

**YOUR HEALTH IS
IMPORTANT TO US...**

**Contact your physician to discuss
your screening options.**

Michael S. Ader, MD

Lawrence J. Brandt, MD

Amnon Gotian, MD

David A. Greenwald, MD

Isadore P. Gutwein, MD

Sammy Ho, MD

Henry J. Katz, MD

Albert D. Kramer, MD

Daniel S. Reich, MD

Jeremy S. Rochester, MD

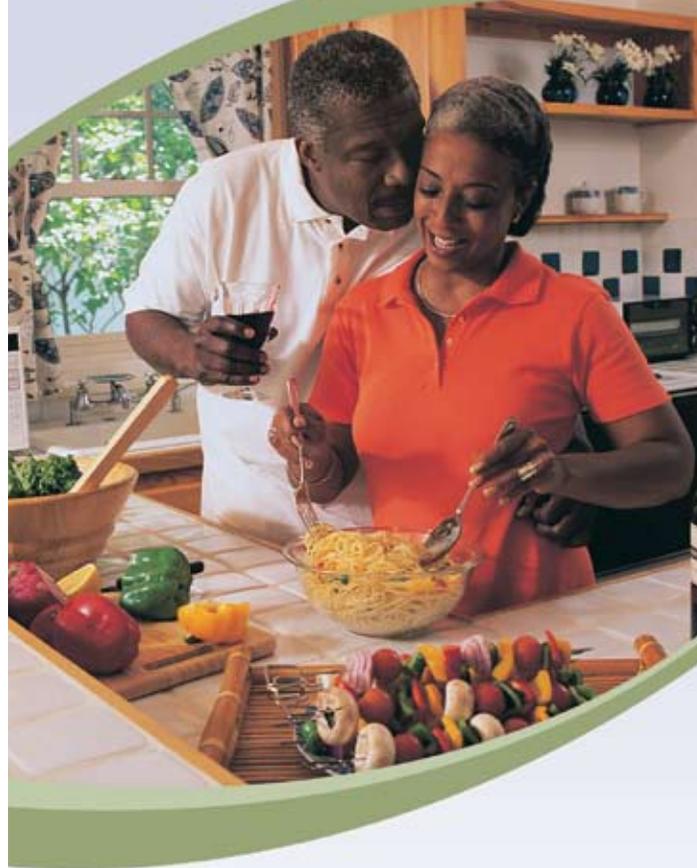
Robert A. Sable, MD

Philip E. Schweitzer, MD

David F. Stein, MD

Ira A. Tepler, MD

Aaron Z. Tokayer, MD

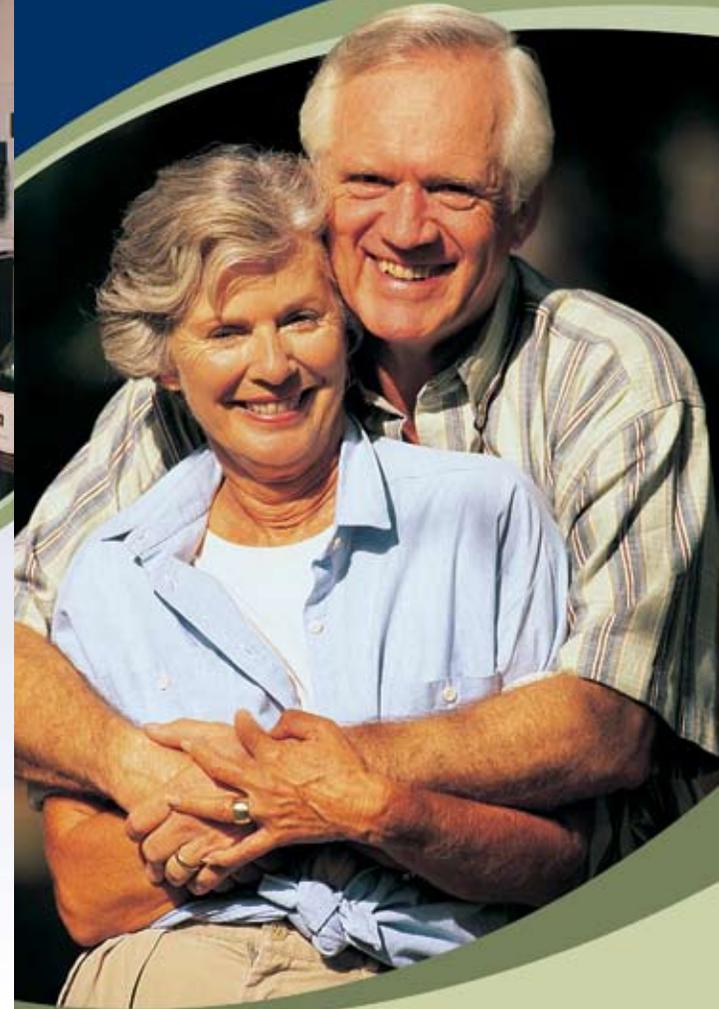


ADVANCED ENDOSCOPY CENTER

5500 Broadway, Suite A (2nd Floor)
Bronx, NY 10463
(p) 718.548.7900 (f) 718.548.8900

WHAT YOU SHOULD KNOW ABOUT

Preventing Colon Cancer



ADVANCED ENDOSCOPY CENTER

5500 Broadway, Suite A (2nd Floor)
Bronx, NY 10463
(p) 718.548.7900 (f) 718.548.8900

WHAT YOU SHOULD KNOW ABOUT COLON CANCER... AND SCREENING FOR PREVENTION

According to *The American Cancer Society; Colorectal Cancer Facts and Figures – Special Edition 2005...* Cancers of the colon and rectum combined are the third most common type of cancer and the second most common cause of cancer death in the U.S.

Colorectal cancer usually causes no symptoms in its early stages, making screening important.

Incidence rates declined by 2.9% per year during 1998-2001. Research suggests that these declines may in part be due to increased screening and polyp removal, thereby preventing progression of polyps to cancers.

RISK CATEGORIES

- Men are more likely to have polyps putting them at higher risk than women.
- The older you are, the higher the risk.
- African Americans have higher colorectal cancer rates than men and women of other racial and ethnic groups.
- Smoking or being overweight increases your risk for colorectal cancer.
- Family history or a personal history of breast, colorectal, or uterine cancer, inflammatory bowel disease or colon polyps also increases your risk.

NEW COVERAGE BENEFIT

In addition to the continuing coverage for high risk patients, beginning July 1, 2001, the Centers for Medicare and Medicaid Services (CMS) formerly known as Health Care Financing Administration (HCFA) will cover a screening colonoscopy for average risk patients 50 years and older.

RECOMMENDED SCREENING PROGRAM

• **Average Risk Patient**

These patients have no symptoms, no personal or family history of colon cancer. They should be screened by colonoscopy (a simple, quick and effective procedure) starting at age 50.

• **High Risk Patient:**

These patients are with or without symptoms, but with a first degree relative (parent, sibling, child) or personal history of colon cancer, colon polyps, inflammatory bowel disease, or family history of other types of cancer (breast, uterine, prostate or ovarian). These patients should start screening at age 40, with repeat screenings at the discretion of your physician.

Screen early...then screen again as advised by your physician. Keep your physician updated on any changes in your health or life style. Good health takes a daily commitment.

SYMPTOMS OF COLORECTAL CANCER

- A change in bowel habits
- Diarrhea, constipation, vomiting
- Narrower than normal stools
- Unexplained weight loss
- Constant tiredness
- Blood in stool
- Feeling that the bowel does not empty completely
- Abdominal discomfort – gas, bloating, fullness, cramps
- Unexplained anemia

REDUCING YOUR RISKS

- Exercise at least a small amount daily
- Don't smoke
- Keep your weight in check
- Limit your alcohol intake
- Talk to your doctor about your risk factors
- Talk to your relatives about your family history of cancer
- **Have regular colon cancer screening**