

Colon Cancer

Noelle Benson

Margaret H. Rollins School of Nursing

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B. Casamento, RN

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Colon cancer is a cancer that forms in the colon or rectum. The colon and rectum are both part of the gastrointestinal system and play a crucial role in bowel elimination. The colon is broken up into four major parts. The ascending colon is the beginning of the colon, and food comes down from the small intestine into this part first. The next part of the colon is the transverse colon, then the descending colon, and lastly the sigmoid. The colon is approximately five feet long and ends with the rectum, which holds the stool before it passes through the anus to be eliminated. If any of these areas of the gastrointestinal system are cancerous, they would be labeled as either colon or rectal cancer or colorectal cancer. Colon cancer in the United States is currently the second most deadly cancer in both men and women (American Cancer Society, 2023). Despite these statistics, there are many screening tools that medical providers can use to diagnose colon cancer at earlier stages, making it easier to treat with better outcomes. Providers are now using stool-based tests to routinely screen their patients. Colonoscopies and CT colonography are additional procedures that can be used to successfully identify any possible indications of colon cancer in patients (Chung et al., 2022). We are also learning ways to prevent the onset of colon cancer to educate patients about. Through prevention and early detection, we can also cut back significantly on healthcare costs related to colon cancer. Nurses play a crucial role in the prevention, treatment, and management of colon cancer as well as the psychological needs of the client and their families.

Statement of the Problem

Colon cancer affects many groups of people. Adults over the age of fifty are more susceptible to this type of cancer. As for gender in a population of one hundred thousand people, 23.3%

of women were diagnosed with colon cancer while 27.2% of men were diagnosed with colon cancer (National Cancer Institute, 2023). Non-Hispanic American Indians/Alaska Natives currently have the highest rate of colon cancer in the U.S., with a combined gender rate of 36.5% (National Cancer Institute, 2023). Another significant risk factor for colon cancer is having a family member that has had colon cancer. The rates of colon cancer for older adults have been declining annually about 1% from 2012 to 2021 while increasing at a higher rate of 2.4% for people under the age of fifty for the same time period (American Cancer Society, 2023).

As we have seen in the rates of prevalence, colon cancer is one of the more common cancers seen in the U.S (National Cancer Institute, 2023). Like most cancers, when caught early, the outcomes for recovery are better than if detected in the later stages. One main reason for this explanation is that in the early stages, colon cancer is localized to a certain part of the colon. The later detection usually indicates that a patient's cancer has metastasized and now affects other systems in the body (National Cancer Institute, 2023). In the earlier stages, when colon cancer is localized, 91.1% of patients survive at least five years after diagnosis. When there is spread to regional lymph nodes, the five-year survival rate goes down to 73.7%. When colon cancer has metastasized to distant structures, the five-year survival rate plummets to 15.7% (National Cancer Institute, 2023). The introduction of routine screening for colon cancer in adults has significantly reduced the number of patients diagnosed later in the disease process, which, as we can see in the survival rate percentages, positively affects life expectancy.

Current statistics project that in 2025 there will be approximately 107,320 new cases of colon cancer in the U.S. (American Cancer Society, 2023). When men and women mortality rates are combined, colon cancer is the second most common cancer death. It is expected to cause over 52,000 deaths in 2025. The mortality rates in older adults continue to decline for

multiple reasons. Screenings allow healthcare providers to see polyps in the colon and remove them before they become cancer. Screening in general helps to diagnose colon cancer earlier on, which leads to better survival rates. Colon cancer screenings are now done routinely on patients as part of their annual checkups. Mortality rates in patients diagnosed with colon cancer under the age of 55 have increased about 1% since the mid-2000s (American Cancer Society, 2023). The survival rates are dependent upon when a patient is diagnosed, but overall colon cancer has a survival rate of 65% if treated (National Cancer Institute, 2023). If colon cancer is not treated, healthcare costs increase with the greater needs of patients, and mortality rates rise. More therapies for treatment of colon cancer would not only benefit the patient but also the nursing community. Many patients in the later stages of the disease require multiple therapies such as surgery, chemotherapy, and radiation. All of which require support from the nursing community.

Risk Reduction/Treatment of the Problem

Preventing colon cancer is the healthcare community's goal. Helping patients with risk factors is an important part of prevention. Some of the biggest risk factors for colon cancer are smoking, being obese, and drinking alcohol (National Cancer Institute, 2024). There is also research into some diets that are harmful to your colon and some diets that are helpful in preventing colon cancer. A recent study showed an increase in colon cancer rates with people eating a more Western diet. This diet is high in foods like red meat, sugar, and processed meats and grains. Most Western diets are also too low in vegetables and legumes (Kato & Sun, 2023). Research is currently being done on using probiotics to enhance your ability to prevent colon cancer (Kato & Sun, 2023). As with many other health conditions, regular exercise is a piece of preventing colon cancer. Research is also showing that patients who routinely use aspirin or NSAIDs have a lower risk of colon cancer (Skriver et al., 2023). Healthcare providers must

weigh the risks with each patient to see if they should recommend using these medications. Removing polyps greater than one centimeter in the colon is also considered helpful to preventing colon cancer from growing (National Cancer Institute, 2024).

As mentioned before, screening for colon cancer on a regular basis leads to earlier detection and is linked to better outcomes. Research shows that screenings should begin around age 45 through age 75. Colon cancer polyps are slow-growing, so if a patient hasn't had one by the age of 75, it is unlikely they would. Many healthcare providers offer stool-based tests that can be done at home and sent to the lab for screening. These tests are typically done every one to three years depending on a patient's history (Chung et al., 2022). One example of the stool-based test is a fecal immunochemical test (FIT). This test uses the sample from the patient to look for markers for cancer in the colon (Shaukat & Levin, 2022). One benefit of FIT is that it's very affordable, and the patient can do it at home. Some patients require a colonoscopy or CT colonography depending on their health history and family history. These tests are usually done every 5 to 10 years depending on the results, risk factors, and symptoms of the patient. There is current research for testing to be done via bloodwork as well (Shaukat & Levin, 2022). The most common treatment for colon cancer is surgery, which, if caught early, can be curative and would usually include a polypectomy or local section. In more advanced stages of colon cancer, surgery would include a total or partial colostomy with a formation of a colostomy or ileostomy. Other therapies used in adjunct with surgery may include chemotherapy, radiation, immunotherapy, and targeted therapy. Psychological nursing also has been shown to positively affect a patient's recovery after having an ostomy placed. With nursing support patients have shown less psychological stress with a decrease in anxiety and depression as well as better sleep and overall resilience (Liu et al., 2024).

Planning of Teaching Content

It's important for those learning about colon cancer to understand the different tools used for screening, what they entail, and how often they should be done. In addition to education about screenings, it's important to educate people on ways they can help reduce their risk of getting colon cancer. During our education sessions, we will have information set up for them to read and then be available for them to ask us questions about the information. We will also develop a game that helps people remember important information. At the session we will have a poster board set up with this information and will be handing out pamphlets we make with key information on screening and prevention of colon cancer.

Conclusion

Colon cancer is a common type of cancer and the second deadliest type. There are some research-based ways to help prevent the development of colon cancer, including diet, reduced alcohol intake, and not smoking (National Cancer Institute, 2024). Screening for colon cancer is also very important, as early detection leads to better outcomes for life expectancy. Depending on the stage in which colon cancer is diagnosed, there are different treatment options. Nurses play a key role in educating and supporting patients in preventing colon cancer and in their treatment when diagnosed. Community education in regard to prevention and screenings for colon cancer is crucial to help reduce rates of colon cancer and mortality from this type of cancer. Understanding the risks and knowing how to advocate for yourself with your healthcare team on which screening to use are important tools for each person to have.

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