

Beebe Healthcare
Margaret H. Rollins School of Nursing
Nursing 102-Nursing Care of Adults
Research Paper: Topical Outline Template

1. Title of the paper: How Public Awareness Influences Colon Cancer Incidence and Prevention.

2. Thesis Statement: Despite being one of the most preventable and treatable cancers when detected early, colon cancer remains as the second-leading cause of cancer related deaths.

3. Introduction:

a. Key points/ background information

- i. Colon cancer is one of the most preventable cancers through screening and lifestyle modifications.
- ii. Colon cancer is becoming increasingly prevalent within the United States and is now the third most diagnosed type. Begins as polyps within the intestinal wall and eventually becomes cancerous. There's many risk factors that are modifiable in preventing the disease. (NIH, Risk factors, prevention and screening of colorectal cancer: A rising problem, 2025)
- iii. Despite being one of the most preventable and treatable cancers when detected early, colon cancer remains as the second-leading cause of cancer related deaths.

4. Body of the paper:

a. **Statement of the Problem**

i. Overview of the problem

1. Colon cancer occurs when polyps form within the intestinal lining and eventually become cancerous. Can occur within rectum or large intestine. (Cleveland Clinic, 2025)
2. Colonoscopies are the gold standard to screening for detecting polyps within the colon. Removing precancerous polyps can stop colon cancer before it starts. (Cleveland Clinic, 2025)
3. Signs include persistent abdominal pain, bloating, blood in stool, constipation or diarrhea, weakness, fatigue, unexplained weight loss. (Cleveland Clinic, 2025)

ii. Significance of the topic

1. Early screenings and diagnosis are pertinent to preventing cancer formation. (American cancer society, Treatment of Colon cancer, by stage, 2024).
2. Survival rates are grouped into how far the cancer has spread but age, overall health, and genetics can impact the outlook. (American cancer society, Treatment of Colon cancer, by stage, 2024).

3. Earlier detection of polyps can lower the extent of treatment. (American cancer society, Treatment of Colon cancer, by stage, 2024).
- iii. Statistical information
 1. Colon cancer diagnoses have increased 2.9% each year from 2013 to 2022 in those younger than 50 years of age. Adults aged 50-64 have had increased diagnoses by 0.4% per year during this time. (American Cancer Society, 2026)
 2. There are an estimated 108,860 new cases of colon cancer expected within 2026. (American Cancer Society, 2026)
 3. For those with localized colon cancer, the 5-year relative survival rate is 91% whereas for those with distant metastasis there's a 13% chance of 5-year relative survival. (American Cancer Society, 2026)
- iv. If left untreated how would this affect the nursing community?
 1. Advanced disease leads to more complications for patients, which require more complex nursing interventions, such as bowel obstruction, stoma care, pain crises, and infections. (Cancer Research UK, Treatment for colon cancer, 2025)
 2. Nurses must manage palliative needs when patients have colon cancer left untreated. (Cancer Research UK, Treatment for colon cancer, 2025)

b. Risk Reduction/ Treatment of the Problem

- i. Prevention
 1. Most people with colon cancer are older than 50 but cases for people younger than 50 are increasing. (Cleveland Clinic, 2025)
 2. Dietary modifications – reducing consumption of fat, sugar, red and processed meat. (NIH, Risk factors, prevention and screening of colorectal cancer: A rising problem, 2025)
 3. Quitting smoking tobacco and drinking alcohol in medium-high doses, reducing weight in obesity/increasing physical activity. (NIH, Risk factors, prevention and screening of colorectal cancer: A rising problem, 2025)
- ii. Screening
 1. Begin screening at age 45 for those with an increased risk. Age 50 for average risk. (NIH, Risk factors, prevention and screening of colorectal cancer: A rising problem, 2025)
 2. ACS states it's reasonable for those in good health at an average risk to screen until age 75. (NIH, Risk factors, prevention and screening of colorectal cancer: A rising problem, 2025)
 - 3.
- iii. Treatment
 1. Surgical intervention includes colectomies.
 2. Chemotherapy, radiation, targeted therapy.

3. These are efficient bettering patient outcomes and decreasing the chance of cancer returning.
- iv. What is the impact this research has on patient care?
 1. Regular physical activity and maintaining a healthy weight lowers the risk of colon cancer by decreasing chronic inflammation and carcinogenesis. (NIH, The Role of Diet and Lifestyle in Colorectal Cancer Incidence and Survival, 2022)
 2. A diet rich in whole grains and fiber decreases risk due to the protective effects. Fiber decreases colonic transit time, decreasing exposure to dietary carcinogens. (NIH, The Role of Diet and Lifestyle in Colorectal Cancer Incidence and Survival, 2022)
 3. Cigarette smoke increases colon cancer risk by 17-25% due to increased risk of serrated polyps. (NIH, The Role of Diet and Lifestyle in Colorectal Cancer Incidence and Survival, 2022)

c. Teaching

- i. 2 learning objectives for the learner
 1. Learners will be able to identify two recommended colon cancer screening methods and state recommended starting age for average-risk adults.
 2. The learners will be able to list three modifiable lifestyle factors that reduce the risk of colon cancer.
- ii. Teaching strategies/ methods you will utilize.
 1. Optional Q&A for learners to individually ask questions and discuss concerns freely.
 2. Teach-back, asking learners questions about key points of when to get screened, modifiable lifestyle changes.
 3. Lecture/discussion of screening methods, risk factors and prevention.
- iii. Teaching tools you will utilize.
 1. Tri-fold poster with simple diagrams of the digestive system – including visuals of where the polyps form and what metastasis looks like.
 2. Providing lists of local screening resources – starting age and frequency.
 3. Lists including diet modifications that are diverse for all cultural groups, while incorporating a high-fiber diet.

5. Conclusion

- a. Summarize the main points of the paper.
 - i. Colon cancer is on the rise but can be highly preventable in many ways.
 - ii. Risk factors can be modified by many factors including maintaining a healthy weight, balanced diet with adequate fiber intake, and engaging in regular physical activity.
 - iii. Beginning screenings for those at an average-risk is recommended at age 50. Earlier screening advised for those with higher-risk factors such as family history or genetic predispositions.

- b. How does this information apply to evidence-based nursing practice?
 - i. Reinforces health promotion and patient education. Ensures that learners can understand modifiable risk factors and the importance of lifestyle choices in preventing colon cancer.
 - ii. Supports screening advocacy and focuses on the benefits of early detection.
 - iii. Guides the nurse in assessing those at higher risk, preventing further incidence.
- c. What is the importance of this paper?
 - i. Puts emphasis on a rising health concern and the need for increased awareness/prevention.
 - ii. Provides information that can help reduce morbidity and mortality, relating to patient's lifestyles and history.
 - iii. Promotes nursing care in communities and their roll to educate and prevent disease to better the community and population.

References

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American Cancer Society. <https://www.cancer.org/cancer/types/colon-rectal-cancer/detection-diagnosis-staging/survival-rates.htm>

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Cleveland Clinic. <https://my.clevelandclinic.org/health/diseases/14501-colorectal-colon-cancer>

