

**Boston
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CLOSE THE GAP
Health Equity for Life

**Know Your Risk
for Colorectal Cancer**

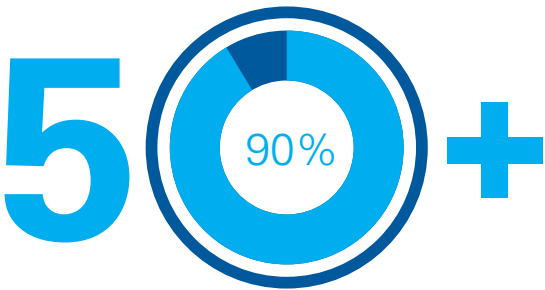
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**COLON
CANCER
ALLIANCE**



Colorectal cancer is the **second leading cause of cancer-related death** in the United States¹



90% of new cases occur in individuals **over the age of 50**¹



Black men and women are **20% more likely** to develop colorectal cancer compared to Whites, Asians, Hispanics and American Indians¹



Once diagnosed with colorectal cancer, Black men and women have a **45% higher chance** of dying of the disease¹

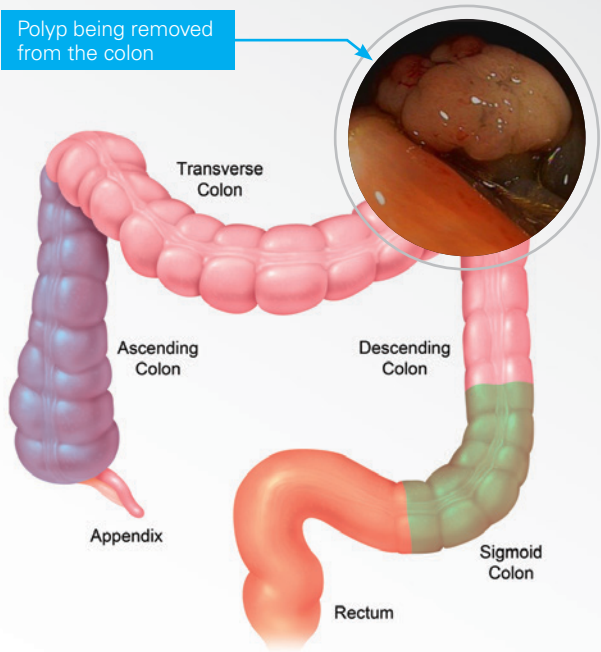
Colorectal cancer is

What is Colorectal Cancer?

Colorectal cancer, or colon cancer, occurs in the colon or rectum. Most colorectal cancers develop first as colorectal polyps, which are abnormal growths inside the colon or rectum that may later become cancerous. Polyps can be found by screening and can be removed *before* they turn into cancer.

Usually, during the early stages of colorectal cancer, individuals do not have symptoms, but please see your doctor if you experience any of the following:

- Bright red or very dark blood in your stool
- Persistent stomach ache, abdominal pain or cramping
- Weight loss for no apparent reason



preventable

Got Colonoscopy?

Over 90% of colorectal cancer cases can be prevented by routine screenings¹. A colonoscopy is the most comprehensive type of screening test for colorectal cancer because it allows physicians to identify and remove precancerous polyps during the procedure².

Before the procedure: Ask your doctor how to prepare for your colonoscopy and about your prep options. He/she will provide you with instructions on how to clear your stomach and bowel for the colonoscopy. Also, discuss options to help you relax and/or sleep during the procedure, such as sedation.

During the procedure: You will be placed on your side. Your doctor will examine the inside of the rectum and entire colon using a long, flexible lighted tube called a colonoscope. The procedure typically takes less than 30 minutes. If polyps are detected during the procedure, your physician will most likely remove them to determine if they are cancerous.

Post-procedure: If you are sedated during the procedure, ask a friend or family member to drive you home afterward. You may experience some minor cramping or bloating from gas for a brief time after the procedure. Your physician will provide post-procedure instructions for you to take home.

Follow-up: If polyps are not found and if you do not have a family history of colorectal cancer, then follow-up procedures are typically recommended every 10 years after your first colonoscopy².

“ I DIDN'T HAVE A COLONOSCOPY
at age fifty. Instead, I was diagnosed at age
fifty-five with stage IV colorectal cancer.
DON'T BE LIKE ME.”

Randy, Colorectal Cancer Survivor · Cambridge, MA

Who's at Risk?

Colorectal cancer does not discriminate. However, individuals who fall into the following categories are at a higher risk of developing the disease:

- Family or personal history of colon polyps or colorectal cancer¹
- Over the age of 50¹
- Diagnosed with ulcerative colitis or Crohn's disease or genetic conditions like Hereditary Nonpolyposis Colon Cancer (HNPCC) or Familial Adenomatous Polyposis (FAP)¹
- Black men and women, American Indians, Alaskan Natives and Jews of Eastern European descent (Ashkenazi Jews)^{1,2}
- Lifestyle factors such as high-fat and low-fiber diet, alcohol use, tobacco use, lack of regular exercise, and not consuming enough fruits and vegetables³

Speak with your doctor about scheduling a colonoscopy if you are a Black man or woman over the age of 45². Individuals who are over age 50, are symptomatic or have a family history of colorectal cancer should also talk to their doctor about scheduling a colonoscopy.

What's your potential level of risk?

Colorectal cancer affects an estimated 1 in 20 Americans¹. Take the online Colorectal Cancer Risk Assessment Quiz to understand your personal level of risk. Use your Smartphone to scan this code or go to:



www.ccalliance.org/riskquiz

CLOSE THE GAP

Health Equity for Life

Close the Gap, a health equity program created by Boston Scientific, is dedicated to eliminating treatment disparities in communities across the nation at high risk of suffering from gastrointestinal and pulmonary diseases. Close the Gap programming has supported numerous initiatives to raise awareness about colorectal cancer prevention through routine screenings and improve access to care.

Learn more about Boston Scientific at www.bostonscientific.com.

For specific questions regarding Close the Gap, please contact us at CloseTheGap@bsci.com.



The Colon Cancer Alliance

is a non-profit organization whose mission is to knock colon cancer out of the top three cancer killers. This mission is being accomplished by

championing prevention, funding cutting-edge research and providing the highest quality patient support services. The Colon Cancer Alliance provides comprehensive services for patients, family members and medical teams every step of the way.

For more information about the Colon Cancer Alliance and their services, please visit ccalliance.org or call the toll-free Helpline at (877) 422-2030.

Boston Scientific

Close the Gap is Boston Scientific's health equity initiative.

References:

1. Content and statistics provided by the Colon Cancer Alliance
2. Rex, D.K. et. al. *Am J Gastroenterol* 2009; 104:739 – 750.
3. Center for Disease Control: www.cdc.gov/cancer/colorectal/basic_info/risk_factors.htm

Boston Scientific Corporation
One Boston Scientific Place
Natick MA 01760
www.bostonscientific.com

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