Your Diagnosis

Your doctor has determined that you have one or more adenomatous colon polyps, or growths, on the lining of your large intestine. Adenomatous colon polyps are benign, or non-cancerous, when they first emerge, but can develop into colorectal cancer over a period of time.

About the Condition

The colon, or large intestine, is a tube lined with muscles that extracts moisture and nutrients from food, storing the waste matter until it is expelled from the body. It is typically 5 to 6 feet long in adults. The last segment of the colon is called the rectum.

Polyps are small clusters of extra tissue that form on the lining of the colon. These growths often resemble the cap of a mushroom and project outward from the wall of the intestine. Anyone can develop colon polyps, and about 20% of adults who are middle-aged and older have one or more polyps. Risk factors include:

♦ Being age 50 or older
♦ Eating a diet that is high in fat and low in fiber
♦ Being overweight, especially by 30 pounds or more
♦ Having an inactive lifestyle
♦ Being a smoker
♦ Drinking alcohol excessively
♦ Having a family history of polyps or colorectal cancer, especially in a parent, sibling or child
♦ Inheriting a genetic mutation such as familial adenomatous polyposis (FAP) or Gardner’s syndrome
♦ Having an ongoing inflammatory bowel disease such as ulcerative colitis or Crohn’s disease

Nearly 90% of all colon polyps are hyperplastic polyps, which are generally harmless. Adenomatous polyps account for only about 1 in 10 colon polyps, but are a leading factor in the development of cancer. Some 95% of colorectal cancer tumors begin as adenomatous polyps, and it generally takes 5 to 10 years for an adenomatous colon polyp to develop into cancer. Hamartomatous polyps and inflammatory polyps are two other types of colon polyps that occur rarely and are benign.

People with adenomatous colon polyps often have no symptoms of their condition, although some may experience rectal bleeding, ongoing changes in bowel habits or abdominal pain.

Treatment Options

The usual treatment for adenomatous colon polyps is removal, which may be accomplished in one of several ways depending on their size and location.
The following treatment methods are most commonly used:

**Polypectomy** – The excision of colon polyps, or polypectomy, can be performed using a camera (endoscope) inserted through the anus or camera (laparoscope) inserted through the abdominal wall. In endoscopic polypectomy, small polyps are removed with an electrified wire loop. Larger or difficultly situated polyps are removed by laparoscopic polypectomy, which requires a few small abdominal incisions to provide access for the camera and surgical instruments.

**Laparotomy** – When necessary, a laparotomy is performed to excise colon polyps. This operation involves making a single, large abdominal incision to reach and remove the polyps.

**Total Resection** – In rare cases that involve numerous colon polyps, an operation to remove the entire colon and rectum may be required, called a total resection. After this procedure, a pouch is created from the end of the small intestine that is attached to the anus to allow waste to leave the body.

Polyps that are removed are sent to a pathologist to check for any signs of colorectal cancer. Your doctor will share the results of that testing with you and likely recommend that you have periodic colorectal cancer screening exams to monitor your health.

**What You Can Do**

Steps you can take to maximize your health and reduce the risk of developing more colon polyps or colorectal cancer include:

♦ Eating a low-fat diet high in fruits, vegetables and whole grains  
♦ Avoiding the use of tobacco  
♦ Limiting consumption of alcohol and red meat  
♦ Taking part in some form of exercise  
♦ Maintaining a healthy body weight

It is also believed that taking in more calcium and folate (or folic acid) can reduce the risk of developing colon polyps. Good dietary sources of calcium include low-fat dairy products and green, leafy vegetables. Folate is found in foods such as dried beans, citrus fruits and juices and fortified cereals. In addition, aspirin may be helpful in preventing colon polyps and gastrointestinal cancer, but it can be irritating to the lining of the stomach. Talk with your doctor about what medications are best for your individual situation.

**Additional Resources**

American Cancer Society, 800.227.2345, www.cancer.org  
American College of Gastroenterology, 301.263.9000, www.acg.gi.org  
National Cancer Institute, 800.422.6237, www.cancer.gov  
Oncology Channel, www.oncologychannel.com

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