March is Colon Cancer Awareness Month

COLORECTAL cancer is the second-leading cause of cancer deaths in Oregon, but also one of the most preventable. Our success in reducing colon cancer incidence rates in our community lies in our ability to reach more at-risk patients for colonoscopy exams. Most of our routine screening patients are referred to us by primary care providers. When you see a patient 50 years or older during an office visit, and find they have not had a colon screening exam, please consider referring them for a colonoscopy.

Please help us raise awareness of colon cancer prevention, through March and every month of the year.

Family History Matters
by Dr. Mark Schiele

Family history matters when it comes to identifying patients who are at increased risk for colon cancer. Related factors to consider in these patients include the number of relatives with colon cancer, the age of the relative when the cancer was diagnosed, and whether it is a first-degree relative (parents, sibling), or second-degree relative (uncle, aunt, grandparent) who had the diagnosis. (Table 1)

Average risk patients should start screening at age 50. But what about those patients at higher risk? After identifying a high-risk patient because of family history, we suggest following the 2009 guidelines published by the American College of Gastroenterology. (Table 2)

You occasionally may find an otherwise healthy patient who has a young family member with colon cancer. These patients are at much higher risk, and the general rule is to start screening by colonoscopy when the patient is 10 years younger than the age of the relative at diagnosis, or no later than age 40. For example, if your patient had a brother diagnosed at age 40 with colon cancer, your patient should then have his or her initial colonoscopy at age 30.

Finally, sometimes the decision about when to start colon screening is unclear. What about patients who don’t know their family history? At what age should patients with a polyposis syndrome have their colonoscopy? What do you tell a patient who has family members with multiple other cancers? Should they have earlier screening?

Consider a physician-to-physician consultation with The Oregon Clinic Gastroenterologists for all your colon cancer screening questions.

Table 1

<table>
<thead>
<tr>
<th>FAMILY HISTORY</th>
<th>LIFETIME RISK OF COLON CANCER</th>
</tr>
</thead>
<tbody>
<tr>
<td>One first-degree relative with colon cancer</td>
<td>2-3 times increased</td>
</tr>
<tr>
<td>Two first-degree relatives with colon cancer</td>
<td>3-4 times increased</td>
</tr>
<tr>
<td>First-degree relative with colon cancer diagnosed at age &lt; 50 years</td>
<td>3-4 times increased</td>
</tr>
<tr>
<td>One second- or third-degree relative with colon cancer</td>
<td>About 1.5 times increased</td>
</tr>
<tr>
<td>Two second-degree relatives with colon cancer</td>
<td>2-3 times increased</td>
</tr>
<tr>
<td>One first-degree relative with an adenomatous polyp</td>
<td>About 2 times increased</td>
</tr>
</tbody>
</table>

Table 2

<table>
<thead>
<tr>
<th>FAMILIAL RISK CATEGORY</th>
<th>SCREENING RECOMMENDATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single first-degree relative with CRC or advanced adenoma diagnosed at age &gt;= 60 years</td>
<td>Same as average risk</td>
</tr>
<tr>
<td>Single first-degree relative with CRC or advanced adenoma diagnosed at age &lt;60 years or two first-degree relatives with CRC or advanced adenomas</td>
<td>Colonoscopy every five years beginning at age 40 years or 10 years younger than age at diagnosis of the youngest affected relative</td>
</tr>
</tbody>
</table>
Introducing The Oregon Clinic Gastroenterology

As one of the top referral centers on the west coast, and one of the largest in the nation, our board certified physicians are recognized leaders in caring for patients with diseases of the esophagus, stomach, small intestine, colon, rectum, pancreas, gallbladder, and liver. With state-of-the-art outpatient centers, we offer our patients cutting edge diagnostic and therapeutic procedures in a comfortable and compassionate environment.

To learn more about our Gastroenterology practice, visit www.oregonclinic.com/gastroenterology