

**A CONVERSATION ABOUT COLON CANCER**

*By Kalle Kang, MD, gastroenterologist, Overlake Internal Medicine Associates*

Contrary to popular belief, there are many reasons to be optimistic about colon cancer—it is readily preventable with routine screening and care, treatable and very often curable when caught in its earliest stages and addressed with appropriate therapy. In addition, there are a number of lifestyle changes that can also help reduce your colon cancer risk. Despite all the good news, colorectal cancer—cancer that develops either in the colon or rectum—is still the third most common cancer in the United States, aside from skin cancer.

As a specialist who spends nearly half my time educating patients about colon health and providing colon cancer screening, I recognize that it's a difficult topic for people to talk about—and an even more difficult part of the body to have examined. As a result of its taboo status, colorectal cancer affects more

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than 150,000 people in the United States each year, a third of which will die from the disease within five years. I continually work to educate the public and my patients that preventive care is the key with colorectal cancer.

Your family history is a primary risk factor for colon cancer. If a close family member (mother, father, sister, brother) had colorectal cancer, especially before age 60, your risk increases and you should talk with your doctor about when to get tested. A rule of thumb is 10 years before your family member was diagnosed and every five years afterward.

In addition to the psychological barrier around colon health, there has traditionally been a cost barrier for screening tests. The good news is that a colonoscopy is now covered by many insurance plans. Since all plans are different, it's important to contact your provider about your individual coverage. The final hurdle in the battle against colon cancer is the perceived discomfort of colonoscopy screening. Often, I hear patients say it isn't nearly as bad as they thought it would be and that the preparation is worse than the screening itself.

There are a number of screening tests, including a fecal occult blood test that is used to determine if there is blood in the stool, one possible sign of colon cancer. Another screening test is sigmoidoscopy that uses a small, flexible lighted tube inserted in the rectum allowing the doctor to view the lower half of the colon.

These and other tests are used to screen for colon cancer, but if anything suspicious is found, a colonoscopy is often required to provide a more complete view of the colon to determine next steps. A colonoscope is similar to a sigmoid-

oscope but it is longer and can be used to view the entire length of the colon and identify polyps—the early, benign growths that can later develop into cancer. If polyps are found, the doctor may remove them during the test.

Prior to the test, patients are given medicine to take at home the day before to help clean their bowels. Many people say this is the most unpleasant part of the test since a bit of time is spent in the bathroom. Patients receive sedation during the test, which typically takes about 30 minutes. Patients often remain semi-awake during the test, but remain very relaxed and may not remember much of it. Because of this, you'll need someone to take you home afterward.

A colonoscopy is recommended every 10 years for people age 50 and older with no family history of colon cancer. If a close family member has had the disease, the American Cancer Society recommends you speak to your doctor about your risk factors along with timing and frequency of screening.

In addition to routine screening, people should see their doctor if they have any unusual symptoms including:

- Any type of rectal bleeding (whether from hemorrhoids or other cause).
- Change in bowel pattern.
- Unusual abdominal pain.

It's extremely important to see your doctor if you experience rectal bleeding to rule out colon cancer. Other ways to reduce your risk: Limit consumption of red meat, saturated fats and alcohol; increase fiber, fresh fruits and vegetables; stop smoking and stay active.

Current figures show that roughly 40 percent of American adults undergo the recommended colonoscopy screening. Many of my colleagues and I share the opinion that we could greatly diminish the disease and its bad outcome if everyone complied with the guidelines. Isn't it time you talk with your doctor or schedule a colon cancer screening test?

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