

# Colorectal cancer rises in adults under age 50

By Sheri Pope

Colorectal cancer is ranked fourth in new cancer diagnoses in Montana. Each year, nearly 500 Montanans are diagnosed with colorectal cancer.

Nationwide, more younger adults are getting diagnosed, so the recommendation to start screening changed from age 50 to 45.

Nearly 18,000 people under age 50 will be diagnosed this year in the United States. Deaths are increasing annually in individuals younger than 50 years and in Native Americans younger than 65 years, according to the American Cancer Society. Colorectal cancer is “rapidly shifting to diagnosis at a younger age, at a more advanced stage”, the Cancer Society reported in 2023.

Meanwhile, the number of older Americans being diagnosed with this type of cancer is dropping. That decrease is attributed to regular preventive screenings and lower rates of tobacco use.

Health experts are unsure why colorectal cancer has increased in young adults. Some risk factors are common with all ages: obesity, unhealthy diet, physical inactivity, smoking and vaping tobacco. Heredity and environment may also contribute to the increase.

Healthy habits known to lower cancer risk include:

- Eating a diet with lots of vegetables, fruits and whole grains.
- Eating less red and processed meat.
- Avoiding alcohol.
- Avoiding tobacco use.
- Maintaining a healthy weight.

Symptoms of colorectal cancer may include changes in bowel habits, ongoing discomfort in the belly, frequent diarrhea or constipation, rectal bleeding and blood in the stool. A feeling that the bowel doesn't empty all the way during a bowl movement, continued weakness or being tired and losing weight unintentionally are other symptoms to share with your medical provider.

## **Get screened**

Screening can find precancerous polyps so that they can be removed before turning into cancer. Screening can find cancer early when treatment works best.

FIT tests and Cologuard are effective in-home screening tests when done yearly. FIT is a simple, noninvasive stool test that is recommended annually for people age 45 and older who don't have high risk for colorectal cancer. Both Cologuard and FIT tests look for signs of blood in the stool and abnormal DNA that could be a sign of cancer or polyps. If either of these tests come back abnormal, you will need to have a colonoscopy.

Colonoscopy is the gold standard of colorectal cancer screening. This is an outpatient procedure performed in a hospital with moderate or deep sedation. A screening colonoscopy is performed if there are no family history or symptoms, and no polyps are found during the procedure. Having symptoms, a family history or finding polyps during the procedure are all considered diagnostic.

Polyps in the colon can be removed or biopsied during the test. Depending on size and the number of polyps, a more frequent testing schedule will be needed. If no polyps or abnormalities are found, and there are no symptoms or family history, your physician may recommend a follow-up colonoscopy in 10 years.

Check with your insurance plan to learn how you are covered for a screening and diagnostic colonoscopy. Talk with your physician so you can make the best cancer prevention decision for your health.

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