

## COLONOSCOPY SAVED MY LIFE!

by ROBERT FUSCO, MD

There is a lot of **bad news** about colon cancer. As a gastroenterologist for over 44 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, there are no early warning signs or symptoms, 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 their children's lives, or delighting in seeing their grandchildren grow up has been shortened. 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, have to be present before they can be diagnosed. They cannot be prevented. Once identified, a victim must endure the pain and anxiety of surgery, chemotherapy, and radiation in the hope that the cancer has been caught in time.

I tell my patients that, "colon cancer is great". Why? Because we have 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. 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, without advance notice.



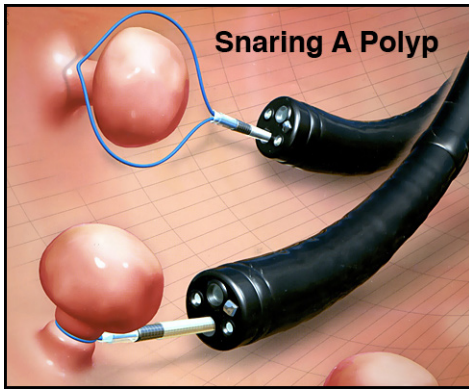
**Dr. Robert Fusco**

A native of Western Pennsylvania, Dr. Robert Fusco was graduated *summa cum laude* from the University of Pittsburgh. As an undergraduate, he was elected to membership of Phi Beta Kappa scholastic honor society. In 1973, he received his medical degree with honors, also 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 both in Internal Medicine and Gastroenterology. He was formerly president of Sewickley Medical Association, a multi-specialty group and 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 a participating physician in Pennsylvania Blue Shield and Medicare. His practice is limited to Gastroenterology. He is married, has three children, seven grandchildren, and resides with his wife in Sewickley, PA.



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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 photo below demonstrates how a colon polyp is removed during a colonoscopy with a thin wire snare.



I had my first screening colonoscopy when I turned 50. I have three children and I wanted to participate in their futures: watch them grow up, marry, and grow their families, giving us grandchildren to spoil. Preparing for a colonoscopy is not without its trials and tribulations. No solid food for 24 hours, and undergoing a 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. (SOUTAB, a new “pill prep,” is now available). For my procedure, I just told myself, “It’s better than chemo...”

Thanks to modern MAC anesthesia, the roughly twenty-minute colonoscopy test was a breeze. 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

Much to my surprise, Dr. Stanley had found three polyps in my colon during my very first exam! He skillfully removed all three while I slept comfortably. Later, biopsies showed that my polyps were not malignant, but of the so-called “precancerous” type called villous adenoma.

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 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 your future colon cancer.

### Something Has Changed

Over the past twenty years, something troubling has happened: we are discovering colon polyps AND colon cancers in ever younger individuals, where once it was mostly confined to older adults. This statistic is true, not only in our practice, but also across the United States.

Nobody knows why. ***This is why the potentially life-saving 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?”

This problem is often hereditary. We strongly suggest that children and siblings of those with colorectal cancer or polyps begin screening around age 40. *I have three children. My son had a precancerous colon polyp at age 40, and both of my daughters had precancerous polyps in their early 40’s. Thank goodness they came in for an exam! By age 50, it would have been too late!*

### Thank You, Colonoscopy!

I am now entering my 75th year and, to date, I have had seven screening colonoscopy examinations during which, a total of 17 polyps were removed! *I should have died from colon cancer many years ago, but because of screening colonoscopy, I have had the opportunity to watch our three children grow up and give us seven beautiful grandchildren - thanks to colonoscopy.*

