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Colorectal Cancer Screening Myths



William Lee, M.D., FACS

Colorectal cancer is highly treatable and often preventable with regular screenings.

"Despite the benefits of colorectal cancer screening, many people avoid colonoscopies due to fear or misconceptions about this disease," said William Lee, M.D., FACS, a board certified general surgeon affiliated with Salem Regional Medical Center's (SRMC) medical staff and Salem General Surgery.

Common myths associated with colonoscopies and colorectal cancer include:

Myth: I don't have symptoms, so I don't need to be screened.

"Most colorectal cancers start as benign polyps, or growths on the lining of the colon," Dr. Lee explained. "Polyps often produce no symptoms, but may become cancerous over time. These growths can be removed during a colonoscopy to reduce a person's risk of developing colorectal cancer. Routine screening can also help detect cancer at an early stage, when the survival rate is greater than ninety percent."

Myth: Colonoscopies are too painful.

"During the exam, the doctor inserts a flexible tube with a tiny video camera at the tip called an endoscope to examine the colon and rectum. You may feel some pressure and cramping, but will be given medication to make you sleepy and comfortable," Dr. Lee said.

Myth: The preparation solution is too hard to drink.

Dr. Lee noted that the at-home process of preparing for a colonoscopy has improved in recent years. Newer preparation solutions involve drinking less fluid leading up to the exam, and some of the solutions have an improved taste. Mixing the solution with an electrolyte-balanced drink like Gatorade can also help with the taste.

Myth: I can't do anything to reduce my risk of colorectal cancer.

Along with screening, maintaining a healthy weight, exercise, eating plenty of fruits and vegetables, limiting consumption of processed foods and red meat, not smoking and avoiding alcohol can lower colorectal cancer risk.

Dr. Lee recommends adults begin colorectal cancer screening at age 45, and then continue being screened at regular intervals. Those with a family history of colon cancer or history of other cancers or colorectal diseases may need to be screened earlier.

Besides standard colonoscopies, stool tests and virtual CT colonoscopies are other screening options for colorectal cancer. If stool tests and CT colonoscopies are abnormal, then a colonoscopy is recommended. Pre-cancerous polyps can only be removed during a traditional colonoscopy. Dr. Lee advises patients talk to their health care providers about the screening that's right for them.

William Lee, M.D., FACS, sees patients at Salem General Surgery, located at 2094 East State Street, Suite A, in Salem. Appointments with Dr. Lee can be scheduled by calling 330-337-2868.