

Polyps in the Colon or Rectum

What are polyps in the colon or rectum?

Polyps are growths on the inner wall of the colon or rectum. The colon and rectum are sections of the large intestine, which is also called the large bowel. The colon is the last 5 feet of the large bowel. The rectum is the last few inches of the large bowel inside the anus, where your bowel movements come out.

Polyps are not harmful unless they turn into cancer. When polyps are found early, they can be removed to prevent cancer.

What is the cause?

The cause of polyps is not known. Anyone can have polyps, but some people are more likely than others to get them. You are more likely to have polyps if:

- You are over 50 years old.
- You have had polyps before.
- Someone in your family has had polyps.
- Someone in your family has had colon or rectal cancer.

What are the symptoms?

Polyps usually don't cause any symptoms. In some cases they may cause:

- Rectal bleeding or blood in bowel movements
- Constipation or diarrhea
- Pain in your belly

How are they diagnosed?

You should be examined for polyps when you reach the age of 50. You may need to be tested earlier than this if you have a family history of colon cancer or polyps. One or more of the following tests may be done to look for polyps:

- **FOBT (fecal occult blood test) or FIT (fecal immunochemical test)** are lab tests that look for hidden blood in your bowel movements (stool), which may be a sign of cancer. Your provider will give you test kits that you will use at home.
- **Flexible sigmoidoscopy** uses a thin, flexible, lighted tube that is put into your rectum and lower part of your colon to look for cancer and polyps. Your healthcare provider can use the scope to remove polyps or other tissue.
- **Colonoscopy** uses a longer scope and can check your rectum and most or all of your colon. Your healthcare provider can use the scope to remove polyps or other tissue.
- **Double-contrast barium enema** uses barium, which is a chalky liquid that shows up on X-rays, to check your rectum and colon. A tube is inserted into your rectum. Fluid containing barium is passed through the tube into your

rectum and colon. Barium sticks to the walls and highlights them to show any abnormal areas. Other names for this test are air contrast barium enema, lower gastrointestinal (GI) exam, and lower GI.

How are they treated?

Polyps are removed when they are found, usually during a colonoscopy. If the polyp cannot be removed with colonoscopy, you may need a laparoscopy or laparotomy.

- Laparoscopy, which uses a small lighted tube put into the belly through a small cut to look at the colon or rectum. The scope may be used to guide other tools to remove the polyp.
- A laparotomy is surgery that uses a larger cut in your belly to remove the part of the colon that contains the polyp.

If not removed early, some polyps can turn into cancer. You may get more polyps. Your provider may recommend that you have a colonoscopy 1 to 5 years after polyps are removed.

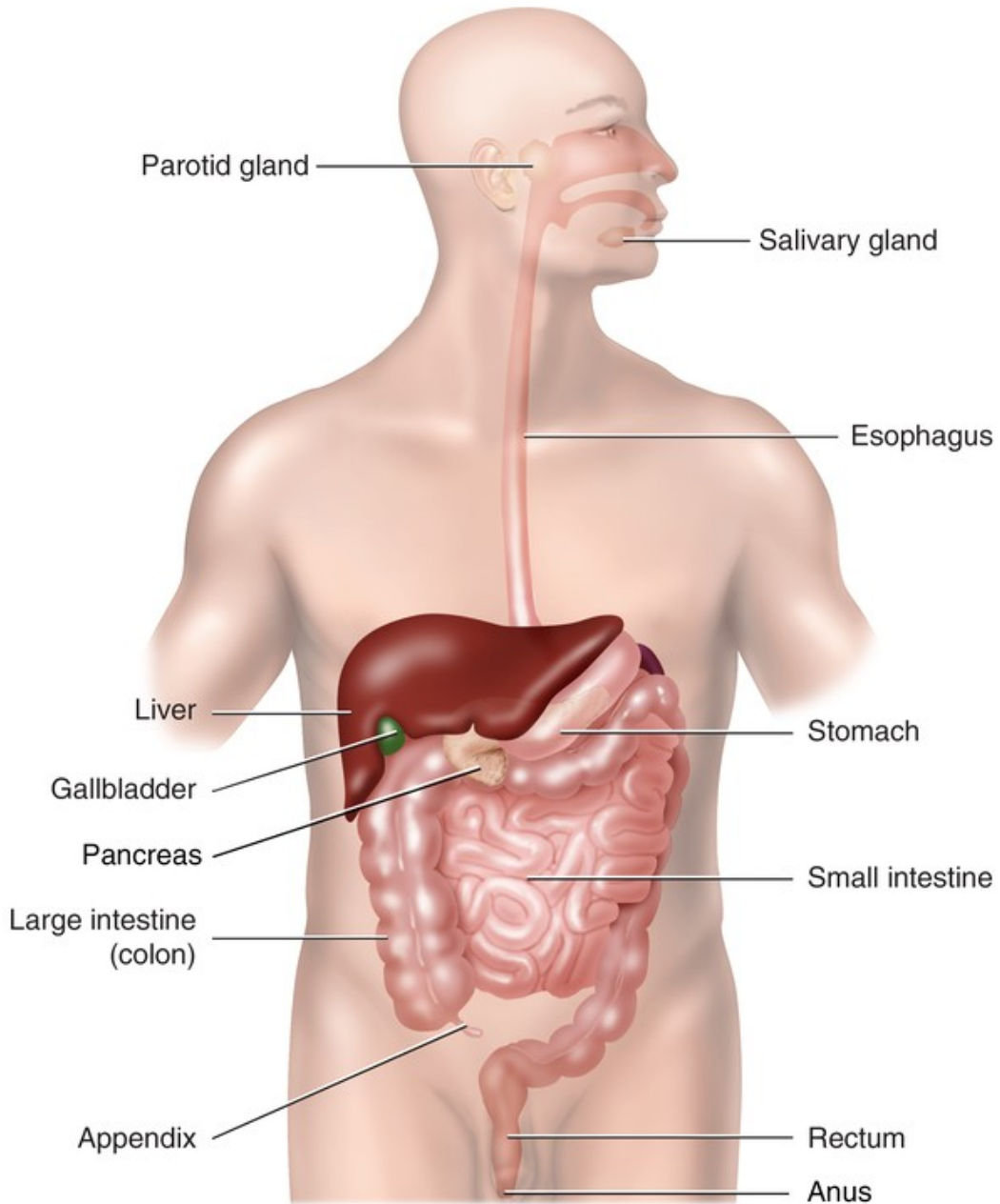
How can I take care of myself?

- Follow your provider's recommendations for tests and treatment.
- Get enough exercise, according to your provider's recommendations.
- Eat low-fat, high-fiber foods.
- Your healthcare provider may recommend that you take calcium supplements or regular doses of nonsteroidal anti-inflammatory medicines (NSAIDs). NSAIDs such as aspirin or ibuprofen, may cause stomach bleeding and other problems. These risks increase with age. Read the label and take as directed. Unless recommended by your healthcare provider, do not take for more than 10 days for any reason.

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Digestive System



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