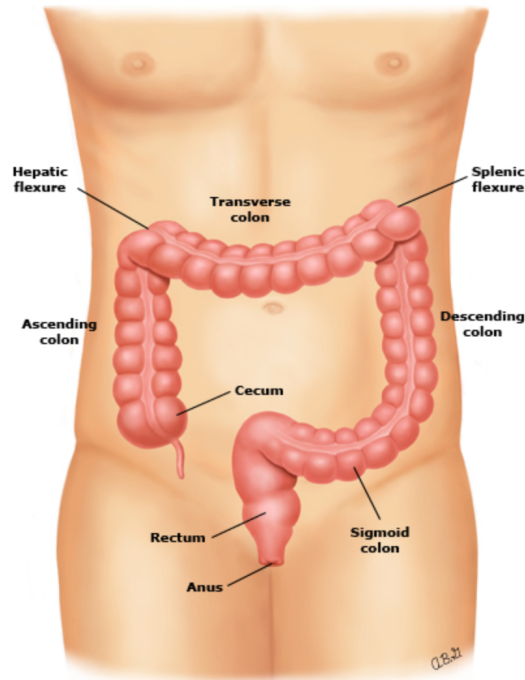


## Overview

Colon and rectal cancer are cancers that involve the lowest part of the digestive system: the large intestine and the rectum

**Diagram of the colon and rectum**



This figure shows the different parts of the colon (also known as the large intestine), the rectum, and the anus.

## Symptoms

The most common symptoms of colon and rectal cancer include:

- Stomach pain or frequent gas pains
- Change in bowel habits (constipation or diarrhea)
- Blood in the bowel movements
- Feeling weak or tired
- Low iron level, commonly with anemia (iron deficiency anemia)
- Black or dark-colored stools

## Diagnosis

Your doctor or nurse may be concerned that you could have colon or rectal cancer if you have one or more of the above symptoms. In this case, a colonoscopy is often used to look inside the rectum and large intestine. Cancers growing within the large intestine and rectum can be seen during a colonoscopy, and a biopsy (removal of a piece of tissue for examination) can be done, confirming the presence of a cancer.

## Treatment

The treatment of colon cancer usually involves surgery, and it may also involve chemotherapy; radiation therapy is only rarely needed.

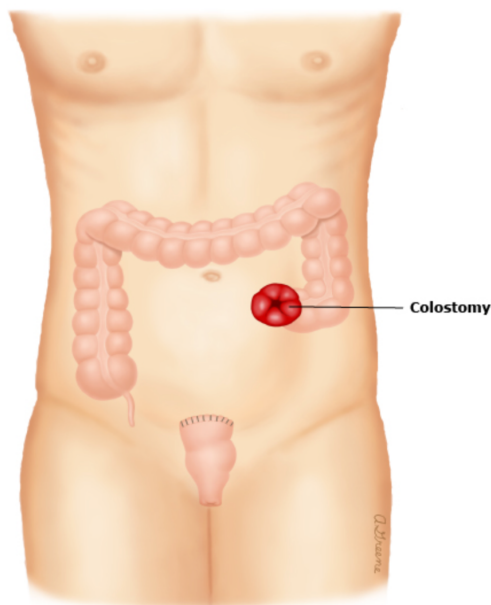
**Surgery** — The initial treatment of colon cancer usually involves surgery.

During the surgery, the cancerous part of the colon and surrounding tissues are removed. The lymph nodes (round organs that serve as filters for blood from the intestines) within this surrounding tissue are examined under a microscope to determine if the cancer has spread beyond the colon.

In most people, the two ends of the colon can be reconnected immediately after the cancerous part has been removed. If this can be done, it means that you will continue to have bowel movements normally, through your rectum and anus.

In other cases, the colon cannot be reconnected during the initial surgery. This can happen if the surgeon feels there is a high chance that the reconnection will fail or if the tissues are inflamed and need time to heal. If this occurs, the surgeon will sew the colon (and at times the small bowel) to an opening in the skin on the abdomen. The opening is called an ostomy (colostomy if the colon is sewn to the abdominal wall or ileostomy if the ileum is sewn to the abdominal wall).

Colostomy



You will wear a bag over the ostomy to collect bowel movements.

The ostomy is usually temporary. The two ends of the colon can often be reconnected after a few months, sometimes after chemotherapy is completed. In other cases, you will need the colostomy permanently.

**Chemotherapy** — Chemotherapy is a treatment given to slow or stop the growth of cancer cells. Even after a colon cancer has been completely removed with surgery, cancer cells can remain in the body, increasing the risk of the cancer coming back (called a relapse or recurrence).

In some people, chemotherapy can eliminate these cancer cells and increase the chance of cure. This type of chemotherapy is called "adjuvant," which means that it is given after a curative surgery (at which time all the tumor was removed).

Most treatments involve a combination of several chemotherapy drugs, which are given in a specific order on specific days. Most of the drugs are given into the vein (intravenous [IV]), but sometimes a single drug will be recommended, which can be given in pill form. Chemotherapy is given for either three months or six months, depending on the stage of the cancer. Your doctor will talk to you about your options for regimen and duration of treatment, as well as what side effects you may experience.