ISSUE 2

The Bottom Line

Vaughan Endoscopy Clinic (VEC) is a **state of the art** out-of-hospital endoscopy clinic providing Screening colonoscopy and **endoscopy** for the work up of mild gastrointestinal disorders. It is staffed by eleven board certified **gastroenterologists.**

In addition to the endoscopic services, they will provide all the necessary **GI follow-up** and make all the appropriate referrals required due to findings at the endoscopy.

The Medical Director has been an active participant at the CPSO in the development of **standards for out-of-hospital clinics**, all of which VEC adheres to.

Gastroenterologists:
Dr. William Appell
Dr. David Ford
Dr. Michael Gould
Dr. Susan Greenbloom
Dr. David Kreaden
Dr. Eric Leong
Dr. Michael Ostro
Dr. Ted Ptak
Dr. Jonathon Springer
Dr. Rajiv Sethi
Dr. Stephen Sinclair

In addition to high quality and convenient access to endoscopy, the Doctors at VEC will provide you with supplemental practical GI advice through this periodic newsletter. This article on the risks associated with colon cancer is written by Dr. Eric Leong (a gastroenterologist from Humber River Regional Hospital).

How Can People Lower Their Risk of Developing Polyps or Colon Cancer?

Aside from undergoing regular screening and surveillance colonoscopies, patients often ask what they can do to lower their risk of developing polyps or colon cancer, which is the second leading cause of cancer-related deaths among men and women. In some cases, genetics may play a dominant role that outweighs environmental factors, such as dietary and lifestyle habits. However, these hereditary forms of colon cancer, where an identifiable cancer gene is present, account for only 5% of all cases. Another 20% of colon cancers are diagnosed in patients with a family history of colon cancer but no known cancer gene.

The majority of colon cancer cases are sporadic, occurring in a seemingly random manner in 75% of cases. The vast majority of colon cancers arise from polyps, which are mushroom-like growths that enlarge slowly. Increasing age is a risk factor for growth of polyps and development of colon cancer. Over 90% of cases of colon cancer occur after the age of 50.

What about environmental factors?

The link between environmental factors and the risk of developing polyps and colon cancer has been the subject of some large studies. Based on a European study that followed over 360 000 men and women for an average of more than 6 years, those who were significantly overweight were 50% more likely to have colon cancer compared with people in the lowest 20% of the weight range. Another European study of over 470 000 men and women found that those who had high intake (more than 80 grams each day) of red meat (such as beef or pork) or processed meat (such as ham, sausage, or hot dogs) each day were more likely to have colon cancer. In contrast, fish consumption was associated with a lower risk of colon cancer in the same study. Overall, people who ate large amounts of red or processed meat and low quantities of fish were 60% more likely to have colon cancer than those who had a high intake (at least 40 grams per day) of fish and only small amounts of red or processed meat.

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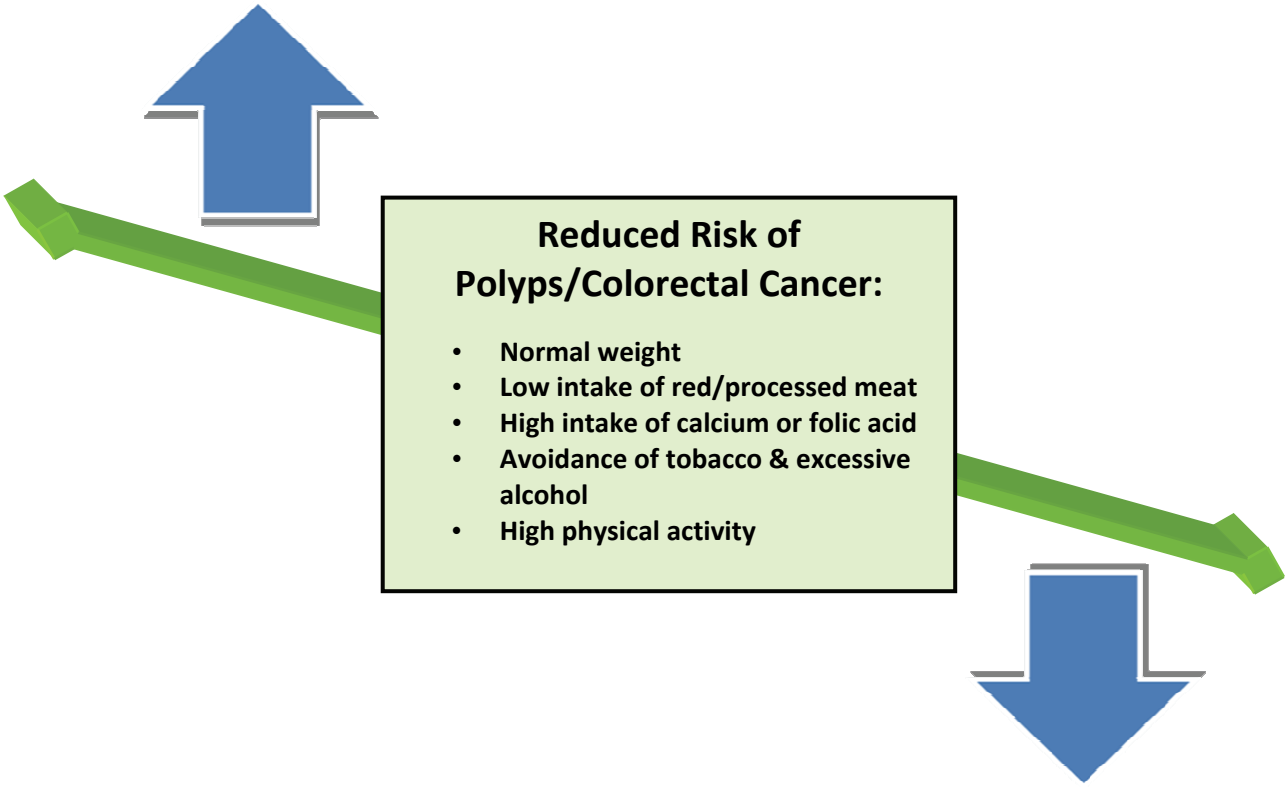
Other dietary factors that may increase the risk of colon cancer include low folic acid consumption and high alcohol intake. We often hear that we should strive for high intake of dietary fibre to lower the risk of developing colon cancer. However, a study that was published in 2005 combined the results of 13 studies, including over 725 000 men and women, and found that after taking into account other dietary factors, fibre intake did not affect the likelihood of finding colon cancer. Smaller studies have found that people who have good intake of calcium (at least 1200 mg daily) are less likely to have polyps detected during colonoscopy.

What about non-dietary factors?

Non-dietary factors, such as smoking of tobacco and physical activity, have been examined. One study found that people who continue to smoke are 80% more likely to harbour adenomatous polyps, which have the potential to transform into colon cancer if they are allowed to grow unchecked. In contrast, a Norwegian study concluded that physical activity equivalent to walking or bicycling at least 4 hours per week during leisure time was associated with an almost 40% reduction in the risk of finding colorectal cancer in women. By combining occupational and recreational physical activity, it was found that increasingly higher levels of activity were associated with progressively lower levels of risk of colorectal cancer in both men and women. Another study published in 2006 found that patients with locally advanced stage 3 colon cancer who engaged in moderate or vigourous physical activity were 2 times more likely to have disease-free survival compared with patients with low levels of physical activity.



The bottom line is:

Colorectal cancer is preventable in the majority of cases with appropriate screening and surveillance. In addition to genetics, lifestyle factors, which include diet, physical activity, smoking, and alcohol consumption, have been shown to influence the risk of developing polyps and colorectal cancer.

This newsletter will be posted on our website (www.vaughanendoscopy.com) thus your patients are able to download a copy for reference. Other GI topics of interest will be published periodically.