

Sister Study Colon and Rectal Cancer Outcomes (any behavior)¹ and Characteristics: Data Release 10.1²

	N	% of cohort
Total Cases³	558	1.1
Timing, Behavior, and Site	N	% of cases
Baseline	201	36.0
Invasive	199	35.7
Appendix	7	1.3
Colon ⁴	28	5.0
Rectosigmoid junction	2	0.4
Rectum	10	1.8
Unknown ⁵	152	27.2
<i>In situ</i>	2	0.4
Colon	1	0.2
Rectosigmoid junction	1	0.2
Unknown timing ⁶ – Invasive – Unknown ⁵	18	3.2
Incident	339	60.8
Invasive	326	58.4
Appendix	17	3.0
Colon ⁷	166	29.7
Rectosigmoid junction	11	2.0
Rectum	39	7.0
Unknown ⁵	93	16.7
<i>In situ</i>	11	2.0
Colon	6	1.1
Rectum	5	0.9
Uncertain behavior	2	0.4
Appendix	1	0.2
Colon	1	0.2
Incident	339	
Race/Ethnicity⁸		
Non-Hispanic White	291	85.8
Non-Hispanic Black	23	6.8
Hispanic	17	5.0
Other	8	2.4
Age (in years) at Diagnosis⁹		
Under 50	15	4.4
50-64	141	41.6
65 and older	183	54.0
Diagnosis Confirmation¹⁰		
Medical	209	61.7
NDI Plus or death certificate only	23	6.8
None	107	31.6

Characteristic	N	%
Incident – Medically Confirmed	209	
Stage at Diagnosis¹¹		
0	11	5.9
I	72	38.5
II	47	25.1
III	46	24.6
IV	11	5.9
Missing, cannot stage	22	

¹ Cancer events are defined by the following ICD10 cancer codes: invasive colon (including appendix) (C18), invasive rectosigmoid junction (C19), invasive rectum (C20), *in situ* colon (D01.0), *in situ* rectosigmoid junction (D01.1), *in situ* rectum (D01.2), uncertain behavior of appendix (D37.3), uncertain behavior of colon (D37.4), uncertain behavior of rectum (D37.5). Other ICD10 cancer codes that may be used when colon or rectum is indicated as one of the favored primary sites: invasive intestine (C26.0), invasive digestive organ (C26.9), invasive unspecified site (C80), *in situ* intestine (D01.4), *in situ* digestive organ (D01.9), uncertain behavior of digestive organ (D37.8, D37.9), unspecified behavior of digestive organ (D49.0).

² Data release 10.1 includes outcomes from follow-up phases that closed on or before 10/12/2020, excluding all data from participants who have withdrawn their data from the study (n=4).

³ Excludes cancer diagnoses where colon or rectal site of origin could not be ruled out, but neither is the favored site [n=8].

⁴ Colon sites include: Cecum [n=5]; Ascending [n=4]; Splenic flexure [n=1]; Descending [n=2]; Sigmoid [n=7]; Overlapping sites [n=1]; Not specified [n=8]

⁵ Unknown site generally includes reports of colon or rectum, with the following exceptions: baseline includes unspecified intestine [n=5] and rectum or anus [n=2]; incident includes unspecified intestine [n=2], rectum or anus [n=1], colon, rectum, or anus [n=3], multiple sites (transverse colon and rectum) [n=1]; and report of colon with other site(s) possible [n=1]

⁶ Unknown timing represents cases that are unknown if diagnosis at or prior to baseline vs. post-baseline (i.e. incident case)

⁷ Colon sites include: Cecum [n=39]; Ascending [n=39]; Hepatic flexure [n=2]; Transverse [n=18]; Splenic flexure [n=1]; Descending [n=5]; Sigmoid [n=23]; Overlapping sites [n=9]; Not specified [n=30]

⁸ Race/ethnicity: precedence given to Hispanic ethnicity first, then Black race, then other race, then White race

⁹ For those missing age at diagnosis [n=20], age was imputed as the midpoint of the range of plausible ages at diagnosis

¹⁰ Medical confirmation of reported colon or rectal cancer is generally from pathology report but may include other medical documentation; National Death Index (NDI) Plus or death certificate confirmation is specific to cases that do not have medical confirmation

¹¹ Stage at diagnosis is only available for cases with medical confirmation