

COLONOSCOPY SAVED MY LIFE!

by ROBERT FUSCO, MD

There is a lot of **bad news** about colon cancer. As a gastroenterologist for almost 50 years, I have seen too many patients die from this surprisingly common, deadly disease. It's the second most common cause of cancer death in this country - second only to lung cancer, affecting about 1 in 18 Americans. *If tobacco use is removed from the statistics, colon cancer is the number one cause of death from cancer in the United States.*

Unfortunately, no early warning signs or symptoms exist, and many cases are diagnosed in advanced stages. Even with modern techniques and technology, only 60% of patients can be saved once diagnosed with colon cancer. A future full of optimism enjoyed with friends and family is forfeited as afflicted individuals succumb to this disease. Dying from colon cancer is usually slow and a long-drawn-out matter taking several years...years of progressive decline while realizing that the opportunity to enjoy a long life has been lost.

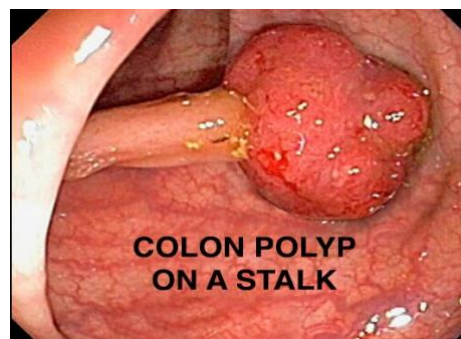
Adding to this heart-rending situation is the eventual recognition that their colon cancer could, in all probability, have been prevented. I have seen it all...

But there is some good news. This cancer is preventable! When compared with most other malignancies, this is unparalleled.

Other cancers, such as breast, lung, or prostate, must be present before they can be diagnosed. They cannot be prevented. Once identified, a victim must endure the pain and anxiety of surgery, chemo, and radiation, hoping that the cancer has been caught in time.

I tell my patients that colon cancer is not like other cancers. Why? Because for over 50 years, we have had an extremely effective tool to *prevent* it: a **screening colonoscopy**. Almost all colon cancers begin as a small pre-cancerous growth called a *polyp*. A polyp is a small, usually benign, "mushroom-shaped" protrusion on the inner colon lining detected in about 1 in 6 adults. **FIND AND REMOVE THE POLYP; PREVENT THE CANCER!**

Polyps develop randomly for unknown reasons. There are no warning symptoms and no reliable way to prevent them. Undetected, polyps continue to grow. Some, not all, develop into colon cancer, usually without advance notice. [OVER]



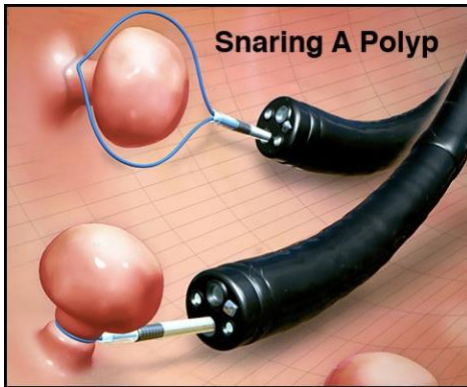
Robert Fusco, M.D.

A native of Western Pennsylvania, Dr. Robert Fusco graduated *summa cum laude* from the University of Pittsburgh. As an undergraduate, he was elected into Phi Beta Kappa scholastic honor society membership. In 1973, he received his medical degree with honors from the University and was elected into Alpha Omega Alpha honor medical society. His specialty training in Internal Medicine and Gastroenterology was at Duke University Medical Center in North Carolina. He has been in practice at Sewickley since 1977. Dr. Fusco is board-certified in Gastroenterology. He was formerly president of the Center for Digestive Health and Nutrition and Medical Director of Three Rivers Endoscopy Center. He is certified in Advanced Cardiac Life Support. He is now semi-retired, and his practice is limited to Gastroenterology. He is married, has three children and seven grandchildren, and resides with his wife in Sewickley, PA.



WATCH THIS VIDEO

Periodic screening colonoscopy exams present an excellent opportunity to find and remove any polyps discovered during the procedure well before cancer cells form. Thus, a future colon cancer can be prevented. The illustration below demonstrates how a colon polyp is removed with a thin wire snare during a colonoscopy.



I had my first screening colonoscopy when I turned 50, as was recommended in 1997. Preparing for a colonoscopy is not without its trials and tribulations. No solid food for 24 hours and undergoing laxative purging cannot be called fun, but it is not as disagreeable as it once was. The newer “preps” are much simpler and require less fluid to drink. (SUTAB, a new “pill prep,” is now available). For my procedure, I just told myself, “It’s better than chemo...”

The roughly twenty-minute procedure was a breeze thanks to MAC anesthesia. I didn’t feel a thing and remembered nothing. It was like I just blinked and woke up in the recovery room with my wife at my side.

Precancerous Polyps

To my surprise, three significant polyps were found during my first exam. All three were removed while I slept comfortably. Later, biopsies showed that my polyps were NOT malignant but the most serious type of so-called “precancerous” polyps called villous adenoma. Three potential cancers prevented! That first exam definitely changed the course of my life.

There are different kinds of polyps - some more serious than others. Without removal, **adenomatous** polyps and **sessile serrated adenomas** have a high risk of transforming into cancer. **Villous adenomas** are the most serious. Had they not been removed in time; I have no doubt that my premature death from colon cancer would have been inevitable. Being both the doctor, and the patient, I am more appreciative of the technology that has lengthened my life, and that I can use to prevent colon cancer in my patients.

Something Has Changed

Over the past twenty years, something troubling has happened: ***we are now discovering colon polyps and colon cancers in ever younger individuals***, where once it was mostly confined to older adults. This statistic is true in our practice and across the United States. Nobody knows why.

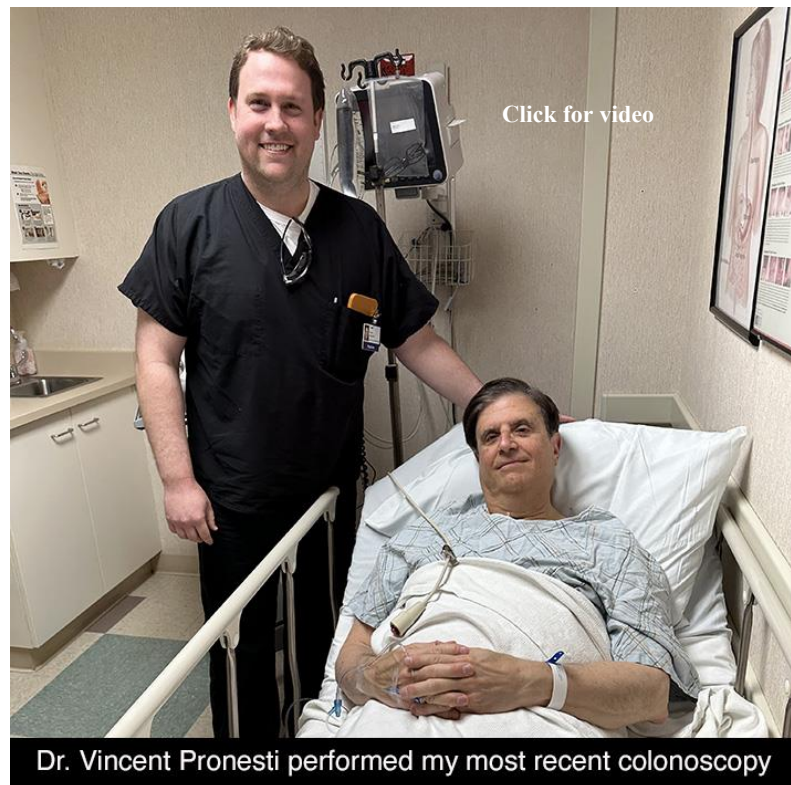
This is why the potentially lifesaving recommended age to begin screening colonoscopy was recently dropped from age 50 to 45.

Adults with symptoms such as rectal bleeding or persistent change in bowel habit should be tested regardless of age. If you are over the age of 45 and you have not yet had your first screening colonoscopy, ask your doctor, “WHY NOT?”

While most patients with colon cancer have no family history, sometimes the problem is hereditary. **We strongly suggest that children and siblings of those with colorectal cancer or polyps begin screening around age 40.** *I have three children. All three had precancerous polyps in their early 40’s. Thank goodness they came in for an exam! By age 50, it may have been too late!*

I am now entering my 79th year and, to date, I have had 7 screening colonoscopy examinations during which numerous colon polyps were removed! *I should have died from colon cancer many years ago, but because of colonoscopy, I have had the opportunity to watch our three children grow up and give us seven beautiful grandchildren.*

THANK YOU COLONOSCOPY!



Dr. Vincent Pronesti performed my most recent colonoscopy