Improving Colon Cancer Bottom Line: Family History Makes a Difference

“My father had colon cancer, what does that mean for me?”

- Individuals with 1 first degree relative (e.g. father, mother, sister, brother) have 2x the risk for colorectal cancer as an individual without a family history
- Risk increases if > one first degree relative with colorectal cancer
- Individuals with a hereditary colorectal cancer syndrome, e.g. Lynch Syndrome or Familial Adenomatous Polyposis have an ↑ lifetime chance of developing colorectal cancer (54-90%)

Important family history assessment questions:

- Do you have a family history of colorectal cancer?
- Do you have a family history of colon polyps? (Indicate number and type [if known] of polyps, e.g. >10 or <10)
- What was the age of onset (colorectal cancer or polyps)?
- Who was the relative? (Indicate if more than one relative, and if on the same side of the family.)
- Do you have a family history of hereditary colorectal cancer syndrome related cancers, e.g. uterine, stomach, ovarian, urinary tract, brain, pancreatic cancers (include age of onset) or paired cancers in an individual, e.g. colorectal cancer and uterine cancer in same individual?

With early detection, CRC is preventable and curable

Screening guidelines and targeted genetic services according to family history: American Cancer Society guidelines for increased or high risk individuals