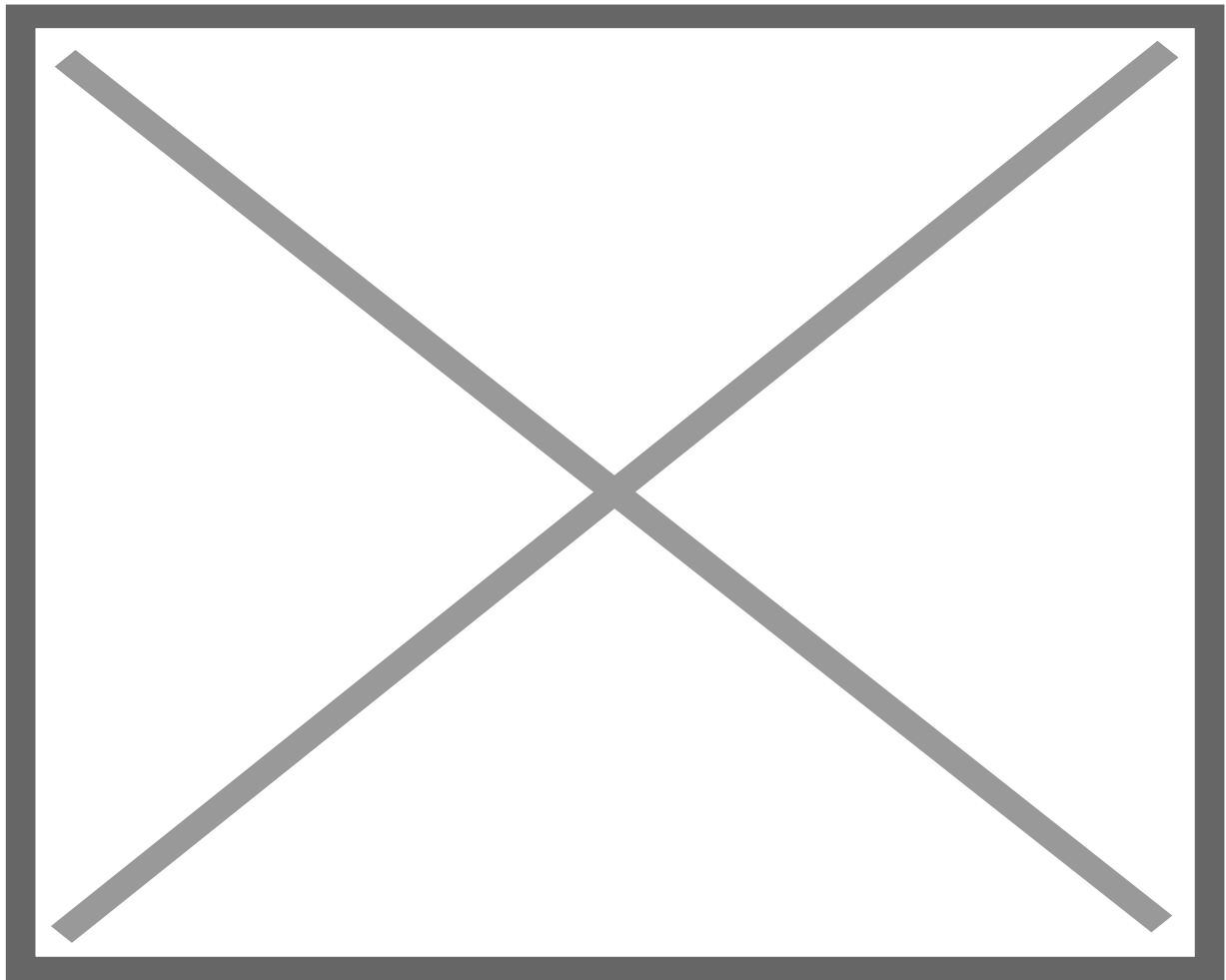


The Virgin Islands Consortium

The Shocking Revelation of Colon Cancer In African Americans

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Anthony Charles is a 40-year-old black man, avid runner, owner of a construction business, and father of two beautiful children. Colon cancer runs in his family; his father had it, and so did several of his uncles. Anthony was unaware that he should've been getting screened during his 30s due to his family history until he was diagnosed with stage 3 colon cancer on his 40th birthday.

Colorectal cancer (CRC), also known as rectal cancer or colon cancer, is cancer growth from the colon or rectum. CRC is the third most widespread cancer to affect the African American community. Those in the African American community are 20% more likely to get colon cancer and 40% more likely to die. African Americans have the highest

development and mortality rates of colorectal cancer of any ethnic group in the United States. With black men with the highest incidence rate (the occurrence or frequency of a disease).

Dr. Fola May, assistant professor of medicine at UCLA and a researcher at Cedars-Sinai Medical Center, said, "African-Americans are more likely to get colon cancer, they're more likely to have an advanced stage of disease when they're diagnosed with colon cancer, they're more likely to die from colon cancer, and they have shorter survival after diagnosis with colon cancer."

In the wake of the unexpected death of 43-year-old actor Chadwick Boseman better known as Black Panther, who battled with stage 4 colon cancer, many questions have arisen among the African American community about their risk of getting CRC.

By looking at these statistics, there is no secret that CRC is ravaging the black community. It can be said that the increase in incidence and death from CRC in the African American community can be linked to lower rates of screening. Along with lifestyle, environment, and socioeconomic factors.

Often in highly populated black communities, there is low access to primary care, and making and getting specialty care referrals are even harder to come by. According to Dr. Brennan Spiegel, Director of Health Services Research for Cedars-Sinai Medical Center, "We found that African-Americans were more likely to say that their doctor never recommended a colonoscopy or any colon cancer screening than any other racial and ethnic groups."

Furthermore, even with insurance, specialist appointments like colonoscopies often require expensive copays. Meaning African Americans delay seeking care for symptoms. The longer they wait, the harder the cancer is to treat.

The American Cancer Society advises that people with average risk begin regular screening at age 45. Younger people are increasingly developing CRC. While the incidence is still reasonably low, it is still growing for the under 50 population. Screening is not usually recommended for those under 50, and most health insurers do not pay for it.

Due to the lack of screening, combined with the overall absence of awareness about colon cancer and its symptoms among young people, many are diagnosed late. Late detection of CRC can often result in a more advanced stage of the disease. Primarily when it is harder to treat and significantly more lethal.

Screening can prevent colon cancer by finding and removing the growth, called polyps, in the colon and rectum before becoming cancer. It can also expose cancer early, when it is small, hasn't spread, and maybe easier to treat. When found primitively, before it has spread, the 5-year relative survival rate is 90%. CRC is exceptionally curable when caught in the early stages, stages 1 and 2 when the tumor is limited to the intestinal wall.

If the African American community has learned anything from the death of Chadwick Boseman, it would be that colon cancer doesn't only affect those 50 years and above. And that regular recommended screening is vital for early detection and to beat this deadly disease.

Recently, the American Cancer Society recommended lowering the average screening age to 45 to catch a good percentage of younger people who may be at risk. The U.S Multi-Society Task Force is comprised of representatives from the American College of Gastroenterology, the American Gastroenterology Association, and the American Society for Gastrointestinal Endoscopy. They have recommended that African Americans screening should start at 45 years old instead of 50 since their demographic is more at risk.

CRC is the third most common cancer in both men and women in the United States and the second deadliest. In 2020 The American Cancer Society estimates that about 147,950 people will be diagnosed with CRC, and 53,200 will die from the disease. Also, in 2020 there will be an estimated 49 new cases of people under 50 diagnosed with CRC a day. According to the American Cancer Society, 1 in 23 men and 1 in 25 women will be diagnosed with colon cancer in their lifetime.