At age 50 and over, it's time for me to get informed!

Colorectal Cancer Screening

Information on the screening programme in your canton



What do I need to know about colon cancer?

It is the third most common cancer in Switzerland. Every year in Switzerland, colon cancer affects 4,300 people and 1,700 people die from it. Most cases of colon cancer occur after the age of 50.

Small growths may appear in the colon. These are called polyps. The majority of polyps are harmless to your health. Only a few of them develop slowly into cancer. This type of polyp is called an adenoma.

Why is colon cancer screening so important?

- Decrease in the number of people with colon cancer.
- Less treatment for colon cancer.
- Fewer deaths from colon cancer.

Without screening: 2 out of 80 people die of colon cancer before the age of 80. With regular screening: less than 1 in 80 people die of colon cancer before the age of 80.

What are your benefits of participating in the colon cancer screening programme?

- You can be reassured if the test result is negative.
- You will be carefully advised if the test result is positive. Any further procedures will also be discussed with you.
- Precancerous polyps (preliminary stages of cancer) can be removed during the colonoscopy. This will reduce your risk of developing colorectal cancer.

Screening Test Methods

In some cantons, only the FIT test is available. Please check with your canton.



Faecal Immunological Test (FIT)

Early stage colorectal cancer often bleeds a bit. However, the blood in the stools is not visible to the naked eye. That's why there's FIT. This makes it very easy and efficient to measure traces of blood in the stools.



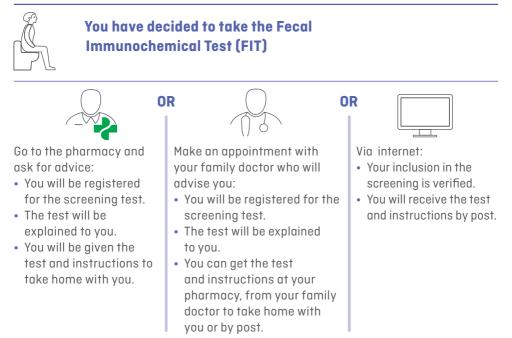
Colonoscopy – endoscopic examin

endoscopic examination of the colon

The colonoscopy is performed by a doctor specializing in gastrointestinal diseases (a gastroenterologist). For the procedure, the doctor inserts an elongated flexible fibre optic tube through the anus into the intestine. A very small camera is fitted on the tip of this tube which permits the doctor to visualise the entire intestine.

What is the screening process?

Have you decided which screening test you would like to do? Below, you can see how each test proceeds.



The test allows you to collect a very small quantity of faeces from your home in a simple way and send it directly to the laboratory.

Important: Women should not perform the test during menstruation. The result could be interpreted inaccurately.

The result will be sent to you by post.

The test shows NO blood in stools.

It is a **negative result**, which means that there are no signs of cancer with this test. 93 in 100 people receive a negative result.

- Repeat the test every 2 years.
- Go to your doctor if you experience any **symptoms** before the next test.

The test shows blood in stools.

This is a **positive result.** The cause of the blood in the stool must be investigated. Approximately 7 in 100 people receive a positive result.

- Make an appointment with your doctor.
- A colonoscopy will be recommended.
- Bleeding often has a different cause other than cancer.



You have decided to have a colonoscopy

Make an appointment with your family doctor:

- You will receive advice.
- You will be registered for screening.



You will then have an appointment with a gastronenterologist for a colonoscopy.



It is very important that your colon is "cleaned out" correctly before the examination. Before colonoscopy, prepare your colon carefully:

- Before the exam, maintain the prescribed diet.
- Take the special cleansing solution the evening before the examination and on the day of the examination.

You will be examined and the result will be discussed with you.

The doctor did not find anything.

The colonoscopy findings were **normal**. Approximately 70 in 100 people receive normal results from a colonoscopy.

- Have another colonoscopy in 10 years.
- If you experience any **symptoms** before the next test, contact your doctor.

The doctor has discovered polyps or cancer.

This is a **conspicuous** colonoscopy. Approximately 30 in 100 people have a conspicuous colonoscopy.

- The polyps are removed and examined by a specialist (pathologist).
- If cancer is diagnosed, further clarification and tests are necessary.
- The doctor will discuss the next steps with you.

What are the advantages and disadvantages of both tests?

	FIT	Colonoscopy
Advantages +	 There is no need for preparation. It is a test that can be done easily and quickly at home. Unnecessary colonoscopies are avoided. 	 This is the reference method for detecting polyps. The doctor can remove polyps directly during the procedure before they develop into cancer.
Can this test be relied upon?	If the test is repeated every 2 years, it is reliable.	The results are reliable if you follow the preparation at home.
Disadvantages	 The test must be repeated every 2 years. If blood is found, a colonoscopy will be required for verification. Bleeding can have a benign cause. The waiting time until your check-up can be a cause for concern. 	 There is a small risk of severe complications (perforation of the intestine or heavy bleeding). This happens in about 2 out of every 1000 colonoscopies. If you are given a sedative, you will not be allowed to drive for 12 to 24 hours.

Limitations

No examination or test exists that detects all very early stages of cancer diseases with 100% accuracy. There is always a risk of developing cancer in the period between two screening tests. This is why it is important to consult your doctor if you have **symptoms**, such as:

- Blood in your stools.
- Digestive disorders, transit disorders.
- You have a bowel movement more or less often than usual.
- Unexplained weight loss.
- Long-lasting tiredness.

Participation

Check whether the screening offer is suitable for you from a medical point of view.

	Yes	No
Do you have any of the following symptoms: blood in your stools, digestive problems or unusual transit (pain, diarrhoea or constipation), more or less frequent bowel movements than usual, unexplained weight loss, lasting tiredness?		
You yourself have or already had colorectal cancer or polyps and must have regular colonoscopy procedures performed for monitoring purposes?		
You have an increased hereditary risk of colorectal cancer?		
Are you being monitored for inflammatory bowel disease?		

Did you answer YES to one or more questions?

If so, talk to your family doctor about how to proceed.

Did you answer NO to all the questions?

If you are between 50 and 69 years old, you can participate in the organised screening. Screening gives you a high probability of avoiding colon cancer or detecting it at an early stage with good prospects for treatment.

- Some cantons and regions have an organised colon cancer screening programme. You can check whether such a programme exists in your canton by using the link below: www.swisscancerscreening.ch/fr/offres-dans-votre-canton.
- In areas without an organised programme, check with your doctor or pharmacist.

How much does the screening test cost?

In principle, both screening examinations are paid for by the health insurance companies for people between 50 and 69 years of age. If you take your examination as part of an organised programme, you will not pay a franchise. Ask about the exact costs and the offer of your programme. Not all programmes offer both types of examination.

For more information

- Swiss Cancer Screening and organized programmes: www.swisscancerscreening.ch
- Krebsliga Schweiz: www.krebsliga.ch
- Magendarmliga Schweiz: www.gastromed.ch
- Your family doctor or pharmacy

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