



COLORECTAL CANCER & AMERICAN INDIANS IN NEW MEXICO KNOW THE FACTS

COLORECTAL CANCER IS THE
SECOND MOST
COMMON CANCER AMONG AMERICAN
INDIAN MEN AND WOMEN IN NEW MEXICO

Most Common Cancers Among American Indians in New Mexico

MEN

1. Prostate
- 2. COLORECTAL**
3. Kidney
4. Liver
5. Lung
6. Stomach
7. Pancreas
8. Non-Hodgkin Lymphoma
9. Bladder
10. Oral

WOMEN

1. Breast
- 2. COLORECTAL**
3. Uterus
4. Kidney
5. Thyroid
6. Ovary
7. Liver
8. Non-Hodgkin Lymphoma
9. Lung
10. Stomach

Data source: New Mexico Tumor Registry 2007-2011

Leading Causes of Death for American Indians in New Mexico

1. Cancer
- 2. Heart Disease**
3. Injury
- 4. Diabetes**
5. Liver Disease

Source: NM IBIS 2010-2012 – Age Adjusted Mortality Rates

ON AVERAGE, THERE ARE 51 NEW
COLORECTAL CANCER (CRC)
CASES DIAGNOSED AMONG
AMERICAN INDIANS IN
NEW MEXICO EVERY YEAR

HOW MANY AMERICAN INDIANS
ARE AFFECTED?



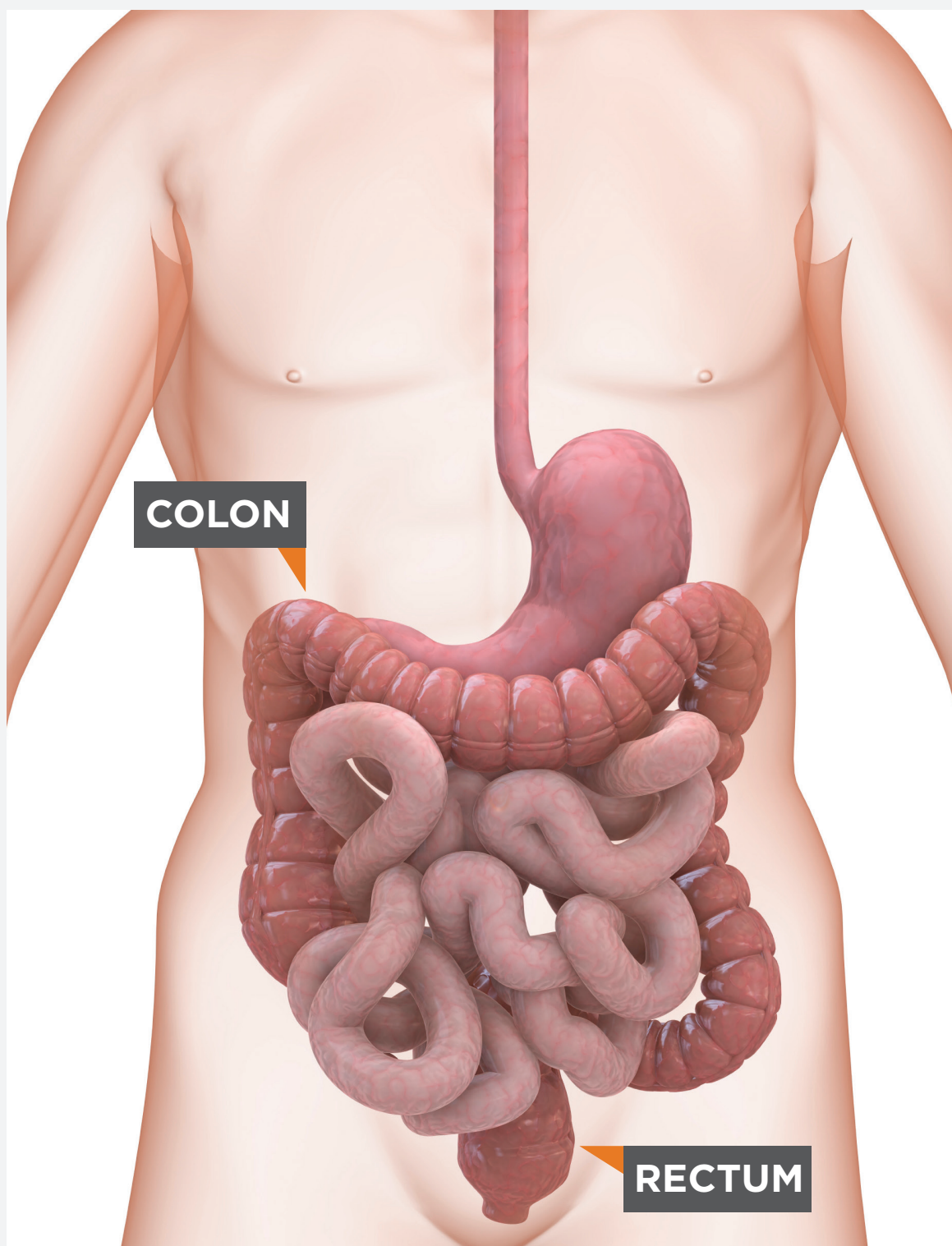
Source: New Mexico Tumor Registry 2007-2011



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COLORECTAL = COLON + RECTUM



THE COLON AND RECTUM ARE PART OF YOUR DIGESTIVE SYSTEM. THEIR FUNCTION IS TO REMOVE WATER AND GET RID OF WASTE FROM THE BODY.

THE EXACT CAUSE OF COLORECTAL CANCER (CRC) IS NOT CLEAR.

HOW DOES CRC DEVELOP?

- 1.** Most CRC begins as a non-cancerous growth called a polyp that forms on the inside layer of the colon or rectum. Some polyps can become cancerous.
- 2.** As a CRC tumor develops, it grows through several layers of tissue.
- 3.** Eventually the tumor may reach nearby lymph and blood vessels, and may even spread to lymph nodes and distant sites in the body.

COLORECTAL CANCER OFTEN STARTS QUIETLY, WITH NO WARNING. DON'T WAIT FOR SIGNS OR SYMPTOMS!



ROUTINE SCREENING CAN ACTUALLY PREVENT CRC OR FIND IT EARLY

MORE THAN

9 OUT OF **10**

individuals diagnosed with early stage CRC that has not spread

SURVIVE 5 YEARS

(and many live much longer).

Source: American Cancer Society Facts and Figures 2011-2013

MORE THAN

5 OUT OF **10**

American Indians with CRC in New Mexico are diagnosed at late stages, which lowers survival.

Source: New Mexico Tumor Registry 2000-2009

Because the early stages of CRC do not typically cause symptoms, all average-risk American Indian men and women age 50-75 should have one of the following screening tests:

ONCE A YEAR

High-sensitivity fecal occult blood test (FOBT):

You do this test at home and send stool sample(s) to a doctor's office or lab.

**EVERY 5 YEARS
WITH FOBT EVERY 3 YEARS**

Flexible sigmoidoscopy:

The doctor looks for polyps or cancer in the rectum and lower third of the colon.

EVERY 10 YEARS

Colonoscopy:

The doctor looks for polyps or cancer in the rectum and the entire colon.

Source: United States Preventive Services Task Force (USPSTF)



ONLY 3 IN 10

American Indian men and women in the Indian Health Service Albuquerque Area are up-to-date with colorectal cancer screening.

Source: Indian Health Service GPRC Area Summary Report 2010



HOW TO LOWER YOUR CRC RISK

How to Protect Yourself, Your Family and Our Communities

- GET** routine CRC screenings
- MOVE** get up and get moving - the more the better
- KEEP** tobacco use sacred
- TALK** to your health care provider about CRC screening
- TELL** friends and family members age 50-75 to have regular CRC screening tests
- LIMIT** alcohol use
- KNOW** your family history. Having a parent, brother, sister or child with CRC increases your risk.

90% OF NEW CRC CASES OCCUR IN PEOPLE AGE 50 OR OLDER.

HELPFUL RESOURCES

National Cancer Institute
www.cancer.gov
1-800-4-CANCER

American Cancer Society
www.cancer.org
1-800-227-2345

Centers for Disease Control and Prevention (CDC)
www.cdc.gov/cancer/colorectal/

Albuquerque Area Southwest Tribal Epidemiology Center
www.tribalcolorectalhealth.org

New Mexico Department of Health
www.nmhealth.org/about/phd/cdb/crc/



Colorectal Health
Protect Yourself, Your Family, and Our Community