

# Colonoscopy, FIT, & Cologuard?

## What is the right option for me?



The American Cancer Society recommends that people at **average risk\*** of colorectal cancer **start regular screening at age 45**. People at increased or high risk of colorectal cancer might need to start colorectal cancer screening before age 45. Screening for colorectal cancer can be achieved with a colonoscopy, an exam that visually looks at the colon and rectum, or with a sensitive test that looks for signs of cancer in a person's stool. The different screening modalities all have pros and cons.

### SCREENING OPTIONS:

**Colonoscopy** – This is considered the gold standard of colorectal screening. Recommended for average and higher risk patients.

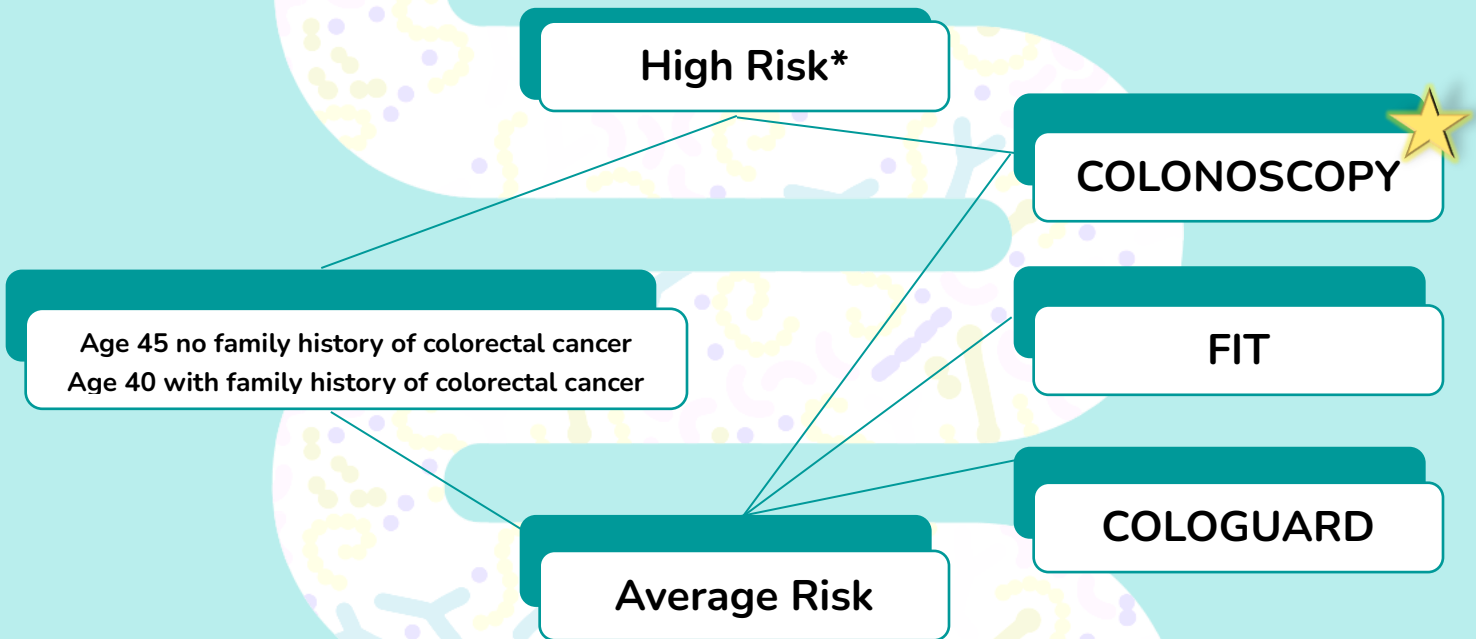
- Pros: 95% accurate at detecting colorectal cancer, 1 step test meaning polyp removal at time of exam; usually covered by insurance with no out-of-pocket
- Cons: Prepping for exam, need to take a day off

**FIT (Fecal Immunochemical Test)** – First line test for average risk patients. 73.8% accurate at detecting colorectal cancer.

- Pros: Easy to do, no change to diet or medication regimen.
- Cons: Does not detect all cancers or polyps, has to be completed every year.

**Cologuard** – Second line test for average risk patients.

- Pros: Can be completed at home.
- Cons: \$500 out of pocket expense not covered by all insurances. Up to 45% false positive. Not recommended by American College of Physicians. If positive, colonoscopy needs to be completed.



**\*Am I high risk of having colorectal cancer? If you answer yes to the following, you are at a higher risk of having colorectal cancer and should have the gold standard colonoscopy.**

- A personal history of colorectal cancer or certain types of polyps
- A family history of colorectal cancer
- A personal history of inflammatory bowel disease (ulcerative colitis or Crohn's disease)
- A confirmed or suspected hereditary colorectal cancer syndrome, such as familial adenomatous polyposis (FAP) or Lynch syndrome (hereditary non-polyposis colon cancer or HNPCC)
- A personal history of getting radiation to the abdomen (belly) or pelvic area to treat a prior cancer.