DOCTORS SHARE
5 IMPORTANT FACTS
ABOUT COLON CANCER
SCREENING IS NOT AS BAD AS PEOPLE SAY

Unfortunately, too many patients avoid colon cancer screening due to misconceptions or fears about the screening process.

It is OK to have questions or reservations about your screening colonoscopy or colonoscopy preparation, but it’s also critical to know that this procedure can SAVE YOUR LIFE.

We talked to several physicians about screening colonoscopies and other colon cancer screening methods, and they have a message for those putting off their test—IT'S NOT THAT BAD!

“Too often, patients delay or avoid screening for colon cancer because of the perception that this testing is intrusive, uncomfortable, and downright frightening. Those that discover the disease in later stages are placed in a very difficult situation that affects not only themselves but their loved ones.”

– DR. LYSY & DR. JAMES | FAMILY PRACTICE PHYSICIANS | DIAMOND LUXURY HEALTHCARE

“I do these procedures all day, every day. Everyone wakes up in my recovery room relieved that it is over, and astonished at how easy it was. I reassure them that their experience will be the same.”

– DR. JEFF BULLOCK | GASTROENTEROLOGIST | SAN ANTONIO GASTROENTEROLOGY ASSOCIATES, P.A.

“Patients frequently delay screening due to fear of the bowel preparation necessary to thoroughly clean the colon or pain from the procedure. The bowel preparation has become easier; most physicians now use a low volume, split dose bowel prep. As for the colonoscopy, it is not a painful endeavor. You will get an IV in your arm and receive medications to safely sedate you so you are unaware of the procedure. Most patients wake up surprised it is all over.”

– DR. KELLY FINAN | COLORECTAL SURGEON | OUR LADY OF THE LAKE CANCER CENTER

Source: American Cancer Society Colorectal Cancer Facts & Figures 2014-2016 Publication
Colon cancer is entirely preventable

Of all the things science knows about colon cancer, this might be the most important: it is a highly preventable disease.

Colon cancer begins as a cluster of cells along the colon—a growth called a polyp. These polyps can be benign at first, meaning they are not yet cancerous. However, if undetected, the polyps can become cancerous over time, and often show no symptoms along the way.

Colon cancer screening tests are designed to detect colon polyps and cancer at an early stage before they progress and become more dangerous. By simply getting screened, you can essentially stop colon cancer in its tracks.

Colon cancer is the second leading cause of cancer death in this country and the No. 1 thing people can do to prevent colon cancer is to be compliant with screening colonoscopies and the removal of pre-cancerous polyps when found.

— Dr. Anna Toker | Colorectal Surgeon | USMD

Colon cancer is one of the only types of cancer that you can find before it even reaches the cancerous stage. Think about that. Almost all other cancers are dealt with once they are already there! Colon cancer screening can catch a premalignant lesion so that we can deal with it before it becomes dangerous.

— Dr. David Lotsoff | Gastroenterologist | Mercy

For colon cancer, with timely removal of polyps, the cancer can be prevented from ever occurring making decisions regarding surgery, radiation and chemotherapy unnecessary.

— Dr. Timothy Ritter | Gastroenterologist | Texas Digestive Disease Consultants

Source: American Cancer Society Colorectal Cancer Facts & Figures 2014-2016 Publication
Colon cancer is the second leading cause of death among men and women in the U.S. Screening allows doctors to intervene before cancer spreads, increasing a patient’s chance of survival dramatically.

A full 90% of patients diagnosed at an early stage survive 5 years or longer. However, when the cancer is diagnosed late, only 13% of people reach that five-year survivor milestone.

Screening has prevented hundreds of thousands of late-stage colon cancer cases, saving countless lives in the process.

Colon cancer screening saves lives. That is the most important thing to know. When polyps are removed, they cannot grow up to become colon cancer. When colon cancer is detected and dealt with early, it dramatically increases your chance of survival compared to when it is detected at an advanced stage.”

- Dr. David Lotsoff | Gastroenterologist | Mercy

“Last year alone I performed over 1,000 colonoscopies and found pre-cancerous polyps in roughly 39% of patients having the exam for colon cancer screening. That is quite a few of the people you know and talk to every day.”

- Dr. Jeff Bullock | Gastroenterologist | San Antonio Gastroenterology Associates, P.A.

“The main thing to know about colon cancer screening is that it works! As opposed to lung or prostate screening, or even breast in terms of age of beginning screening, there is no controversy about colon cancer.”

- Dr. Mark Reichelderfer | Gastroenterologist | UW Health

Source: American Cancer Society Colorectal Cancer Facts & Figures 2014-2016 Publication
YOU CAN TAKE ACTION TO REDUCE YOUR RISK OF COLON CANCER

We now know that colon cancer can be detected early and even prevented with routine screening tests, but there are additional measures you can take to reduce your risk for cancer and other diseases.

Colon cancer risk is based on both genetic factors and lifestyle factors. Lifestyle factors are totally within your control—this group of risk factors includes diet and exercise habits, alcohol and tobacco consumption, and other decisions that can impact your health.

Research shows high levels of physical activity and diets high in fiber and whole grains can help reduce risk for colon cancer. Conversely, diets high in processed foods and red meat can increase risk for colon cancer. Simply improving your lifestyle habits can dramatically reduce your cancer risk.

“We recommend reducing processed foods and simple sugars such as high fructose corn syrup to optimize your health. Our ultimate goal is to eliminate the need for medications and reverse the detrimental effects on the body caused by our traditional American diet. Lifestyle modification is essential in order to accomplish your colon health or overall health goals. Watching what you put in your body and being more active than you are now will ALWAYS be beneficial! Live well and enjoy life!”

– DR. LYSSY & DR. JAMES | FAMILY PRACTICE PHYSICIANS | DIAMOND LUXURY HEALTHCARE

“Stay active: research has repeatedly revealed a strong inverse relationship between physical activity and cancer risk, especially for colorectal cancers. Smoking cessation is one of the best things that a smoker can do to lower their cancer risk.”

– DR. C.K. WANG | DIRECTOR OF MEDICAL ONCOLOGY | USMD

“The best thing you can do is live a healthy lifestyle! Consume a diet high in fruits and vegetables, milk, calcium and folate. Exercise regularly and maintain a healthy weight. Limit red and processed meats, saturated fats and alcohol consumption.”

– DR. KELLY FINAN | COLORECTAL SURGEON | OUR LADY OF THE LAKE CANCER CENTER

Source: American Cancer Society Colorectal Cancer Facts & Figures 2014-2016 Publication
A final lesson about colon cancer from these physicians: when it comes to colon cancer screening, **time is of the essence**. Because screening allows for the detection and removal of colon cancer and precancer before they become more dangerous, it is critical to catch any tumors as soon as possible.

If polyps are detected during colon cancer screening, they can be removed before they become cancerous. If cancer is detected, the earlier the stage of the diagnosis, the better the prognosis.

There’s no reason to delay screening – simply complying with screening regulations could not only spare you the emotional and financial burden of the treatment associated with a colon cancer diagnosis, but it could also save your life.

So why wait? **Be seen, get screened!**

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**If I find polyps, I can remove them before they become cancer. If I find cancer, you have a better prognosis if it is found earlier as opposed to when you wait until you are having symptoms. Don’t wait until you have concerning symptoms to undergo screening for colon cancer. By then it may be too late.”**

— **DR. DAVID LOTSOFF | GASTROENTEROLOGIST | MERCY**

**Colon cancer screening saves lives. There is no reason to delay as the earlier polyps or cancers are found the easier they are to treat.”**

— **DR. DUSTIN DEMING | MEDICAL ONCOLOGIST | UNIVERSITY OF WISCONSIN CARBONE CANCER CENTER**

**Colon cancer has a high rate of cure if found early, but that cure rate falls off dramatically if distant metastasis. Why hesitate, get screened!”**

— **DR. LAURIE CROWE | INTERNAL MEDICINE PHYSICIAN | USMD**

Source: American Cancer Society Colorectal Cancer Facts & Figures 2014-2016 Publication
### YOU HAVE OPTIONS!

**STOOL DNA (sDNA) TEST**
- Identifies altered DNA and/or blood in stool, which are associated with the colon cancer and its precursors.

**FIT**
- Detects blood in stool, which may indicate colon cancer.

**FOBT**
- Detects blood in stool, which may indicate colon cancer.

**CT COLONOGRAPHY (Virtual Colonoscopy)**
- Uses 3D radiology to create a high-tech picture of the inside of the colon and rectum so doctors can see if there are growths that may be cancer or precancer.

**FLEXIBLE SIGMOIDOSCOPY**
- Uses a small tube with a camera on the end to see if any growths are present and to remove any that are suspicious. It only examines the lower part of the colon.

**COLONOSCOPY**
- Allows doctors to see the inside of the colon and rectum, remove any growths that might be there, and take samples to determine if any of the growths they removed are cancerous.

### HOW IT WORKS

- **STOOL DNA (sDNA) TEST**
  - You collect your stool at home and mail the test collection kit to the lab in a prepaid shipping box.

- **FIT**
  - You collect a sample of your bowel movement at home and return the test kit to your doctor or a lab.

- **FOBT**
  - You collect a sample of your bowel movement at home and return the test kit to your doctor or a lab.

- **CT COLONOGRAPHY (Virtual Colonoscopy)**
  - A radiologist doctor will perform the procedure in a radiology suite. It takes a few minutes in the scanner, with downtime before and after.

- **FLEXIBLE SIGMOIDOSCOPY**
  - Your doctor will perform the procedure in the office, which takes approximately 20 minutes.

- **COLONOSCOPY**
  - A specialist doctor (gastroenterologist) will perform the procedure in a clinic or hospital.

### PREPARATION

- **STOOL DNA (sDNA) TEST**
  - No preparation required

- **FIT**
  - You do not need to follow any diet preparation or changes to your medications

- **FOBT**
  - This test may require that you limit certain foods and medications in your diet

- **CT COLONOGRAPHY (Virtual Colonoscopy)**
  - This test requires fasting

- **FLEXIBLE SIGMOIDOSCOPY**
  - This test may require that you limit certain foods and medications in your diet

- **COLONOSCOPY**
  - This test requires fasting

### TYPE

- **STOOL DNA (sDNA) TEST**
  - Noninvasive

- **FIT**
  - Noninvasive

- **FOBT**
  - Noninvasive

- **CT COLONOGRAPHY (Virtual Colonoscopy)**
  - Minimally Invasive

- **FLEXIBLE SIGMOIDOSCOPY**
  - Invasive

- **COLONOSCOPY**
  - Invasive

### OTHER CONSIDERATIONS

- **STOOL DNA (sDNA) TEST**
  - At-home stool collection
  - Recommended for average-risk patients who are 50 years of age or older
  - If the test result is positive, a colonoscopy is needed to find the source of the bleeding
  - Because there are other conditions that can cause blood in the stool, this may not be as reliable for detection of colon cancer

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- **FOBT**
  - At-home stool collection
  - If the test result is positive, a colonoscopy is needed to find the source of the bleeding
  - Because there are other conditions that can cause blood in the stool, this may not be as reliable for detection of colon cancer

- **CT COLONOGRAPHY (Virtual Colonoscopy)**
  - Useful for people who can’t have or prefer not to have colonoscopies
  - No sedation required
  - Not covered by Medicare
  - Not recommended for high-risk patients
  - For diagnosis only—follow-up colonoscopy required if suspicious areas are found
  - Prepping for this test requires you to use the bathroom often, stick to a clear liquid diet, and drink a special solution that helps to empty your colon

- **FLEXIBLE SIGMOIDOSCOPY**
  - Examines the lower part of the colon or rectum
  - Air is put into the colon
  - Suspicious-looking areas can be removed and biopsied during the procedure

- **COLONOSCOPY**
  - Examines the entire colon
  - Removes polyps
  - Patients receive sedation for the procedure
  - Prepping for this test requires you to use the bathroom often, stick to a clear liquid diet, and drink a special solution that helps to empty your colon

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Source: American Cancer Society Colorectal Cancer Facts & Figures 2014-2016 Publication