

# Colon Cancer Screening

## (CAN SAVE YOUR LIFE)

 Karen K. Kormis, M.D., FACP, FACG

### March Is Colon Cancer Awareness Month

Colorectal cancer is the third leading cause of cancer death in men and women in the U.S., with more than 140,000 adults diagnosed with colorectal cancer each year. Screening for colorectal cancer can help detect the disease at an early stage, when treatment is most likely to be successful. It's estimated that 70% of all colon cancer cases could be prevented with early detection.

#### 80% By 2018—Raising Awareness To Save Lives

"80% by 2018" is a National Colorectal Cancer Roundtable initiative in which hundreds of organizations have committed to eliminating colorectal cancer and are working toward the goal of having 80% of adults aged 50 and older screened for colorectal cancer by 2018.

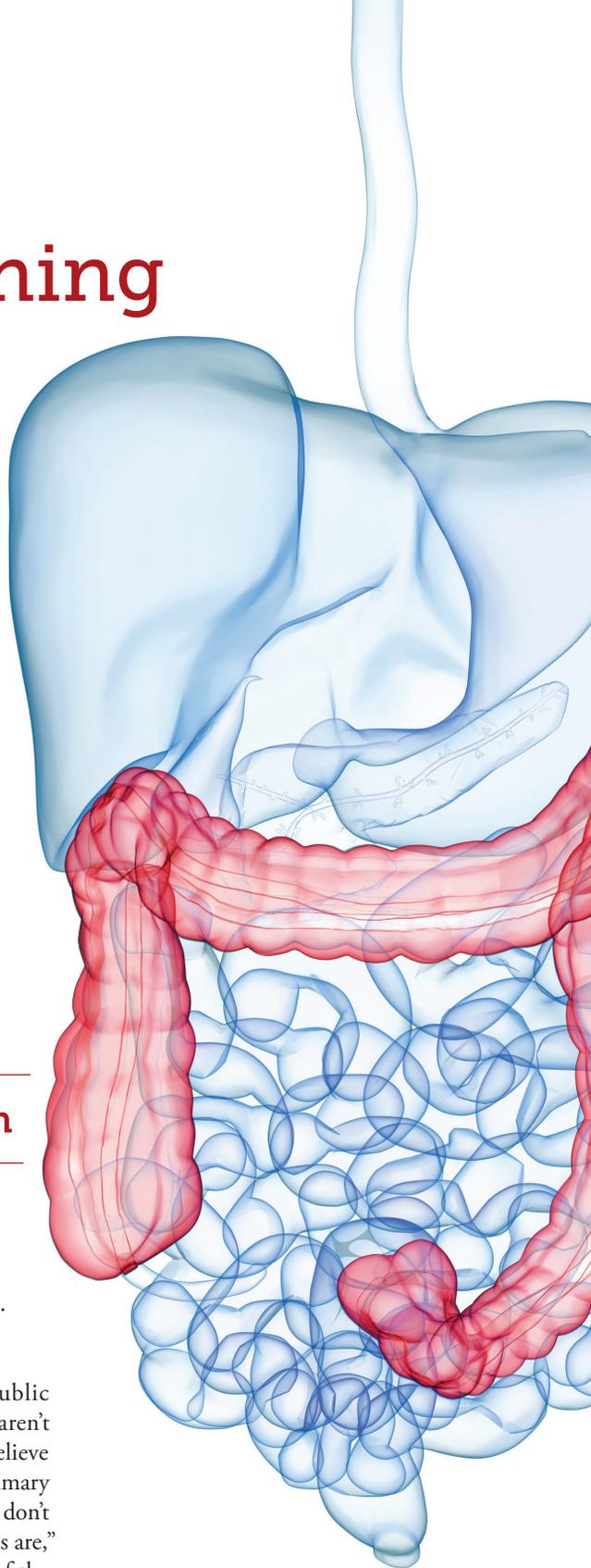
"Screening by colonoscopy is the number one way to help prevent colon cancer," explained Dr. Karen Kormis.

#### Who Should Be Screened?

"Colorectal cancer is a major public health problem, but many people aren't getting tested because they don't believe they are at risk. Sometimes their primary doctor hasn't recommended it or they don't understand what their testing options are," said Dr. Carmen Guerra, President of the American Cancer Society East Central Division Board of Directors. "Those 50 and older should talk with their doctor about getting screened for colon cancer and the test that's best for them."

Colon cancer, in particular, is a cancer found predominantly in men and women

over the age of 50. The American Cancer Society, the National Cancer Institute and the American College of Gastroenterology endorse screening for colorectal cancer beginning at age 50. There is strong evidence that appropriate screening significantly reduces the risk of colon and rectal cancer.



“Some patients may need to get screened earlier than age 50, if they have increased risk factors,” said Dr. Kormis. “Higher-risk patients include those who have a family history of colon cancer or polyps or if they have a personal history of colon polyps or inflammatory bowel disease.”

“There are a number of screening tests that can be done,” Dr. Kormis explained. “A colonoscopy, done by a gastroenterologist, is considered the ‘gold standard’ for colon cancer screening for a number of reasons. It not only allows us to closely evaluate the colon, but we can also remove any polyps that are detected at the same time as the screening. This prevents those polyps from developing into colon cancer, which in turn dramatically decreases the patient’s risk of developing colon cancer.”

**According to the  
National Colorectal  
Cancer Roundtable,  
about 1 in 3 adults  
between 50 and 75  
years old —**ABOUT****

**23 MILLION  
PEOPLE—are not  
getting tested as  
recommended.**

### Removing Barriers To Screening

One of the findings of the National Colorectal Cancer Roundtable was that patients weren’t getting screened because their primary care doctor was not suggesting it. “To help get the word out to family physicians,

we will be mailing colon cancer screening information to them during March,” said Dr. Kormis. “We hope that doctors throughout Central PA will partner with us in our efforts to increase the number of people who get screened for colon cancer.”

Another barrier to screening was the cost. Thanks to changes in insurance coverage with the passage of the Affordable Care Act, screening colonoscopies are now fully covered by Medicare and many insurance plans for people who are over 50. There are also more people who are now able to get insurance, offering them access to medical tests that they may not have had previously.

### Learn More Today

Take a moment during National Colon Cancer Awareness Month to learn more about colon cancer symptoms, the preventive colonoscopy screening procedure and how you can get screened. Look for detailed colonoscopy information sheets at [www.PAGIconsultants.com](http://www.PAGIconsultants.com) or visit the American Cancer Society’s website, [www.cancer.org](http://www.cancer.org). +

### ABOUT THE AUTHOR

**Dr. Karen K. Kormis, M.D., FACP, FACG,**  
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*Dr. Kormis is a graduate of Hahnemann School of Medicine in Philadelphia, PA. She completed her residency at the University of Connecticut Hospital and its affiliates. She completed her Gastroenterology Fellowship at the University of Connecticut Medical School.*

*Dr. Kormis treats all types of digestive disorders and has a special interest in patients with irritable bowel syndrome and inflammatory bowel diseases. Much of her work centers on helping patients manage chronic conditions to improve their overall health and quality of life. She has been caring for PA GI patients since 1996.*

