

Deseret News

Colonoscopy screening can reduce cancer risk

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SALT LAKE CITY — The death of actress Farrah Fawcett last year at age 62 brought new public awareness of rectal and anal cancer, which are often passed over in discussions about the importance of colonoscopy screening.

"Colon and rectal cancer is the same syndrome, it's just in a different location," according to Dr. Michael Sossenheimer. "Rectal cancers have the tendency to start sooner — fairly low down to the anus — and they're more difficult to treat."



Dr. Michael Sossenheimer talks with a patient before an endoscopy procedure.

Sossenheimer and his colleague, Dr. Edward Frech, of Mountain West Gastroenterology and Intermountain Medical Center, will answer questions about those cancers and other topics involved with colonoscopy screening Saturday during the monthly Deseret News/Intermountain Healthcare Hotline. The free call-in program runs from 10 a.m. to noon, and callers will speak with one of the doctors privately. From the Salt Lake area, call 801-236-6061. Elsewhere, the toll-free number is 1-800-925-8177.

Patients diagnosed with rectal cancer may need treatment with chemotherapy or radiation to shrink the tumor before surgery is performed to remove it, Sossenheimer said. "We want to keep the patient whole so they don't have to have a colostomy bag.

"If the tumor is low enough, and we don't have enough room to remove it and keep safe margin for tumor prevention, then it will impact the anus," which results in a colostomy bag. "That's something we want to avoid."

He said rectal cancer is "a bit more concerning" than colon cancer because "It's more difficult to remove and also more likely to spread."

The main symptom for colon and rectal cancer is bleeding, which can easily be ignored. "Because the stool is liquid for the most part, patients may not sense the obstruction," though with rectal cancer they "may sense a tumor low down sooner."

Other things to watch for include changes in the shape of the stool, fresh blood or blood in the stool, unusual constipation and bloating with abdominal pain. "Anyone with bleeding or anemia should ask a doctor about it," he said, noting that most often cancer has been present for some time before any symptoms occur.

The other symptoms may be caused by blockage or partial blockage of the colon and rectum.

Sossenheimer said patients who come in for colonoscopy without any symptoms at all are sometimes found to have other diseases like diverticulosis, irritable bowel disease, ulcerative colitis or Crohn's disease, "but usually they would have some kind of symptoms. Without that we would be surprised to find those things."

In screening for colon and rectal cancer, the tools haven't changed much in the past few years, he said, though testing on the efficacy of virtual colonoscopy, stool and DNA testing is now under way.

<http://www.deseretnews.com/article/700023472/Colonoscopy-screening-can-reduce-cancer-risk.html>

Call free hotline today

Colon cancer screening, symptoms and treatment are the topic of today's Deseret News/Intermountain Healthcare Hotline. From 10 a.m. to noon, Dr. Edward Frech and Dr. Michael Sossenheimer, of Mountain West Gastroenterology and Intermountain Medical Center, will answer questions from callers. From the Salt Lake area, call 801-236-6061. Elsewhere, the toll-free number is 1-800-925-8177, only operational during hotline hours.