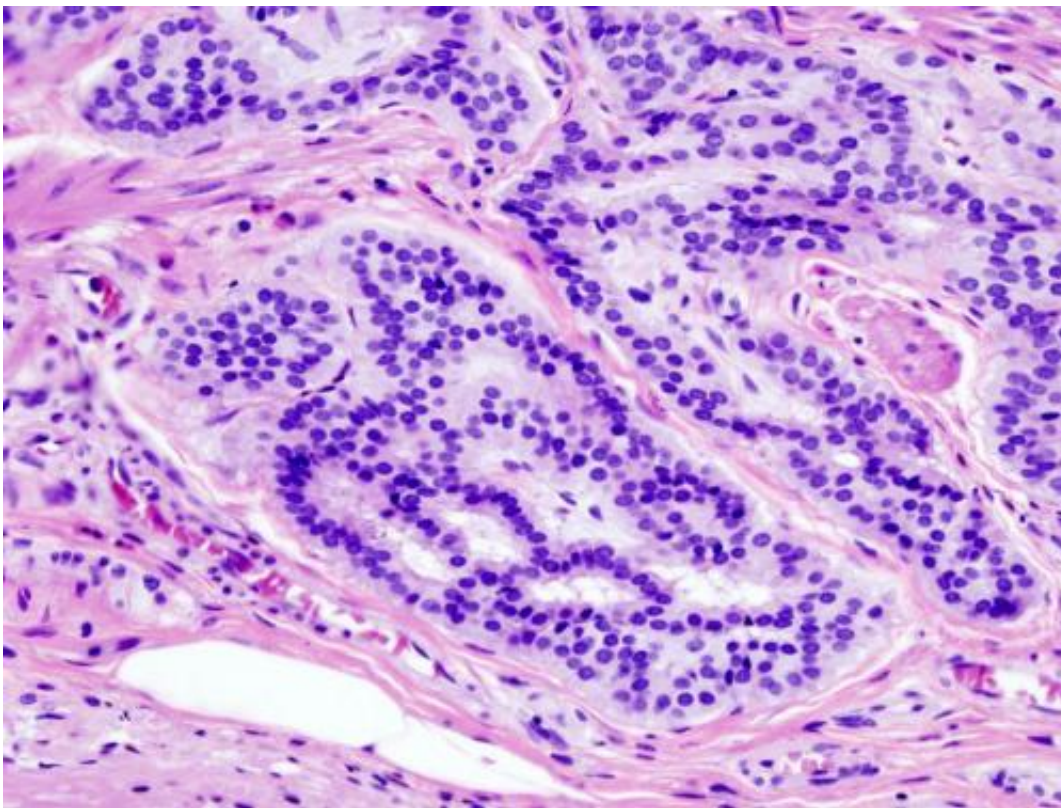


Survey finds colorectal cancer reported more commonly in individuals with unhealthy lifestyle

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Cancer—Histopathologic image of colonic carcinoid. Credit: Wikipedia/CC BY-SA 3.0

A Cleveland Clinic colon cancer risk assessment survey found that respondents who exercised more, followed a healthy diet and did not

smoke were less likely to have a personal history of colorectal cancer or colon polyps. The online risk analysis, which has had more than 27,000 responses from around the world, highlights the modifiable risk factors, such as diet and lifestyle behaviors, reported by patients without a personal history of colorectal cancer and polyps.

The research team also found that less than 10 percent of all [respondents](#) stated they ate five or more servings of fruit, vegetables and grains per day and only about 25 percent undertook at least 30 minutes of exercise four times per week. They additionally found that only 36 percent of respondents were up to date with current colorectal screening, according to the U.S. Preventive Services Task Force guidelines.

"Colon [cancer](#) is a preventable disease. These results emphasize the known modifiable factors that can alter the risk," says Carol A. Burke, MD, a Cleveland Clinic gastroenterologist and the current president of the American College of Gastroenterology. "Colon cancer has had significant decline in the U.S. since 1980 when [colorectal cancer](#) screening was first introduced, but these results show screening for the disease—and adherence to a healthy lifestyle—appear woefully underutilized."

Dr. Burke and colleagues developed the online survey to provide respondents information about their colorectal cancer risk based upon self-reported personal and family history of colorectal cancer and polyps. The survey generates suggestions for each participant to modify risk factors through screening as well as lifestyle and dietary changes. Dr. Burke and co-investigator David Dornblaser, MS, presented their findings in two separate analyses on Sunday, May 7, at Digestive Disease Week 2017.

The five-minute web-based questionnaire, which can be found at clevelandclinic.org/preventcoloncancer, asks respondents about age,

gender, ethnicity, height, weight, dietary factors, smoking history, physical activity, personal and family history of colorectal cancer or polyps, and adherence to screening.

The results showed that the respondents more likely to be adherent to colorectal cancer screening were white and female. They also had less exposure to cigarettes, ate more daily servings of a plant-based diet and exercised more than those who were not up to date with screening. The data also indicated that respondents with a first-degree relative with colorectal cancer and polyps were significantly more likely to adhere to screening: 35.7 percent were adherent compared with 19.4 percent of participants without an affected first-degree relative.

After completing the survey, participants get a score of average, or above average at low, medium or high risk of colorectal cancer based on reported personal and [family history](#) of colorectal cancer, polyps or both. They also receive a family tree showing the relatives reported to be affected with colorectal cancer or [polyps](#) and a call to action outlining what age to start screening and how frequently it should be done.

"Our hope by providing this online assessment is that individuals could take it, print out the results with the call to action and take it to their physicians to start the colorectal cancer screening conversation," said Dr. Burke.

"In turn, physicians get a better understanding of the demographic of individuals who have decreased participation in [colorectal cancer screening](#): male gender, non-white ethnicity, smoking history, higher BMI, lower intake of plant-based diet, and reduced physical activity level. These results may help them target those patients and encourage them to get screened. Our next research is to determine if our tool enhanced patients' adherence to [screening](#)."

Provided by Cleveland Clinic

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