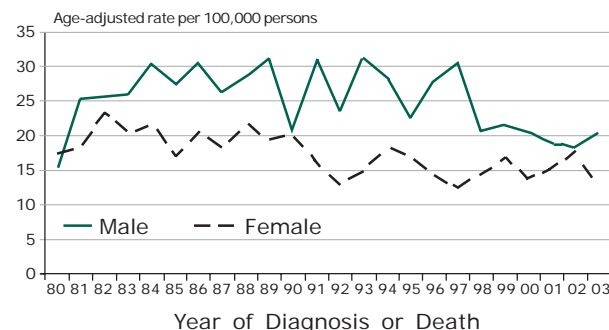
- ❖ Family history
- ❖ Ethnic background
- ❖ Previous colorectal cancer
- ❖ A history of polyps
- ❖ A history of bowel disease

- ❖ Advanced age
- ❖ Poor diet
- ❖ Lack of exercise
- ❖ Overweight
- ❖ Smoking
- ❖ Alcohol

Colorectal Cancer in North Dakota³

- ❖ Approximately 400 new cases of colorectal cancer occur each year.
- ❖ In 2000, about 2,300 North Dakotans were living with colorectal cancer.
- ❖ More males die from colorectal cancer, but females have a higher risk of being diagnosed (Figures 2 and 3).

Figure 2. North Dakota Colorectal Cancer Mortality Rates, by Gender, 1980-2003



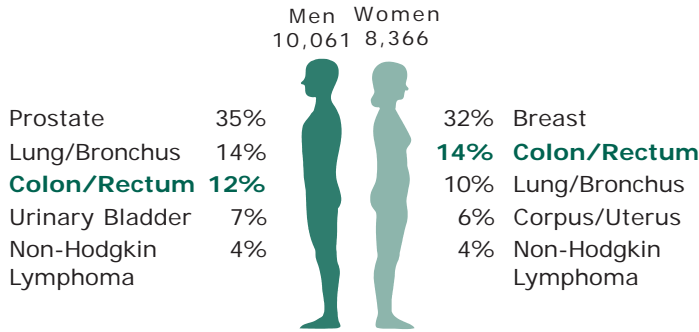
Signs and Symptoms¹

Early colon cancer usually causes no symptoms and can be detected by available colorectal cancer screening tests. However, as colorectal cancer progresses, the disease may cause symptoms. People with the following symptoms should see their health-care provider immediately:

- ❖ Change in bowel habits – such as diarrhea, constipation or narrowing of the stool – that lasts for more than a few days.
- ❖ Feeling that you need to have a bowel movement that doesn't go away even after you do have a bowel movement.
- ❖ Bleeding from the rectum or blood in the stool.

- ❖ Cramping or gnawing stomach pain.
- ❖ Weakness and fatigue.

Figure 3. North Dakota Cancer Cases, 1997-2002



Treatment¹

The three main types of treatment for colorectal cancer are:

- ❖ Surgery
- ❖ Radiation therapy
- ❖ Chemotherapy

Depending on the stage of cancer, two or more types of treatment may be used at the same time, or one after the other.

Survival Rates¹

When colorectal cancer is diagnosed and treated at an early stage, nine out of 10 people live at least five years. However, if the cancer has spread to nearby organs or lymph nodes, the five-year survival rate drops substantially.

Prevention¹

Even though we don't know exactly what causes colorectal cancer, there are some steps you can take to reduce your risk. Beginning at age 50, both men and women should discuss the full range of testing options with their health-care provider and choose one or more of the following testing options:

- ❖ Yearly fecal occult blood test.
- ❖ Flexible sigmoidoscopy every five years.
- ❖ Double-contrast barium enema every five years.
- ❖ Colonoscopy every 10 years.

References

- 1 American Cancer Society. (2006). *Detailed Guide: Colon and Rectal Cancer*. http://www.cancer.org/docroot/CRI/CRI_2_3x.asp?dt=10
- 2 American Cancer Society. (2006). *Cancer Facts and Figures 2006*. Atlanta: American Cancer Society.
- 3 North Dakota Cancer Registry. (2004). Bismarck, ND: Division of Cancer Prevention and Control, North Dakota Department of Health.

The Center for Rural Health at the University of North Dakota School of Medicine and Health Sciences is assisting the North Dakota Department of Health in studying the burden of cancer upon North Dakotans. Results of this research are being used by the state Cancer Planning Committee to develop a plan for reducing the adverse impact of this disease on the lives and families of North Dakota residents.

This fact sheet is a product of the North Dakota Comprehensive Cancer Control project, with data collected by the North Dakota Cancer Registry participating in the National Program of Cancer Registries, and jointly funded by the U. S. Centers for Disease Control and Prevention. For more information, contact:

North Dakota Department of Health
 Division of Cancer Prevention and Control
 600 East Boulevard Ave., Dept. 301
 Bismarck, ND 58505-0200
 Tel: (800) 280-5512
 Fax: (701) 328-2036
<http://www.ndhealth.gov/cancer/>



For more information, contact:

Kyle Muus, PhD, (701) 777-4048
klmuus@medicine.nodak.edu

Center for Rural Health

University of North Dakota
 School of Medicine & Health Sciences
 PO Box 9037

Grand Forks, ND 58202-9037

Tel: (701) 777-3848

Fax: (701) 777-6779

<http://medicine.nodak.edu/crh>

<http://www.raconline.org>

