What is colorectal cancer?
Colorectal cancer is a disease in which healthy cells in the lining of the colon or rectum change and grow out of control. This cell growth can form a noncancerous polyp that could become a cancerous tumor. Most colon and rectal cancers are a type of tumor called adenocarcinoma. In the United States, colorectal cancer is the third most common type of cancer diagnosed in men and women separately.

What is the function of the colon and rectum?
The colon and rectum make up the large intestine, which plays an important role in the body’s ability to process waste. The large intestine turns food digested by the stomach and small intestine into fecal waste, or stool, that leaves the body through the anus.

What does stage mean?
The stage is a way of describing where the cancer is located, if or where it has spread, and whether it is affecting other parts of the body. There are 5 stages for colorectal cancer: stage 0 (zero) and stages I through IV (1 though 4). Descriptions and illustrations of these stages are available at www.cancer.net/colorectal.

How is colorectal cancer treated?
The treatment of colorectal cancer depends on the size and location of the tumor, whether the cancer has spread, and the person’s overall health. Typically, surgery to remove the tumor is the first treatment. Additional treatment may be given to lower the risk of the cancer returning or treat cancer that has spread. This may include radiation therapy, chemotherapy, and targeted therapy. Targeted therapy is a treatment that targets the cancer’s specific genes or proteins that contribute to cancer growth. Additional surgery may also be used to remove cancer that has spread past the colon and rectum. When making treatment decisions, people may also consider a clinical trial; talk with your doctor about all treatment options. The side effects of colorectal cancer treatment can often be prevented or managed with the help of your health care team. This is called palliative care and is an important part of the overall treatment plan.

How can I cope with colorectal cancer?
Absorbing the news of a cancer diagnosis and communicating with your health care team are key parts of the coping process. Seeking support, organizing your health information, making sure all of your questions are answered, and participating in the decision-making process are other steps. Talk with your health care team about any concerns. Understanding your emotions and those of people close to you can be helpful in managing the diagnosis, treatment, and healing process.
Questions to ask the doctor
Regular communication is important in making informed decisions about your health care. Consider asking the following questions of your health care team:

- What type of colon or rectal cancer do I have?
- Where exactly is the cancer located?
- Can you explain my pathology report (laboratory test results) to me?
- What stage is the colon or rectal cancer? What does this mean?
- Would you explain my treatment options?
- What clinical trials are available for me? Where are they located, and how do I find out more about them?
- What treatment plan do you recommend? Why?
- What is the goal of each treatment? Is it to eliminate the cancer, help me feel better, or both?
- Who will be part of my treatment team, and what does each member do? Do they have experience treating colorectal cancer?
- How will this treatment affect my daily life? Will I be able to work, exercise, and perform my usual activities?
- Will this treatment affect my ability to become pregnant or have children?
- What long-term side effects may be associated with my cancer treatment?
- If I’m worried about managing the costs of cancer care, who can help me?
- Where can I find emotional support for me and my family?
- Whom should I call with questions or problems?

Additional questions to ask the doctor can be found at www.cancer.net/colorectal.

The ideas and opinions expressed here do not necessarily reflect the opinions of the American Society of Clinical Oncology (ASCO) or The Conquer Cancer Foundation. The information in this fact sheet is not intended as medical or legal advice, or as a substitute for consultation with a physician or other licensed health care provider. Patients with health care-related questions should call or see their physician or other health care provider promptly and should not disregard professional medical advice, or delay seeking it, because of information encountered here. The mention of any product, service, or treatment in this fact sheet should not be construed as an ASCO endorsement. ASCO is not responsible for any injury or damage to persons or property arising out of or related to any use of ASCO’s patient education materials, or to any errors or omissions.

To order more printed copies, please call 888-273-3508 or visit www.cancer.net/estore.

TERMS TO KNOW

Adenoma:
A specific type of polyp that is likely to become cancerous

Benign:
A tumor that is not cancerous

Biopsy:
Removal of a tissue sample that is then examined under a microscope to check for cancer cells

Chemotherapy:
The use of drugs to destroy cancer cells

Colonoscopy:
A test that allows doctors to look inside the colon and rectum for polyps or cancer using a colonoscope (lighted tube)

Lymph node:
A tiny, bean-shaped organ that fights infection

Malignant:
A tumor that is cancerous

Metastasis:
The spread of cancer from where it began to another part of the body

Oncologist:
A doctor who specializes in treating cancer

Polyp:
A growth in the colon or rectum that is a risk factor for colorectal cancer

Prognosis:
Chance of recovery

Radiation therapy:
The use of high-energy x-rays to destroy cancer cells

Tumor:
An abnormal growth of body tissue