

March is Colorectal Cancer Awareness Month: Here's What to Know

Learn about the warning signs, screening advice and recent treatment advancements

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According to the latest research from scientists at the [American Cancer Society](#) (ACS), colorectal cancer (CRC) has moved up from being the fourth leading cause of cancer death in both men and women under 50 years old just two decades ago, to being first in men and second in women. An estimated 53,010 deaths are expected from CRC during 2024 in the United States. A large proportion of CRC incidence and mortality is attributed to modifiable risk factors, and CRC can be prevented with regular screening, surveillance, and treatment.

[Dr. William Dahut](#) is the chief scientific officer at the American Cancer Society. For Colorectal Cancer Awareness Month, Dr. Dahut reviews the signs and symptoms of the disease, including important information about risk factors, screening, and more:

1- What are the warning signs of colorectal cancer?

"Finding cancer early, when it's small and hasn't spread, often allows for more treatment options," said Dahut. "Some early cancers may have signs and symptoms that can be noticed, but that's not always the case." CRC warning signs might include:

- A change in bowel habits
- Blood in or on your stool (bowel movement)
- Diarrhea, constipation, or feeling that the bowel does not empty all the way
- Chronic abdominal pain, aches, or cramps
- Unexplained weight loss

2- Who is at risk for colorectal cancer?

"Many lifestyle-related factors have been linked to CRC," said Dahut. "In fact, more than half of all CRCs are linked to risk factors that can be changed including being overweight or obese, certain

types of diets, smoking, alcohol use, being older, and having a personal history of inflammatory bowel disease or a family history of CRC.”

3- Colorectal cancer is the leading cause of cancer death in the Hispanic community. What are some high-risk factors unique to Hispanic and Latino individuals?

“For people of Hispanic and Latino descent in the U.S., risk factors for CRC include a history of colorectal polyps or colon, inflammatory bowel conditions (such as ulcerative colitis and Crohn’s disease), obesity or type 2 diabetes, both of which are more prevalent among Hispanic and Latino individuals,” said Dahut. “Also, being over 50 years old and male, having a close relative who has had polyps or colorectal cancer and inherited conditions such as familial adenomatous polyposis or Lynch syndrome are also risk factors.”

4- What is the treatment for colorectal cancer? Have there been any advancements in treating the disease?

“Besides surgery and chemotherapy, the most recent innovation for a subset of CRCs involves immunotherapy, which uses your body’s immune system to fight cancer,” said Dahut. “Targeted therapies are also being used in combination with chemotherapy drugs or by themselves. Depending on the type and stage of cancer, a care team will discuss the best treatment options for each patient.”

5- Are there screening tests for colorectal cancer? What about at-home tests?

“The ACS [recommends](#) people at average risk start regular screening at age 45. Several test options are available for CRC screening, including a colonoscopy, considered the gold standard, and stool-based at-home tests,” said Dahut. “Individuals with a family history or genetic predisposition should begin screening before age 45 years to reduce risk.”

The ACS launched the [“I Love You, Get Screened”](#) campaign to encourage everyone to talk to their loved ones about cancer screening.

Also, the ACS and the [Colorectal Cancer Alliance](#) (Alliance) are joining forces on [Your Colon is 45](#) - an initiative aimed at promoting CRC screening for individuals aged 45 and above. Visit [YourColonIs45.org](#) for resources on CRC prevention, including a personalized screening quiz, a screening locator, and an e-card to remind friends and loved ones to get screened.

For more information on CRC detection and diagnosis, visit [cancer.org](#).

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