



Polyps in the Colon and Rectum

(Colonic and Rectal Polyps)

What are colonic and rectal polyps?

Colonic polyps are growths of tissue that project from the lining of the colon (a section of the large intestine) into the space inside the bowel. Polyps may also occur in the rectum, another section of the large intestine.

Polyps may cause painless rectal bleeding. They should be removed when discovered and the tissue sent to the lab for tests. Polyps are not immediately harmful but they can turn into cancer and can cause significant bleeding. If you have polyps, or a close relative has polyps or cancer in the colon or rectum, your healthcare provider will recommend regular colon exams to remove polyps before they become cancerous. If you have rectal bleeding, you should be checked for polyps or cancer.

How do they occur?

The cause of polyps is not known. Polyps can occur in anyone but some people are more likely than others to get them. You are more likely to develop polyps if:

- You are over 50 years old.
- You have had polyps before.
- Someone in your family has had polyps before.
- Someone in your family has had cancer of the large intestine.

What are the symptoms?

Polyps usually occur without symptoms. In some cases they may cause:

- barely visible red blood in bowel movements
- hidden (invisible) blood in bowel movements, which may be detected with an occult blood test (a small sample of bowel movement smeared on a card for lab tests).
- weakness caused by anemia, which is a low red blood cell count resulting from blood loss
- loose bowel movements.

How are they diagnosed?

Your healthcare provider will review your symptoms and examine you. You will have blood tests and a test of your bowel movement for hidden blood. You may have one or more of the following procedures:

- Sigmoidoscopy: an exam of your rectum and sigmoid colon (the lower part of the large intestine) with a viewing instrument called an endoscope.
- Colonoscopy: a test during which the healthcare provider inserts a longer scope to see the inside of your whole colon and rectum.
- Biopsy: a test in which tissue from the colon or rectum is removed from the body for exam under a microscope. It may be done at the time of a colonoscopy.
- Barium X-ray: barium is injected into the colon by enema through the anus and rectum and then X-rays of the colon and rectum are taken.

How are they treated?

The polyps should be removed when they are discovered. Your healthcare provider may remove noncancerous polyps using an endoscope. Removing these benign polyps is usually relatively simple. Your healthcare provider may remove a polyp during a colonoscopy at the time it is detected. If the polyp cannot be removed by colonoscopy, you may need a laparotomy or laparoscopy. A laparotomy is a surgical procedure in which the abdomen is opened to remove the part of the colon that contains the polyp. For a laparoscopy, a thin tube with a light and tiny camera is inserted through a small cut in your abdomen. The scope is used to look at your colon or rectum and guide other tools to remove the polyp. The cuts for a laparoscopy are smaller than the cut needed for a laparotomy.

Malignant (cancerous) polyps are removed with a section of the surrounding segment of tissue. Removal of part or all of the colon is called a colon resection or colectomy. If the rectum is removed it is called a proctectomy.

Some people have a rare condition called familial adenomatous polyposis, also called familial polyposis coli, which means there are many adenomatous polyps throughout the colon and rectum. This type of polyp carries a very high risk of cancer. It may need to be treated with removal of part or all of the colon and rectum.

How long will the effects last?

If not removed early, some polyps can become malignant. If cancerous polyps are not treated, they are life threatening. It is important to follow your healthcare provider's recommendations for treatment.

New polyps may form. Because of their potential for malignancy, you should have a colonoscopy in 1 to 5 years after your polyps are removed. Your provider will tell you when you need repeat exams.

How can I take care of myself?

Your healthcare provider may recommend that you take calcium supplements or regular doses of aspirin.

In addition to following your healthcare provider's recommendations, maintain a healthy lifestyle by:

- getting enough exercise
- eating low-fat, high-fiber foods.

Ask your provider how often you should have an occult blood test, sigmoidoscopy, or colonoscopy.

What can I do to help prevent polyps and their recurrence?

- Add high-fiber foods to your meals.
- Exercise daily, according to your provider's recommendations.
- Follow your healthcare provider's recommendations for checkups and tests.
- If you have been diagnosed with polyps, other members of your family should tell their healthcare providers, because some types of polyps are inherited.

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