

Patients become strong advocates for colon cancer screening

For as long as he lives, Steve Smersky, 53, will never forget what his gastroenterologist, Robert J. Pagano, M.D. told him following his colonoscopy. “In his exact words — and they’ll probably ring in my head forever — was that if we waited one more year, we’d be having a different conversation,” says Steve, a salesman with Smart Office Services in Bridgeville, a local independent office products dealer. “I would have had a different outcome if I had delayed the colonoscopy any longer.”



Eileen Smersky, R.N. convinced her husband Steve to have the test that would save his life.

While polyps were discovered during Steve’s colonoscopy, Dr. Pagano was able to snip and remove them — one had cancer. It was patients like Steve who were the impetus for the St. Clair Hospital physician to create an online video at www.stclair.org to urge men and women to undergo colonoscopies to detect colon cancer at its earliest, most treatable stages.

“I see a tremendous need for people to be educated and to learn about the risks of colon cancer,” says Dr. Pagano of Upper St. Clair. “It’s so prevalent in this country and it’s so sad to see some people come in a few years after they should have had a screening. Sometimes, you think to yourself, if they had come in earlier, this would have been a benign little polyp that I could have taken out, and they wouldn’t have had colon cancer.”

With this video, Dr. Pagano says that he just wanted to make people aware that this is a very prevalent disease in our country and a colonoscopy could detect precancerous growths before they become colon cancer.

“When patients have a good experience with their colonoscopy, I want them to go out and recruit other people to have this done,” he says. “When you have a bad experience, you will tell a thousand people. When you have a good experience, you’re not going to tell anybody. I wanted to change that.”

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COLONOSCOPY PATIENT
STEVE SMERSKY

during the colonoscopy procedure, which Dr. Pagano did for me. Hopefully, through this video, I can help convince someone else to get a colonoscopy.”

Steve’s wife, Eileen, is an endoscopy nurse at St. Clair Hospital who works with Dr. Pagano and understands why many people are hesitant to undergo the procedure.

“Some are afraid that it’s going to hurt and many people just don’t want to go through the preparation,” she says.

The night-before preparation for having a colonoscopy is very important, stresses Dr. Pagano. Typically, patients will have to consume an electrolyte-balanced solution to cleanse their bowels. According to Dr. Pagano, several studies have shown that a “split prep” — taking half of the prep 4 to 5 hours before the procedure — significantly improves the quality of the exam.

“What is most important to understand is that without a good prep, polyps can easily be missed, including the subtle flat polyps which have a high risk for rapid conversion to cancer; the colonoscopy will take longer; and you will need to return sooner for a repeat exam to make sure nothing was missed,” he says.

Besides the prep, Eileen notes that some patients are also afraid of their diagnosis, but the biggest reason people avoid it, from what she has experienced, “is that it’s an embarrassing procedure in their eyes. They’ll avoid it because of that.”

Eileen says that when she works with patients, she explains the entire procedure and reassures them that they’ll be asleep and that the doctor and his or her staff are only looking at their colons.

“We also always tell patients that it’s better to get this done when you’re not having any problems,” she says. “Colonoscopies are for prevention. We encourage people to get it done as a screen.”

Steve had some of those hesitations that Eileen mentioned, but she was finally able to convince him.

“He didn’t want to go at all and felt apprehensive,” she recalls. “I told him there was nothing wrong with him and that he was healthy. We went there not expecting anything to be wrong, so I was completely shocked when they found some growth. It was supposed to be a routine screening. So Steve’s the hallmark of why you do a colonoscopy. Had he waited another year, it would have gone into the wall of his colon.”

The video, entitled “In Their Own Words,” contains patient testimonials, including Steve’s.

“I agreed to do the video because, first, Dr. Pagano asked me if I’d be willing to do it,” says Steve. “Secondly, he basically saved my life. If I can give him an hour of my time, I certainly would. I’m a prime example of why you should get a colonoscopy. If caught early, the beginnings of colon cancer can be removed

Early detection aids cure

During his colonoscopy, a tumor the size of a lemon was discovered in the colon of attorney Michael Weiss, 63. The Mt. Lebanon resident waited until he was 57 to have his first colonoscopy.

“My family was after me for some time to get the procedure done and then I was starting to experience some symptoms of colon cancer,” says Michael. “Sure enough, Dr. Pagano found the tumor, and I needed surgery within two weeks of that colonoscopy and then chemotherapy for the next eight months.”

Although Michael is now a patient advocate, he also had some apprehensions about going through a colonoscopy, which is one of the reasons why he waited.

“I would tell others who felt the same way that I did that it’s not nearly as difficult as you might anticipate,” he says. “On top of that, you don’t want to go through what I went through because I waited. It was a difficult period in my life.”

Dolores Groesch also waited to get her colonoscopy. In fact, the Brentwood resident was 71 years old. Like Steve, Dr. Pagano did find cancer in a polyp that fortunately could be completely removed during the colonoscopy.

“Every year, my doctor would give me a prescription to get a colonoscopy and finally I decided to go,” says Dolores. “Luckily, I didn’t wait any longer. It’s important to get this done because it could save your life. If polyps are cancerous they can take care of it immediately.”

Michael and Dolores also appear in the video to urge others to undergo a colonoscopy.

“It’s an important message to get out there,” says Michael, who also has Type 1 diabetes and is an advocate for the American Diabetes Association. “Get screened early and don’t wait.”

Dolores adds, “It can save lives. My son just turned 50 and I’m on his case to get it done. I have friends who I am also trying to convince. You can’t go back and wish you had gotten it done. So get it done now.”

All of the patients in the video also have high praise for Dr. Pagano. Eileen, the endoscopy nurse at St. Clair, had the unique perspective of working with him and also being the wife of one of his patients.

“He’s an excellent doctor,” she says. “He is very conscientious and stays up to date on all of the different techniques and screenings. He knew everything about how he was going to take care of Steve. He also keeps you abreast of the latest recommendations.”

Michael can certainly attest to that.

“Dr. Pagano was sensitive and patient-centered,” he says. “He remains focused on the patient, which to me is the distinguishing factor between a good doctor and a great doctor.”

GUIDELINES FOR COLONOSCOPY SCREENING

INITIAL SCREENING:

- Age 50 with no family history
- Age 45 if African-American
- Age 40 or sooner if family history

FOLLOW UP:

- Every 10 years if initial screening is clear

When to get screened

A new study published in the *Journal of the American Medical Association (JAMA)* says that men carry a higher risk of colon cancer than women and should get their first colonoscopy to screen for the disease at age 45, five years earlier than the current recommendation.

“The recent JAMA article and several prior studies show that the risk of colon cancer occurs earlier in males,” says Dr. Pagano. “But current screening guidelines do not differentiate by gender. We may see the recommendations for colonoscopy adjusted in this direction in the future. Remember, similar observations led to the recommendation that African-Americans start screening with colonoscopy at age 45, not 50.”

Average Americans who don’t have any symptoms or risk factors should start getting screened by the age of 50, notes Dr. Pagano. The lifetime risk of getting colon cancer for average Americans is about 1 in 20, or 5 percent. Once you start adding risk factors such as family history, colitis, that risk goes up.

“Risk for colon cancer is generated from your genes and what you inherit from your ancestors,” he says. “If it’s in the family, especially a first-degree relative who may have had colon cancer at a young age, then you should have a screening at an age 10 years earlier than the age that relative was diagnosed.”

There are many environmental risk factors associated with colon cancer. Smoking can increase the risk of getting colon cancer by up to 20 percent. Obesity, lack of exercise, consumption of red meat and alcohol may all increase risk while consumption of fresh fruits and vegetables, multivitamins, calcium, aspirin, and similar medications can decrease risk.

“Living a healthy lifestyle improves many of your health risks,” adds Dr. Pagano. “Colon cancer screening supplements healthy lifestyles to keep you in good health.”

While Dr. Pagano understands that some people might be nervous or afraid about a colonoscopy, he says that patients need to be much more concerned about keeping cancer from growing in their colon than any hesitations they might have for coming in for this procedure.

“This is the best preventative test for cancer that there is and it has been proven in the medical literature that it can lower the rate of death from colon cancer and the incidence of colon cancer,” he says.

“It works.” ■



Michael Weiss, right, is now a patient advocate for screening after surviving colon cancer.