# **Colon Polyps & Colon Cancer**

## Facts about Colorectal Cancer

- Colorectal cancer is the third-leading cause of cancer death in the United States among both men and women.
- About 150,000 patients are diagnosed with colorectal cancer each year, and more than 40 percent of these will die of the disease.
- The lifetime risk for developing colorectal cancer for an American is 1 in 18
- The vast majority of colorectal cancers begin as non-cancerous growths called polyps. Removal of colon polyps during
  - colonoscopy reduces your chance of developing colon cancer by greater than 90%.
- Early stage colorectal cancer can be cured by surgery
- For this reason, testing for colorectal cancer should be part of your comprehensive medical care.

## Frequently asked Questions about Colonoscopy

#### There is no history in my family for colorectal cancer—am I still at risk?

Yes. All men and women aged 50 and older are at risk for developing colorectal cancer.

And some individuals are at higher-than-average risk for colorectal cancer. If you have a family member who had colorectal cancer or colon polyps, or if you personally have had colitis or colon polyps, you may need to begin screening in your 30s or 40s.

If you are a woman and have had either breast or uterine cancer you also have a slightly higher risk of developing colorectal cancer.

If your diet is high in fat or low in fiber, if you smoke or drink excessive alcohol, if you do not exercise, or if you are obese you are also at increased risk of developing colorectal cancer.

Your first step in preventing this serious disease is to speak with your physician at NYGA to evaluate your own circumstances carefully and fully assess your individual risk for colorectal cancer.

#### Do I have to go into a hospital for my examination?

No. At NYGA, we perform your colonoscopy at our fully-equipped suite within our office. This setting allows us to provide you the best possible quality, comfort, convenience and privacy.

#### Is the procedure painful?

Absolutely not. In an effort to ensure your comfort, the physicians at NYGA have developed an improved method of sedation for colonoscopy. You can now have your colonoscopy with virtually no discomfort. In fact, patients typically do not recall the colonoscopy at all, yet are alert and ready to return to normal activities within an hour or so after the conclusion of the procedure.

#### What are the chances of acquiring a transmissible infection from colonoscopy?

Almost zero. There have been rare reports of infection transmitted during colonoscopy, though none of these cases occurred at NYGA. Upon investigation of these cases, it was discovered that the infection was transmitted through contaminated needles and medication vials, not the colonoscope.

At NYGA, we take many steps to ensure the sterility of our equipment, so you will have a completely safe exam.We use a specially designed endoscope sterilizer. Our catheters and needles are all single-use so as to eliminate any risk of infection.

# Do I have to drink a gallon of salty fluid and take enemas to clean out my colon in preparation for the procedure?

No. For your convenience, we several options for bowel cleansing. You can discuss these options with your doctor or any of the medical assistants.

#### Will I need to take off an extended period of time after the colonoscopy?

No. In a recently completed research study of almost 1000 procedures at NYGA, patients recovered from the examination within 20-25 minutes, and almost all individuals were able to return to their normal activities the following day.

# I have heard a lot about "virtual" colonoscopy. How does this test compare to real colonoscopy?



Conventional Colonoscopy of a sigmoid colon polyp



Virtual Colonoscopy of a sigmoid colon polyp

Virtual colonoscopy uses X-ray shadows to study your colon. Because it is a new test, nobody knows how accurate it really is. Most probably, virtual colonoscopy is accurate if you have a large colon cancer. But if you have a smaller growth, virtual colonoscopy may miss it.

Despite its clever name, virtual colonoscopy is not easier to undergo than real colonoscopy. Theexaminations require you to take the same bowel-cleansing regimen. You may actually experience more discomfort during virtual colonoscopy than real colonoscopy. And if a growth is found on virtual colonoscopy, you will then need to undergo a real colonoscopy (on a different day and after a second bowel preparation) to take care of the problem once and for all.

For all these reasons, we at NYGA believe strongly that real colonoscopy provides you with the most safe, comfortable and convenient colorectal cancer screening test available today.

#### Patient preperation for a colonoscopy

In order for the examination to be thorough, the colon must be properly cleansed of all intestinal contents. Careful attention to the bowel evacuation instructions will permit your physician to perform the optimal examination, as well as improving the efficiency of the procedure.

There are several different regimens to achieve bowel evacuation. A staff member will review these options with you at the time that the examination is scheduled. Please inform our staff of your active medical conditions as well as all medications that you are using. It is usually recommended that all aspirin compounds and iron containing vitamins be stopped one week before the examination. Exceptions to this should be discussed with our staff or physician.

### **Colon Polyp**

A colon polyp is any growth arising from the wall of the large intestine. The size of a polyp is extremely variable, a minute lesion no bigger than a freckle, to a large mass the size of a grapefruit. most polyps require endoscopic removal due to their potential to become cancerous growths. Colonoscopic removal of polyps is an important step in the prevention of colon and rectal cancer, the second leading cause of cancer related deaths in the United States.

During the colonoscopic examination, the doctor will remove any polyp that is encountered. most polyps can be removed during a single session using snare wire and electracautery. When required, multiple polyps can be removed during a single session. Rarely, a very large polyp may require more than one session to safely remove all of the abnormal tissue.