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Skipping a Colonoscopy Not Worth the Risk If detected early, colon cancer is highly curable

Some risks in life are worth taking – the risk of falling in love, forming a family or finding a friend. These risks can enrich your life and the lives of those around you.

Other risks in life are not worth taking – the risk of neglecting your health and, specifically, the risk of skipping recommended screenings, such as screening for colorectal cancer with colonoscopy.

Neglecting these screenings can reduce your quality of life, reduce the length of your life and bring heartache to the lives of those around you. Neglecting to get a screening colonoscopy is definitely a risk not worth taking.

“First, colorectal cancer screening with colonoscopy brings peace of mind far more often than it brings a worrisome diagnosis,” said Erling Larson III, M.D., senior partner and medical director at Gastroenterology Associates, Bettendorf. “The risk for developing colorectal cancer over the course of your life is roughly five percent for men and women. Second, if the cancer is detected and treated early, the survival rate for patients with colorectal cancer approaches 95 percent.

“These statistics should be reassuring, but they do not change the fact that we are still losing more than 57,000 U.S. men and women a year to colorectal cancer – perhaps someone from your family or your circle of friends – because they skipped their colonoscopy and lost the potential for prevention or early detection

RISK FACTORS AND SCREENING

You should have a colonoscopy if:

- You are 50 or older or earlier with risk factors;
- You have a family history of colon or rectal cancer or polyps;
- You have a personal history of inflammatory bowel disease.

LOOK FOR THESE SYMPTOMS

Call your physician or the Center for Digestive Health – (563) 449-3740 -- if you have any of the following:

- A change in bowel habits, such as diarrhea, constipation, or narrowing of the stool that persists for more than a few days;
- Bleeding from the rectum or blood in your stool.

and treatment, which might have saved their lives.”

Dr. Larson added, “Colorectal cancer often produces no symptoms until it is beyond successful treatment, which is why it is extremely important to know your risk factors and when to begin screening.”

William Davidson III, M.D., a partner at Gastroenterology Associates and director of endoscopy at the Center for Digestive Health, said: “Several years ago, we formed a joint venture with Genesis to build the Center for Digestive Health, a state-of-the-art facility that is dedicated to endoscopic procedures, including colonoscopy. With the convenience of being able to perform colonoscopies at Genesis hospitals, when medically necessary, and at the Center, our partnership has significantly expanded the number of Quad City-area people who have been screened for colon cancer. Nevertheless, there are still significant numbers of people who have not been screened.”

Half over age 50 have not been screened

“Nationally and locally – right here in the Quad Cities – nearly 50 percent of people who should have a screening colonoscopy have not had one in the last 10 years,” said Richard Weyman IV, M.D., another partner. “These people are taking a risk that is just not worth taking. Many of them will be fine. Some of them will come to us when colon cancer is preventable or highly curable. But some will never come to us, or they will come to us when the cancer is beyond successful treatment, which is tragic.”

Lack of symptoms can lead to neglect

Young B. Huh, M.D., also a partner, said: “Part of the problem is that some polyps and early cancers do not produce symptoms, so patients have no symptoms to bring up in conversation with their primary care physicians or their nurses. This means they may not be referred for colonoscopy, or they may not be referred as early as desirable.

“Another part of the problem is that some people are falsely reassured by negative results from Fecal Occult Blood Tests, or FOBTs, which are not adequate substitutes for colonoscopies. Many polyps and cancers do not bleed, so a negative FOBT for hidden blood does not ensure that a patient does not have colon cancer.”

Regular screening can help prevent colon cancer

Nearly all colon cancers begin with benign polyps on the bowel wall, which may be as small as a pea or larger than a plum. Over time they may grow and become cancerous. The larger



Young B. Huh, M.D., of Gastroenterology Associates, performs a colonoscopy with assistance from Stephanie Wink, R.N., and Michell Riley, CNA, Endoscopy Technician, at the Center for Digestive Health in Bettendorf.

they are, the more likely they are to contain cancer cells.

David S. Pratt, M.D., another partner, explained: “Colonoscopy is valuable in diagnosis and treatment of many diseases of the large intestine, particularly colon cancer and inflammatory bowel disease (ulcerative colitis and Crohn’s disease.) Abnormalities suspected by x-ray can be confirmed and studied in detail via colonoscopy. Even when x-rays are normal or negative, the cause of symptoms, such as rectal bleeding or change in bowel habits, may be found by colonoscopy.”

Dr. Pratt added, “The greatest impact of colonoscopy has been its ability to prevent colon cancer by polyp removal. Before colonoscopy became readily available, major abdominal surgery was the only way to remove colon polyps to determine if they were benign or malignant. Now, most polyps can be safely removed without surgery.”

Colonoscopy is a safe, effective procedure

A colonoscopy is performed using a thin, flexible, maneuverable tube with a miniature camera at its tip. It is inserted into the rectum and into the large intestine (colon), which permits physicians to examine the lining of the colon without surgery. Abnormalities suspected by x-ray can be confirmed and studied in detail.

Abnormalities too small to be seen on x-ray may also be identified. If a suspicious area or an area of inflammation is identified and requires evaluation, a biopsy may be taken. A biopsy means sampling a small piece of tissue for further examination under microscope in the laboratory. Biopsies are taken for many reasons and do not necessarily mean cancer is suspected.



Nearly all colon cancers begin with benign polyps on the bowel wall, which may be as small as a pea or larger than a plum. Over time they may grow and become cancerous. The larger they are, the more likely they are to contain cancer cells. This photograph depicts removal of a polyp – called a polypectomy – for further study.

Colonoscopy is the most accurate screening method

Anjana Kumar, M.D., also a partner, said: “We have a reputation for being sensitive to the safety and comfort of our patients. We use advanced equipment in private, state-of-the-art suites. Procedures are performed with sedation to keep patients comfortable. Colonoscopy is safe, effective and a more accurate method of examining the lining of the colon than any other available alternative, including virtual colonoscopy.

“The problems with virtual colonoscopies, right now, are: they are not as accurate as conventional colonoscopies; they require the same preparation on the part of the patient as conventional colonoscopies; and, if polyps or other abnormalities are

found or suspected, a conventional colonoscopy still has to be performed, which means that virtual colonoscopies, right now, often end up being less reliable, more hassle, and more costly to patients.”

Together, Gastroenterology Associates and Genesis, through the Center for Digestive Health, provide state-of-the-art facilities, advanced equipment and physicians with the skills and experience to detect and help prevent colorectal cancer. But you have to make the call.

If you have questions about your need for a colonoscopy, call your physician or call the Center for Digestive Health – (563) 449-3740.

Skipping a colonoscopy is just not worth the risk.



The Center for Digestive Health in Bettendorf opened in 2004 and is a joint venture between Gastroenterology Associates and Genesis Medical Center.



Physicians send their friends to us for colonoscopies.

William Davidson III, M.D.

Board Certified in Internal Medicine & Gastroenterology
Special training in ERCP

- We have a reputation for sensitivity to your safety and comfort.
- We use advanced equipment, in private, state-of-the-art suites.
- We are experienced in detecting and helping prevent colon cancer.
- If you’re 50 (or 40 with risk factors), call for an appointment today!



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