

THE IMPORTANCE OF COLORECTAL SCREENING

Colon cancer is one of the most common cancer diagnoses and one of the leading causes of cancer-related deaths. Regular colorectal screenings are the most powerful tool for early detection and treatment, yet four out of 10 people in our region do not get screened.

While colonoscopies are the most effective colorectal screening, there are other options. It is important to discuss what option is right for you with your primary care provider.

WHEN SHOULD I BEGIN COLORECTAL SCREENINGS?

Patients with average risk for colon cancer should begin screenings at age 50. Always talk to your primary care provider about your individual screening needs.

St. Elizabeth Physicians is the multi-specialty physician organization of St. Elizabeth Healthcare, one of the oldest, largest and most respected medical providers in the Greater Cincinnati and Northern Kentucky region.

Our combined reputation has been built through unyielding dedication to our patients and associates. We are focused on introducing innovative treatments, technology and processes that lead not only to better patient care and patient experience, but to the overall improvement of the health and wellness of our region.

Schedule an appointment by calling (800) 737-7900 or visit stedocs.com for more information.

COLORECTAL SCREENINGS

YOUR GUIDE TO SCREENING OPTIONS



TYPE OF SCREENING


FREQUENCY


COST RANGE
(insurance dependent)


DETECTION
RATE


PROS


CONS


BOWEL
PREPARATION


SEDATION


TIME
COMMITMENT


HOME VS.
IN-OFFICE

STRUCTURAL EXAM



COLONOSCOPY

Finds and removes precancerous growths before they become cancer.

Every 10 years

\$0-\$1600

★★★★★

- Examines entire colon
- Ability to biopsy and remove polyps
- Can diagnose other diseases
- Performed by a specialist

- Need ride home
- May miss a day of work
- Risk of bowel tears or infections (0.1 - 0.3%)

Full

Yes

Requires 1-2 days off work

In-Office

STOOL TEST



STOOL DNA TEST
(Cologuard)

Looks for particular DNA mutations due to cancerous tumors or precancerous polyps.

Every 3 years

\$0-\$649

★★★

- Noninvasive
- Completed in the privacy of your home
- Single stool sample required
- No pretest dietary limitations
- Captures most advanced polyps

- Colonoscopy needed if abnormalities are detected
- May produce false positive test results

None

No

About an hour

Home

STOOL TEST



FECAL IMMUNOCHEMICAL TEST (FIT)

Looks for hidden blood in the stool, which can be an early sign of cancer.

Annually

\$0-\$65

★

- Noninvasive
- Completed in the privacy of your home
- Single stool sample required
- No pretest dietary limitations

- Colonoscopy needed if abnormalities are detected
- May produce false positive test results
- Less sensitive for the detection of colorectal cancer

None

No

One hour

Home