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## Blood in stool test at home

Can a colon cancer screening really be as simple as mailing a sample of your poo to a lab for analysis? The answer may be yes — but don't cancel that colonoscopy just yet.At-home stool tests can be an effective tool for detecting colon cancer. But the tests aren't as accurate as a colonoscopy and they offer no way to find and remove polyps that could turn cancerous.So, are these poop-in-a-box tests worth trying? Colorectal surgeon Arielle Kanters, MD, explains the benefits and shortcomings.How at-home colon cancer tests workAs the name implies, an at-home colon cancer test takes place in the comfort of your home without a doctor present. The test looks for abnormal cells or blood present in a sample of your stool.To get that sample ... well, it's going to require you to collect your own poop and send it off to a lab for analysis. It's a hands-on task and not for the squeamish.At-home colon cancer testing optionsThree main stool tests are offered, each with a different focus for folks in the lab.Fecal immunochemical test (FIT). This test checks for hidden blood in your stool that could be coming from colon cancer. It's recommended that this test be done annually.Guaiaac-based fecal occult blood test (gFOBT). This annual test is similar to the FIT in that it checks for the presence of blood. It does require dietary changes (such as avoiding red meat for a few days) before collecting a sample.Stool DNA testing. This test examines DNA in your stool for evidence of cells shed by colorectal cancer. "When you have cancer in your colon or anywhere in your intestines, some of these cells end up passing in your poop," explains Dr. Kanters. This test should be done once every three years.(Want to know more about each test? Watch as Dr. Kanters explains different colorectal cancer screening options in this video.)How accurate are stool tests?At-home stool tests can be effective at finding colon cancer. Research shows that:The DNA test is 92% effective at detecting cancers. (DNA tests, however, do return more false positives than FITs.FITs can be nearly 80% accurate.gFOBTs are about 71% accurate.What happens if a stool test is positive?It typically takes about two weeks to get results from an at-home colon cancer test. If the lab flags something as potentially worrisome, don't panic. False positives are not uncommon with these tests.Talk to your doctor about what the next steps are in terms of figuring out what's going on if you get a concerning result."If you're having blood in your poop, your test results are going to be positive and you're going to need a colonoscopy," Dr. Kanters explains. "If the test is abnormal, you do still need a colonoscopy to follow up and better understand why."Is a stool test as good as a colonoscopy?Stool tests are an easy, at-home way to check for potential signs of colorectal cancer. They're also far less invasive, intense and uncomfortable than a colonoscopy.But it's important to note the limitations of stool tests compared to a colonoscopy when it comes to detecting anything precancerous — which is a pretty big deal, emphasizes Dr. Kanters."Relying on these fecal tests means that you're potentially missing out on finding an early pre-cancer that could be eliminated and never turn into something scarier," she says.Colorectal cancers typically begin as growths called polyps, which form on the inner lining of your colon or rectum. Finding and removing polyps before they become cancerous is the most effective way to prevent colon cancer.Given that, a colonoscopy remains the gold standard for cancer screening. In one single procedure, it allows for the detection and removal of polyps to help prevent cancer from developing."One of the benefits of a colonoscopy is that we can not only treat and identify cancers, but we can treat pre-cancer," shares Dr. Kanters. "In other words, the pre-cancerous polyps we might find and remove never reach the point of turning into cancer in the first place."A colonoscopy also is about 99% accurate in finding colon cancer that has developed.So, bottom line? "In my mind, a colonoscopy is always the way to go," recommends Dr. Kanters.Should you consider an at-home colon cancer test?If you're interested in an at-home stool test for colon cancer, talk to your healthcare provider. "It's important that you have a conversation and figure out if this is the right test for you," says Dr. Kanter.An at-home colon cancer test can be a good choice if having anesthesia or sedation during a colonoscopy puts you at higher risk for complications.Your health insurance or access to medical care also may make at-home tests a better option."With an at-home test, we can at least screen to learn if you're at risk," notes Dr. Kanters. "These tests can provide information that can help you seek out additional testing so you know what you're dealing with."But at-home tests aren't recommended if you have:A family history of colorectal cancer.Medical conditions that increase colorectal cancer risk.Bloody stool.Unexplained health issues such as sudden weight loss or anemia (low red blood cell counts)."These are all reasons for a full evaluation being performed," she adds.When should you start testing for colon cancer?If you're at average risk for colorectal cancer — that is, you have no existing symptoms, family history or risk factors — your first at-home test or colonoscopy should happen at the age of 45, says Dr. Kanters.Final thoughtsScreening for colon cancer is vital because symptoms often don't appear in the disease's early and more treatable stages. "It's the best way to identify issues ahead of any problems," says Dr. Kanters.Early detection of colorectal cancer before it has a chance to spread outside the colon or rectum increases your odds of successful treatment, according to the American Cancer Society.The five-year relative survival rate for colorectal cancer is about 90% when the disease is found early. Here's the concern, though: Only about 4 of 10 colorectal cancers are detected at this stage.So, whether you choose to get a colonoscopy or take an at-home stool test, just get one done."Ultimately, if an at-home test is what gets you screened for cancer, absolutely do it," encourages Dr. Kanters. "They're a great way to determine if something else needs to be done and better understand your risk for possibly having cancer." Age restrictions Check4Cancer's cancer screening services are clinically governed by age restrictions, and you cannot sign up for a service if you are not within the age range for a particular cancer screening test. For BowelCheck you must be at minimum 45 years of age. This is because clinical research does not support the benefits of screening people outside our specified age ranges. Regardless of age, if you have symptoms then you should always seek medical advice from your GP. For common signs and symptoms of bowel cancer, please visit the Check4Cancer 'Advice and Awareness' page at this link. Why should I use BowelCheck? Are you approaching your 50's and worried about bowel cancer? Bowel cancer is one of the most common types of cancer diagnosed in the UK, with more than 42,000 men and women being diagnosed each year. Yet, if bowel cancer (also known as colon cancer, rectal cancer or colorectal cancer) can be detected in its earliest stages, there is a greater than 90% chance of it being cured. Furthermore, over 50% of bowel cancer is preventable in the UK by screening and reducing your risks. NHS England offers bowel cancer screening from the age of 60 in the UK (50 in Scotland) but, has only recently switched to similar technology used privately by Check4Cancer. What makes BowelCheck unique? BowelCheck is a quantitative Faecal Immunochemical Test (qFIT) that detects the concentration of human blood in the faeces, as this can be a sign of bowel cancer. Set at a lower threshold than the NHS England qFIT test, BowelCheck will pick up more cancers than the NHS England test. The test result will state whether the sample was abnormal and if abnormal, the concentration of haemoglobin (blood) will also be provided. This will provide additional clinical information if the GP refers you for further investigation to a NHS or private consultant. BowelCheck includes a personal bowel cancer screening programme. How do I order BowelCheck? You can order your BowelCheck at-home sample collection test kit here . The test kit will be delivered to your home in discreet packaging. The cost of BowelCheck can be found here. BowelCheck is suitable for individuals aged 45+. What does the BowelCheck kit contain? A sterile collection kit posted out to you at home containing easy to follow step-by-step instructions. You can view the kit instructions here. What do I do with the BowelCheck kit when I have completed? Complete the at-home test by following the simple instructions provided in the test kit. Return your sample to our laboratory by Freepost and expect your results within five days of the laboratory receiving your sample. Our team of specialists will analyse your test results and provide you with a personalised screening programme. What happens if my test results are abnormal? If you have an abnormal result we will call you before sending your results letter. If your BowelCheck test result is abnormal we will advise you on the next steps. Should you have an abnormal test result, you may be eligible for referral to a private consultant or to the NHS via your GP. If you have an abnormal result it does not necessarily mean you have bowel cancer. A bowel cancer may be missed if it's not bleeding when the test is undertaken. Disclaimer Whilst undergoing bowel cancer screening will not prevent bowel cancer, it can help to detect cancers at an early stage. No bowel cancer screening test can be guaranteed to be 100% accurate, and an abnormal result from BowelCheck will mean that further investigations are likely to be recommended. Pristyn Care is a pioneering healthcare brand dedicated to revolutionizing the way surgical care is delivered in India. Founded with a vision to make advanced surgical care accessible and affordable to all, Pristyn Care combines cutting-edge medical technology, highly skilled professionals, and a patient-centric approach to transform the healthcare landscape. The brand's mission is to simplify the patient journey, ensuring a seamless experience from diagnosis to recovery.At present, Pristyn Care operates via 150+ clinics and 800 + partner hospitals with a panel of 400+ super specialist surgeons who work exclusively for the company.Pristyn Care's network exists across several metro cities of India, viz Mumbai, Pune, Delhi, Bangalore, Hyderabad, Chennai, and Kolkata; and in several Tier-2 and Tier-3 towns including Lucknow, Kanpur, Chandigarh, Jaipur, Indore, Nagpur, Bhopal, Ludhiana, Patna, Bhubaneswar, Coimbatore, Ahmedabad, Kochi, Vizag, Surat, Noida, Gurgaon, Faridabad, Ghaziabad.Pristyn Care's comprehensive healthcare model focuses on providing minimally invasive surgical treatments across various specialties, including proctology, urology, ENT, gynecology, vascular diseases, and general surgery. These advanced techniques are designed to minimize pain, reduce recovery times, and improve overall outcomes, leveraging modern-age approaches such as laser circumcision and stapler circumcision.Aesthetics - Pristyn Care offers aesthetic treatments such as liposuction, gynecomastia surgery, and cosmetic gynecology. These procedures are designed to improve physical appearance and boost self-confidence, using advanced and safe surgical methods.Orthopedics -Orthopedic treatments at Pristyn Care include procedures for joint replacement, ACL reconstruction, and fracture repair. The use of cutting-edge technology and minimally invasive techniques ensures better outcomes and faster recovery.Ophthalmology - Pristyn Care's ophthalmology services address various eye conditions like cataracts, glaucoma, and refractive errors. Their eye specialists utilize the latest surgical techniques to provide clear vision and improve eye health.Weight Loss - Pristyn Care provides weight loss solutions including bariatric surgery for individuals struggling with obesity. These procedures help in achieving significant weight loss, improving overall health, and reducing obesity-related complications.Expert Surgeons at Pristyn CareAt Pristyn Care, we take pride in our team of over 400 highly skilled doctors, each a leader in their respective fields. Our expert surgeons are renowned for their exceptional medical expertise and extensive experience, ensuring top-notch care across a wide range of specialties. Whether it's general surgery, gynecology, or any other area, our doctors are equipped with the latest techniques and technology to provide the best possible outcomes.Our commitment to excellence means that you receive care from some of the best surgeons in the country, dedicated to achieving the highest standards of patient care. With a focus on minimally invasive procedures, our experts ensure faster recovery times and minimal discomfort, offering you a personalized approach to your health needs.Pristyn Care Revolutionising Laser and Laparoscopic Surgery in IndiaAt Pristyn Care, we are at the forefront of transforming surgical care with our advanced laser and laparoscopic techniques. Our modern-age methods harness cutting-edge technology to perform precise, minimally invasive procedures that significantly reduce recovery times and discomfort. By adopting these state-of-the-art techniques, we are redefining the standards of surgical care and offering our patients a more effective and efficient treatment experience.We are changing the perception of surgical interventions in India by demonstrating that minimally invasive options can lead to exceptional outcomes. Our commitment to innovation ensures that patients benefit from less pain, faster healing, and improved results, setting new benchmarks in the field of surgery. At Pristyn Care, we're not just keeping up with medical advancements—we're leading the way. Garber JJ, Chung DC. Colonic polyps and polyposis syndromes. In: Feldman M, Friedman LS, Brandt LJ, eds. Sleisenger and Fordtran's Gastrointestinal and Liver Disease. 11th ed. Philadelphia, PA: Elsevier; 2021.chap 126.National Cancer Institute website. Colorectal cancer screening (PDQ) health professional version. www.cancer.gov/types/colorectal/hp/colorectal-screening-pdq. Updated March 2, 2023. Accessed April 5, 2023.Rex DK, Boland CR, Dominitz JA, et al. Colorectal cancer screening: recommendations for physicians and patients from the U.S. Multi-Society Task Force on Colorectal Cancer. Am J Gastroenterol. 2017;112(7):1016-1030. PMID: 28555630 pubmed.ncbi.nlm.nih.gov/28555630/ US Preventive Services Task Force. Final recommendation statement. Colorectal cancer: screening. www.uspreventiveservicestaskforce.org/uspstf/recommendation/colorectal-cancer-screening. Updated May 18, 2021. Accessed February 20, 2023.Wolf AMD, Fontham ETH, Church TR, et al. Colorectal cancer screening for average-risk adults: 2018 guideline update from the American Cancer Society. CA Cancer J Clin. 2018;68(4):250-281. PMID: 29846947 pubmed.ncbi.nlm.nih.gov/29846947/. Editor's note: In May 2021, the US Preventive Services Task Force revised its advice regarding screening for colorectal cancer, lowering the recommended age for first screening from 50 to 45. Colorectal cancer (CRC) is the fourth leading cause of death worldwide. Yet despite the ability of CRC screening to detect colon cancer early, and to find and remove potentially precancerous growths called polyps, screening rates remain low, below 60%. Experts generally agree that people should be screened for CRC at regular intervals beginning by age 50. Colonoscopy is considered the gold standard for CRC screening. In this procedure, a doctor examines your entire colon through a colonoscope, a flexible tube outfitted with a small video camera and a light. But concern around pre-colonoscopy bowel cleaning, which can be uncomfortable and unpleasant, may contribute to low screening rates. Your bowel needs to be completely empty during colonoscopy to give your doctor a clear view of your intestinal wall, preparing for the test involves drinking a liquid that triggers bowel-clearing diarrhea. CRC screening tests: Other options So, while colonoscopy remains the gold standard, the best test is the one that gets done or gets the process started. A recent meta-analysis found that fecal blood tests, which are available by prescription and can be done at home, are associated with increased screening rates. (Patients still need a colonoscopy if there is an abnormal result, to diagnose cancer or remove polyps to prevent cancer.) In 2016, the United States Preventive Services Task Force updated its CRC screening recommendations to state that patients and physicians can choose among available screening tests. Currently, three types of at-home CRC screening tests are approved by the Food and Drug Administration (FDA): Guaiaac FOBT (gFOBT) uses a chemical to detect a component of hemoglobin, a blood protein in the stool. Fecal immunochemical test (FIT or iFOBT) uses antibodies to detect hemoglobin shed by polyps or colorectal cancer. Multitarget stool DNA test (FIT-DNA) detects trace amounts of blood and DNA from cancer cells in the stool. For all of these tests, you collect a stool sample at home using a kit, then mail the sample to a doctor or to a laboratory for testing. None require the bowel-clearing prep required for colonoscopy. Amazon sells screening tests: FOBT for \$10 and FIT for \$25. These are available without a prescription but are not as well studied or standardized as those available through your physician. Pros and cons of at-home CRC screening tests A review published in JAMA concludes that all three home tests may be an efficient first-step for low-risk patients. However, all the kits, as well as colonoscopy, can miss polyps, which can and should be removed at the time of the colonoscopy. The FIT screening test has been in use for about 10 years. It should be repeated annually in case the cancer or polyp isn't bleeding at the time of the test. (Colonoscopy is recommended once every 10 years for low-risk patients.) The FIT test detects cancer with 79% accuracy, with about 5% false positive results (suggesting cancer where none exists), which warrant a colonoscopy for further testing. Studies have shown that the multitarget stool DNA test (Cologuard is currently the only FDA-approved brand) detects cancer with 92% accuracy. However, 14% of tests deliver a false positive result, which is higher than the FIT test. Health experts recommend repeating the test every one or three years. For years we have used the gFOBT to detect microscopic amounts of blood in the stool that is not visible to the naked eye. It is less accurate than either the FIT or the DNA stool test, identifying only 20% to 50% of cancers. This test has a limited role today. Cost considerations An additional barrier to CRC screening is the out-of-pocket cost to patients. The Affordable Care Act mandated that insurance plans cover CRC screening tests, including colonoscopy, in full, with no out-of-pocket cost to patients. However, coverage does not apply to colonoscopies that convert from screening to diagnostic when a polyp is detected and removed during the procedure. And coverage does not apply to diagnostic colonoscopies after a positive CRC FIT or DNA screening test result. This coverage failure means that patients may have to pay thousands of dollars to complete recommended CRC testing. How can you decide which CRC screening test is right for you? Ask your doctor and have a frank discussion about your risks and concerns. Most people find colonoscopy less miserable than they anticipate, and it is still the best option overall. Higher-risk people really do need a colonoscopy, usually until age 80. For others, get tested or get the screening process started, and the only wrong answer is ignoring the possibility of colon cancer. As a service to our readers, Harvard Health Publishing provides access to our library of archived content. Please note the date of last review or update on all articles. No content on this site, regardless of date, should ever be used as a substitute for direct medical advice from your doctor or other qualified clinician. If you have symptoms of bowel cancer, your GP may give you an at-home test. This is called a faecal immunochemical test (FIT) and it tests for blood in your poo. On this page, we'll explain how to do the test at home and what to expect after you've done it. When will I get an at-home test? If you have symptoms, ask your GP about an at-home test. They can give you a poo test, called a faecal immunochemical test (FIT), which is easy to do at home. You may get the test kit at your appointment, or it might be sent to your home after your appointment. You'll follow the instructions that come with the test to collect a small amount of poo. Your GP will tell you how to return the test. This is sent off to a lab, where they will test for blood in your poo.