Colon Cancer

Awareness and Prevention

By Robert Eisenband, M.D.

When popular TV news anchor Katie Couric made a plea on national television in 1998 for more adults to seek screening colonoscopies, she started a national phenomenon of increased awareness of colon cancer.

In fact, this surge in screenings is now referred to as the "Katie Couric Effect." With increased awareness, all primary care physicians now strongly encourage their patients to get screened at age 50, or at a younger age if there is a strong family history.

According to the American Cancer Society, colon cancer, also called colorectal cancer, is the third leading cause of cancer-related deaths in the United States when men and women are considered separately, and the second leading cause when both sexes are combined. Colon cancer can be prevented by removing pre-cancerous colon polyps and when it is detected in its earliest stage, it is up to 90 percent curable. But even with increased awareness, many of us are not getting screened for a variety of reasons.

About Colonoscopies

The primary goal of a screening colonoscopy is to find and remove any abnormal growths or polyps. During the procedure, the physician can actually look inside the entire large intestine to see if there are abnormal growths or polyps. Because polyps grow slowly and may go through precancerous stages and eventually become cancerous, removing them during a colonoscopy eliminates the risk of polyp growth, thus preventing colon cancer. Of course, all of this depends on the doctor getting a good look at the colon, which requires a thorough bowel preparation or cleansing.

At Atlanta Gastroenterology Associates, we suggest patients be screened at age 50. But as we learn more about the role genetics and colon cancer, many people may need to be screened sooner. Family history can be important in helping your doctor determine your risk of potentially developing cancer. Everyone should try to be aware of their family history, especially that of parents and grandparents.

For example, if there is a family history of colon cancer, screening may start at age 40, particularly if there is a first-degree relative (father, mother, sister or brother) who was diagnosed before the age of 50. People who have a strong family history of colon polyps or colon cancer are more likely to have polyps or cancer. For high risk cases,
An InsideLook

Colonoscopies may need to be performed at an earlier age or more frequently than the general population.

In addition to screening, colonoscopy is indicated for other reasons: to look for causes of unexplained changes in bowel habits, abdominal pain, rectal bleeding and weight loss. If blood is detected in the stool, for example, a colonoscopy is indicated. The procedure also is used in management and follow-up of inflammatory bowel diseases.

**Having a Colonoscopy**

AGA has a long, successful track record in performing colonoscopies. Over time, it has actually become a routine procedure and most are now performed in our outpatient endoscopy centers. While patients still complain about the preparation, there are new alternatives to drinking the gallon of liquid and bowel preparation options should always be discussed with your doctor. In addition, sedation methods have improved greatly and with monitored anesthesia care, the procedure is painless. Today, patients can have the procedure, go home and resume activity more quickly.

Before a colonoscopy is performed, every patient should discuss their medical history with their physician, so that he or she is aware of any risk factors. Some patients may be at particular risk for having the procedure, especially those with a history of heart disease, lung disease, or multiple abdominal surgeries. In these cases, experienced, board certified gastroenterologists will take special precautions.

To perform the procedure, the physicians at Atlanta Gastroenterology Associates use the latest technology including hi-definition equipment, which delivers high resolution views of the colon with fine detail. Special optical filters help detect even flat polyps.

During a colonoscopy, polyps can not only be detected, but removed to prevent any potential cancer from developing.

**Signs and symptoms of colon cancer include:**

- A change in your bowel habits, including diarrhea or constipation or a change in the consistency of your stool for more than a couple of weeks
- Rectal bleeding or blood in your stool
- Persistent abdominal discomfort, such as cramps, gas or pain
- Abdominal pain with a bowel movement
- A feeling that your bowel doesn’t empty completely
- Weakness or fatigue
- Unexplained weight loss
Because polyps can show signs of pre-cancer, called dysplasia, they are sent to pathology for biopsy. While more than 95 percent of polyps can be removed during a colonoscopy, some polyps are too large or spread out. In those cases, they may have to be removed in pieces, which may require more than one procedure, or patients may be referred to a surgeon.

Colonoscopy and Cancer Prevention

No one wants to hear the word ‘cancer’. While the purpose of a colonoscopy is to detect polyps and remove them to prevent cancer, we also want to detect cancer in its earliest stages so that it can be removed while it is still curable. Even though one out of every three colonoscopies may show polyps, not all are cancerous or pre-cancerous. However, over the course of time, they can grow and become cancer. If polyps are removed, we advise patients to come back in three to five years, depending on the type of poly observed.

For patients who are diagnosed with colon cancer, surgery may be recommended. At AGA, we work with our patient’s primary care physicians to find the most qualified surgeons for particular needs. By detecting cancer early, cure rates are higher and complications are avoided.

Due in great part to increased awareness, more colonoscopies being performed and more polyps being removed, colon cancer rates have started to decline over the past five years.

The good news is that the colon is ideal for screening and prevention, two key words when it comes to colon cancer. Better news is that a colonoscopy is both diagnostic and therapeutic, so if polyps are found, they are removed at the same time. Once a colonoscopy is done, patients can feel “protected” until time for their next exam.

Since Katie Couric made colon cancer a more recognizable disease and the colonoscopy an accepted screening tool, there can be no doubt about the need for everyone to get screened. Be proactive and “just get it done.”

To schedule an appointment for a screening colonoscopy, talk to your primary care physician or call 1-866-GO-TO-AGA (468-6242).