

*Community*  
NEEDS ASSESSMENT

**COMMUNITY OUTREACH UPDATES**

**WATSON CLINIC** LLP  
*Cancer & Research Center*

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# Colon CANCER

The American Cancer Society Cancer Facts and Figures 2013 publication estimates that in 2013 more than 142,820 people will be diagnosed with colorectal cancer and over 50,000 people will die of the disease in the United States.

Colon cancer is the only **PREVENTABLE** cancer, which can be achieved through screening colonoscopy beginning at age 50, or sooner if there is a family history.

Our objective is to bring awareness to the public on the fight against colon cancer and increase the number of screenings performed in our community.

As the leading cancer care provider in the area, Watson Clinic Cancer & Research Center is fully committed to winning this battle as evidenced by our pledge with the American Cancer Society to increase colon screening of qualified individuals to 80% by the year 2018.

***“80% by 2018 is a National Colorectal Cancer Roundtable initiative in which dozens of organizations have committed to eliminating colorectal cancer as a major public health problem and are working toward the shared goal of 80% of adults aged 50 and older being regularly screened for colorectal cancer by 2018.”***

Our outreach efforts have included, but will not be limited to:

- **A free community educational lecture held in March of 2015 which, featured medical oncologists, gastroenterologist and a general surgeon.**

**Fecal Immunochemical Test (FIT) kits were provided to the attendees of this event. The following number returned their kits and were provided outcomes:**

- ▶ **35 free FIT tests given out**
- ▶ **14 FIT tests returned**
- ▶ **14 negative results**



- **An article published in our monthly newsletter reminded our physicians and staff of the need to discuss screening colonoscopy with their patients – July 2015.**
- **A Health Scene magazine article written by gastroenterologists regarding colorectal screening was direct mailed in the Summer 2015 to approximately 70,000 households.**

There are several screening test options. It is important to discuss with your physician which of these options is right for you.

- **Colonoscopy**
- **Fecal Immunochemical Test (FIT)**
- **Flexible Sigmoidoscopy**
- **Double Contrast Barium Screening**
- **Virtual Colonoscopy (CT Colonography)**
- **Cologuard**

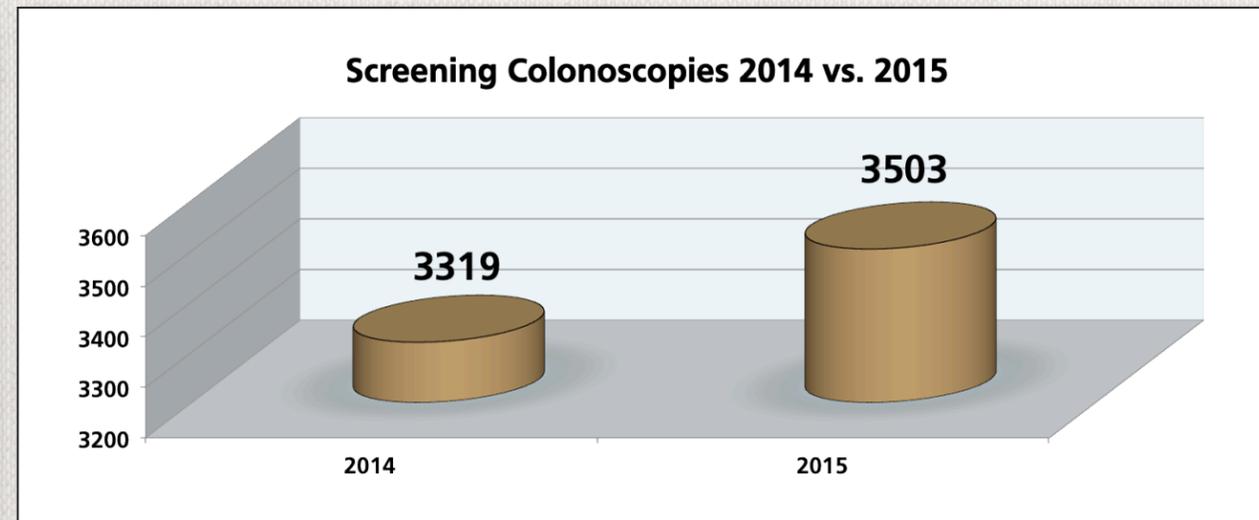
The following data compares 2014 vs. 2015 to measure the efforts to increase awareness. These 2014 & 2015 patients range from 50-70 years of age with an appointment arrival with internal medicine and family practice:

- **2014 = 31,668**
- **2015 = 32,560**

Colonoscopy is the endoscopic examination of the large bowel and the distal part of the small bowel. A camera or fiber optic camera on a flexible tube is passed through the anus, and provides a visual diagnosis and allows for biopsy. Colonoscopy can remove polyps as small as one millimeter or less.

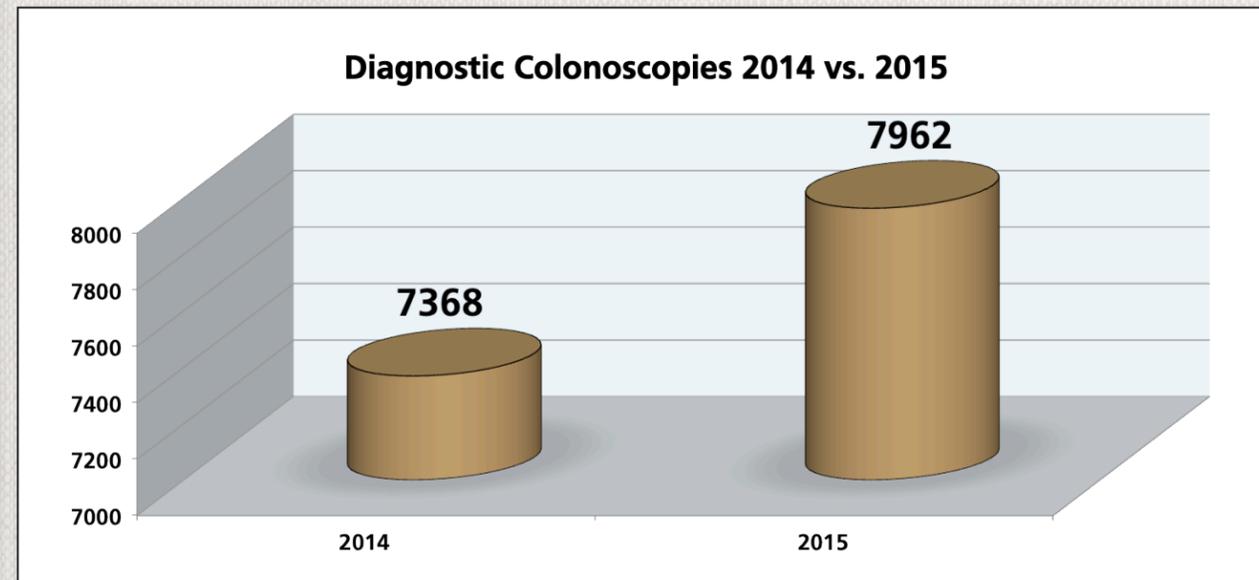
**Screening:**

A preventive measure used to identify potential or incipient disease at an early, usually asymptomatic stage.



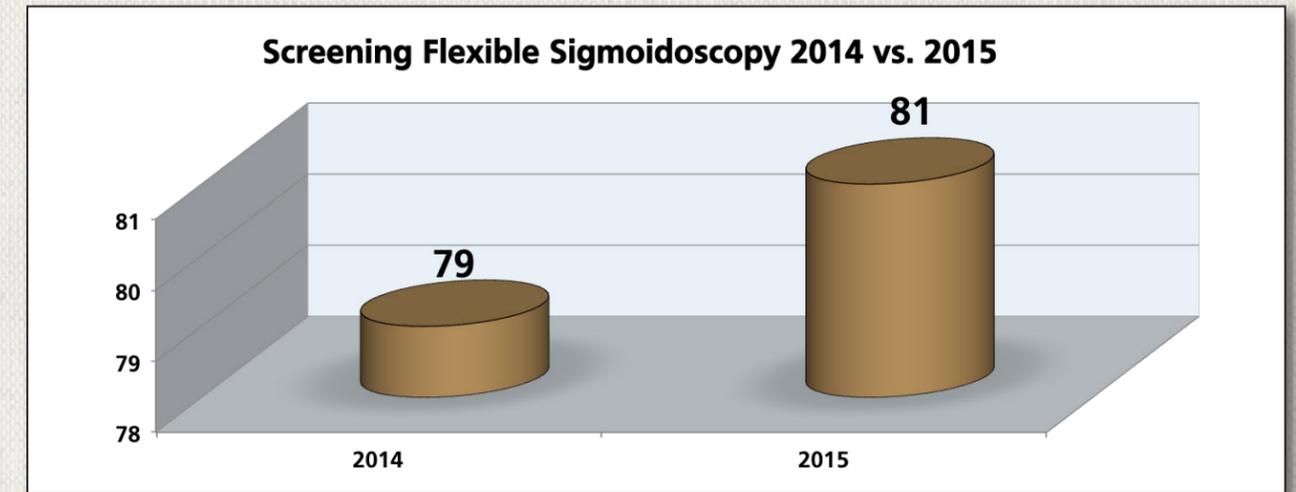
**Diagnostic:**

A symptom or a distinguishing feature serving as supporting evidence in a diagnosis.



**Flexible Sigmoidoscopy:**

An exam used to evaluate the lower part of the large intestine (colon). This procedure does not allow the physician to see the entire colon. As a result, any cancers or polyps farther into the colon cannot be detected by flexible sigmoidoscopy alone.



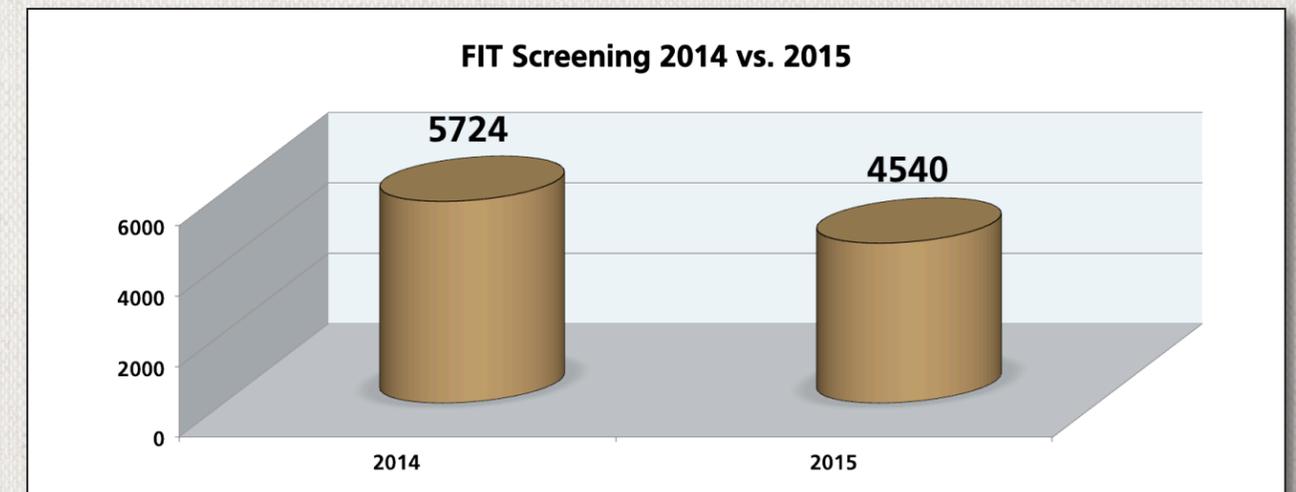
**Barium Screening:**

A radiographic study in which a solution containing barium sulfate is administered into the rectum in order to visualize the lower intestinal tract.

- There was no barium screening for 2014 and 2015

**Fecal Immunochemical Test (FIT) :**

A screening test for colon cancer. It tests for hidden blood in the stool, which can be an early sign of cancer. FIT only detects human blood from the lower intestines.



**Cologuard:**

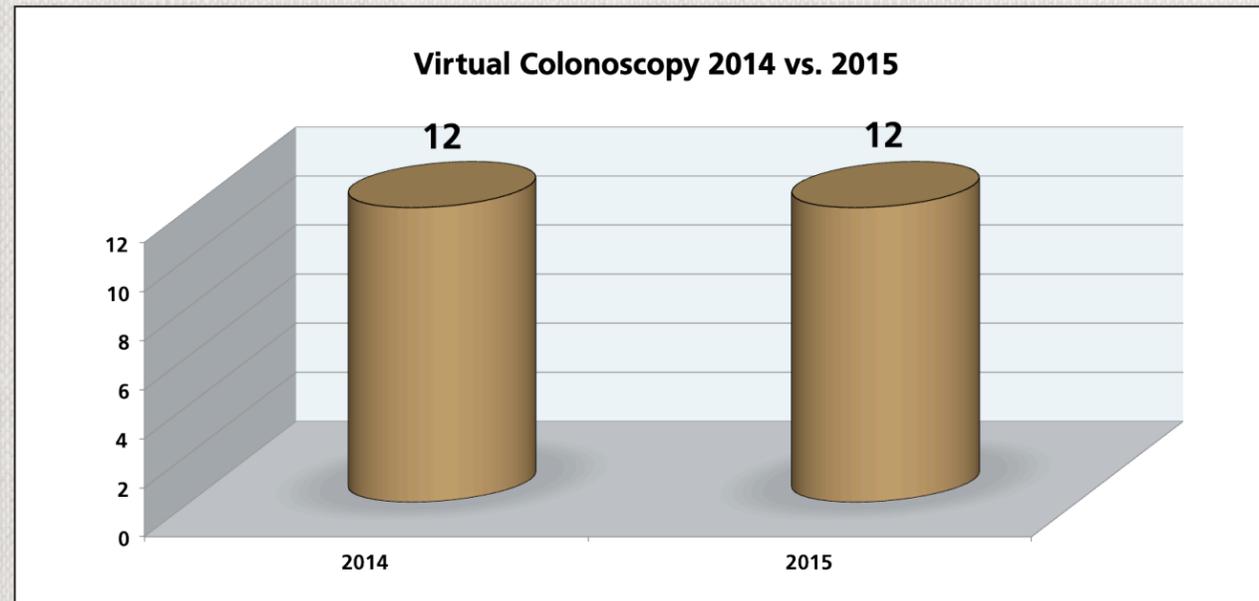
A DNA non-invasive test that identifies DNA changes in the cells of a stool sample. Cologuard is a screening test that uses multiple-markers and stool DNA technology to detect colorectal cancer and pre-cancer.

Cologuard testing started in April of 2015. The number of returned COLOGUARD kits from April 2015 through February 2016 is as follows:

- **480 kits sent out from cologuard**
- **246 kits returned**
- **35 positive results**

**Virtual Colonoscopy:**

This exam uses 2D and 3D imagery reconstructed from a computed tomography (CT) scan or from a nuclear magnetic resonance (MR) scan. It is a non-invasive medical test, although it is not a standard test performed and is still under investigation regarding its diagnostic abilities.



We are committed to the goal set by the American Cancer Society of 80% by 2018.

Please join us in talking with your friends and families to remind them that colon cancer is HIGHLY preventable.

Also, please discuss with your physician which screening test may be right for you especially if you have a family history of colon cancer.

The Medical Oncologists for the Watson Clinic Cancer & Research Center recommend colonoscopy as the gold standard for screening.

**Summary:**

Although the number of screening colonoscopies in 2015 increased overall, the results of colon cancer screening for 2015 were disappointing.

The total number of screenings for colon cancer were lower in 2015 vs. 2014

Our future direction is to increase our outreach efforts by engaging and educating the community.

**Watson Clinic medical oncologist's community outreach:**

- **Lunch and Learn Programs**
- **Underserved Community Outreach**
- **Community Leaders Education**
- **Primary Care Physician Education**



 MOFFITT ONCOLOGY NETWORK MEMBER

**WATSON CLINIC** LLP  
*Cancer & Research Center*

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1730 Lakeland Hills Boulevard • Lakeland, FL • 863-680-7780  
[www.WatsonClinic.com/CancerCenter](http://www.WatsonClinic.com/CancerCenter)