

# Dr. Olga Falkowski on the Importance of Colon Cancer Screening for Reducing Risk and Early Treatment

Colorectal cancer is the third most common type of cancer — and a leading cause of cancer deaths in the United States. Around 150,000 people are newly diagnosed with colorectal cancer every year, with almost 50,000 deaths a year, with an increasingly large percentage of people under the age of 50. But despite extensive evidence supporting the value of the screening, the rates of colorectal screening exams are consistently lower than those for other types of cancer.

Indeed, unlike breast and cervical cancers — two diseases that doctors know are best battled through screening tests that can ID problems before they become life threatening — screenings for colorectal cancer still falls far short of ideal, says Dr. Falkowski, associate medical director of Acupath Laboratories, Inc., which offers the most sophisticated technologies available for cell and genetic analyses. Things are getting better, as rates among at-risk adults have risen from 20 to 30 percent in the late '90s to nearly 60 percent today. “But the rates are still below what they should be,” adds Dr. Falkowski. “We’ve still got millions of people who are at risk for colorectal cancer who aren’t getting tested.”

Why? “The tests can be time-consuming, embarrassing and uncomfortable for some people,” says Dr. Falkowski. In addition, a new government report shows that many people who should be getting tested simply aren’t aware of the need, because their doctors aren’t talking about it or aren’t emphasizing the importance of screening. Dr. Falkowski offers that the tests are critical to early diagnosis and encourages people to talk with their doctors about their risks factors for colon cancer and about when testing is needed.

## The Power of Screening

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The first step is typically a benign (non-cancerous) growth, called a polyp, which forms on the inner lining of the colon or rectum. Some polyps can become malignant (cancerous).

“Screening exams can detect cancerous tumors as well as non-cancerous polyps,” Dr. Falkowski explains. “If the doctor finds polyps, he can get rid of them before they become cancerous.” And if colorectal cancer is already present, the exam allows the doctor the begin treatment immediately, which dramatically increase chances of survival: The relative 5-year survival rate for colorectal cancer that’s caught before it has spread is roughly 90 percent, but once it’s spread to nearby lymph nodes, that rate drops dramatically, and if it’s spread to the liver, lungs, or other distant organs, the chances of survival are only about 11 percent.

## The Tests

Less invasive tests, called the fecal occult blood test (FOBT) or the fecal immunochemical test (FIT), are also used to screen for cancer, although they’re less effective at detecting polyps. The FOBT and FIT detect occult (hidden) blood in feces, which can be a sign of cancer (tumors or large polyps in the colon can be damaged as feces passes through, releasing a small amount of blood).

Current recommendation is to start regular colon cancer screening at the age of 50. If you have other risk factors, such as a personal or family history of cancer or polyps, you should talk with your doctor about starting earlier. Other risk factors include a history of inflammatory bowel disease (ulcerative colitis or Crohn's disease), type-2 diabetes, smoking, heavy alcohol use, obesity and physical inactivity. There's also evidence that eating a diet that's heavy on meat, particularly processed meats and meat that's been cooked at very high temperatures (things that are fried, broiled or grilled) also ups your odds for developing colorectal cancer. "Anyone with these high-risks may need to be screened at a younger age and more frequently," Dr. Falkowski says.

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Acupath Laboratories, Inc. is a Plainview, New York, specialty medical lab engaged in leading-edge molecular and cytogenetic analysis. [www.acupath.com](http://www.acupath.com)