Colon Polyps

The colon, also called the large intestine, is part of the body's digestive system. This system absorbs nutrients from food and stores waste until it passes out of the body. A colon polyp is a growth on the inside lining of the colon. Polyps are commonly found in adults. Most are harmless. They can be removed to prevent colorectal cancer.

Polyp Shapes

- Pedunculated polyps are raised on stems, like mushrooms (Figure 1).
- Sessile polyps grow on the surface of the colon, like a mushroom without a stalk (Figure 2).
- Flat lesions grow flat, like a pancake (Figure 3).



Figure 1. Pedunculated polyp



Figure 2. Sessile polyp

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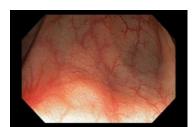


Figure 3. Flat lesion

Polyp Types

Hyperplastic Polyps

These, in general, are not cancer. They are often small and found in the end of the colon, the rectum. Your doctor may want to remove these polyps for a closer look. If you have a bigger hyperplastic polyp or if you have a lot of them, your risk for colon cancer may be higher.

Adenomatous Polyps (Pre-Cancerous)

These polyps are not cancer. They may become cancer if they are not removed. They are confined to the inner lining of the colon. There are 2 types of growth patterns: tubular and villous.

- Tubular adenomas are the most common type of polyps. Patients with tubular adenomas need to be screened more often for colorectal cancer.
- Villous adenomas are the most serious polyp. They have the highest risk of becoming cancer as they grow larger. Patients with these polyps need to be screened more often for colorectal cancer.
- Tubulovillous adenomas are a mixture of both tubular and villous. Patients with these polyps need to be screened more often for colorectal cancer.

Sessile/Serrated Polyps (Pre-Cancerous)

These polyps are not cancer, but they may become pre-cancerous if not removed. There are 2 kinds of sessile polyps.

- Sessile serrated adenomas (also called serrated polyps)
- Traditional serrated adenomas

Pre-cancerous polyps may also be described by the type of cells they contain. Dysplasia describes polyps with abnormal cells. Depending on how close the cells are to becoming cancer, they may be classified as low or high grade dysplasia.

Cancer

A polyp described as malignant is cancer.

Other Non-Cancerous Pathology Results

You may see other terms in your report. The following are not cancerous. They do not require follow-up.

Inflammatory polyp

• Colonic or colorectal mucosa

• Lipoma

Lymphoid aggregate

Know Your Polyp History

Your health care provider needs to know about any polyps found. This helps determine when you should have your next colonoscopy. Give your health care provider a copy of the colonoscopy and pathology reports. The colonoscopy report gives the number, size and location of polyps. The pathology report also tells about the type of polyps. If you do not have these reports, ask your doctor who ordered or preformed your last colonoscopy for the reports. The results of the report and the quality of the colon prep before the exam, determine when you have your next screening colonoscopy.

MD Anderson recommends your next screening colonoscopy be done in:

- 10 years if you had:
 - A normal colonoscopy
 - 20 or less hyperplastic polyps that were less than 1 centimeter (cm) in size
- 7 to 10 years if you had:
 - 1 or 2 tubular adenomas that were less than 1 cm in size
- 5 to 10 years if you had:
 - 1 or 2 sessile serrated polyps that were less than 1 cm in size
- 3 to 5 years if you had:
 - 3 or 4 tubular adenomas that were less than 1 cm in size
 - 3 or 4 sessile serrated polyps that were less than 1 cm in size
 - Hyperplastic polyp that was 1 cm in size or larger
- 3 years if you had:
 - 5 to 10 tubular adenomas that were less than 1 cm in size
 - 5 to 10 sessile serrated polyps

- An adenoma 1 cm or larger in size
- Adenoma with tubulovillous or villous histology
- Adenoma with high grade dysplasia
- Sessile serrated polyp with dysplasia
- Traditional serrated adenoma
- 1 year if you had:
 - More than 10 adenomas during a single exam
- 6 months if you had:
 - A piecemeal resection of adenoma 2 cm or larger in size

Resources

For more information on colon cancer screening, visit MD Anderson's Cancer Screening Guidelines website: www.mdanderson.org/screeningguidelines

Understanding Your Pathology Report: Colon Polyps (Sessile or Traditional Serrated Adenomas). American Cancer Society.

http://www.cancer.org/treatment/understandingyourdiagnosis/understandingyourpathologyreport/colonpathology/colon-polyps-sessile-or-traditional-serrated-adenomas