

Colorectal carcinoma/etiology

Colorectal carcinoma occurs in **sporadic** and **hereditary** form, when an individual has a higher genetic predisposition to develop the disease than the rest of the population. These are mainly Lynch syndrome I and II and familial adenomatous polyposis (FAP). A hereditary basis is diagnosed in about 10% of cases, ^[1],so the **sporadic incidence dominates** (90%).

However, even in the sporadic form of colorectal carcinoma, **risk factors** (RF) increase the probability of the disease even in a genetically non-predisposed individual. As with most cancers, one of the main RFs in colorectal carcinoma is higher **age**, particularly people aged 70 to 80 years are at greatest risk. Then:

- **other colon diseases** - history of intestinal adenomas and chronic intestinal inflammation, especially ulcerative colitis;
- **hyperinsulinemia**;
- **obesity**
- **smoking**
- **dietary habits** - frequent consumption of red meat, excessive intake of animal fats and insufficient intake of fiber in the diet are particularly risky,

In addition to RF, we should mention protective factors. These include the already mentioned fiber, omega-3 polyunsaturated fatty acids, folic acid and the use of hormonal contraceptives.



Endoscopic picture of sessile serrated adenoma

Links

References

1. ČEŠKA, Richard. *Interna*. 1. edition. Praha : Triton, 2010. 855 pp. ISBN 978-80-7387-423-0.

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