

## Colorectal Cancer & Proper Nutrition

*What's the Link?*



## Colorectal Cancer: Preventable! Treatable! Beatable!

Jeanna Jones, Iowa Get Screened: Colorectal Cancer Program

Iowa Department Of Public Health



### Objectives:

- What is colorectal cancer (CRC)
- Iowa CRC data
- Who is at risk and risk factors
- Who should get screened
- Benefits of screening
- Screening tests and time frames
- Signs and symptoms
- Resources



### What is colorectal cancer?

Colorectal cancer is cancer of the colon or the rectum. It develops from a pre-cancerous polyp or grape-like growth that can appear on the lining of the colon and rectum-that may become cancerous over time.



A tiny growth or "polyp" in the wall of the colon or rectum



## Colorectal Cancer

The third most common cancer in the U.S. and Iowa and the second deadliest in Iowa

It is estimated that this year...

1640 Iowans will be diagnosed with CRC  
590 Iowans will lose their lives from CRC

If Iowans ages 50 or older had regular screenings, 60% of deaths could be prevented

Statistics from the Iowa Cancer Registry



## Who is at risk?

- People who smoke
- People who are an unhealthy weight, especially those who carry fat around their waists
- People who are not active and don't exercise
- People who drink a lot of alcohol, especially men
- People who eat a lot of red meat (such as beef or lamb) or processed meat (such as bacon, sausage, hot dogs or cold cuts)
- People with a personal or family history of colorectal cancer or benign (not cancerous) colorectal polyps
- People with a personal history of inflammatory bowel disease (such as ulcerative colitis or Crohn's disease)
- People with a family history of inherited colorectal cancer or inherited colorectal syndromes



## CRC Risk Factors

### Age

- 90% of cases occur in people 50 and older

### Gender

- Common in both men and women, but slightly higher in men

New CRC Cancer in Women: 780 (9%) Iowans  
New CRC Cancer in Males: 860 (10%) Iowans

### Race/Ethnicity

- Increased risk in African Americans, Native Americans and Alaska Natives



## Modifiable Risk Factors

- **Diet**- Eat a low fat, high fiber diet, with plenty of fruits and vegetables. Limit red meat and processed meats
- **Weight**-Maintain a health weight
- **Physical Activity**-Move your body for at least 30 minutes, three days a week
- **Tobacco**-Discontinue if possible
- **Alcohol**-Consume in moderation



## Who should get screened?

- Men and women should begin screening at age 50 or older
- Begin screening earlier than age 50 if you have a personal or family history of pre-cancerous polyps or colorectal cancer or if you have signs or symptoms of colorectal cancer, Ulcerative Colitis, Crohn's Disease, Inflammatory Bowel Disease; or have any changes in your stool habits
- The U.S. Preventive Services Task Force recommends men and women aged 50-75 receive regular CRC screenings.



## Benefits of Screening

### Cancer Prevention

- Removal of pre-cancerous polyps prevent cancer**  
About 650 Iowans die each year as a result of colorectal cancer, yet this disease can often be prevented if precancerous polyps are found and removed through screening.

### Improved survival

- Early detection markedly improves chances of long term survival. 90% treatable if detected early.

**\*\*6 out of 10 deaths could be prevented if adults 50 years and older were tested regularly**



## Screening Tests

- Colonoscopy**- A long, thin, flexible lighted tube is inserted into the rectum and examines the entire bowel or large intestine. Bowel prep is required to view the lining of the colon and rectum. During this test, doctors can find and remove most polyps and some cancers.

Recommended every 10 years

- Flexible sigmoidoscopy**- Examines the last two feet of the colon. Requires some form of prep. Usually no sedation is needed. If polyps are found, a colonoscopy would be performed.

Recommended every 5 years



- Stool tests** Individuals collect a stool sample at home. Some stool tests require 1-3 samples. Make sure the stool test is a highly sensitive test.

- A **guaiac-based fecal occult blood test (gFOBT)** looks for blood in the stool that isn't seen by the naked eye. Individuals may need to adjust their medications and modify their diet while completing this test.
- A **fecal immunochemical test (FIT or iFOBT)** looks for cells that are shed by tumors within the colon. These are often processed in a lab.

No dietary restrictions or diet changes necessary  
Recommended yearly



- Double Contrast Barium Enema (DCBE)**-

An enema is given with a liquid called barium, followed by an air enema. The barium and air create an outline around the colon which allows the doctors to view the colon on a x-ray.

- Virtual colonoscopy**- A diagnostic option for patients with sedation risks, bleeding problems or an incomplete colonoscopy. A CT scan is done to view the colon. An additional procedure, such as colonoscopy, is required if polyps or tumors are found. The virtual colonoscopy requires a bowel prep.

\*The USPSTF does not recommend DCBE and Virtual Colonoscopies




## Iowa's CRC Screening Rates

Current CRC Screening Rates in Iowa using flexible sigmoidoscopy or colonoscopy-69%


National goal for CRC screening rates-80% by the year 2018

\*Check your health care coverage about getting yourself and your loved ones screened.  
Schedule your appointment TODAY!



**We have a way to go... but we can get there!**


2013 Behavioral Risk Factor Survey



## Signs and Symptoms

May include:


- Bleeding from the rectum or blood in or on the stool
- Change in bowel habits
- Stools that are narrower than usual
- Bloating, fullness or cramps
- Diarrhea, constipation or a feeling in the rectum that a bowel movement is incomplete





- Weight loss for no reason
- Being tired all the time
- Vomiting

However.....

**7 out of 10 people diagnosed with colorectal cancer had no signs or symptoms!**



Check out the [noexcusesiowa.com](http://noexcusesiowa.com) site for more information


March 24, 2014

## Nutrition and Digestive Health

Carol Voss, MEd, RD

Lifestyle changes, along with early detection, can prevent nearly half of all cancer deaths.

- This year, an estimated over half a million Americans will lose their lives to cancer, and more than 1.6 million men and women will be diagnosed with this devastating illness.



### Eating well can help you prevent and beat cancer in a variety of ways

- A healthy diet can lower your risk for developing cancer.
- And if you have been diagnosed, eating well can positively support treatment, and help you live well for years to come after treatment.



### Help Reduce Your Cancer Risk Through Eating Right

- Maintaining a healthy weight
- Eat fewer foods that are high in calories and fat and low in nutrients
- Limit alcohol
- Eat plenty of fruits and vegetables



## Healthy Weight

- Healthy weight is key to reducing your risk of cancer and other diseases.



## Eat Fewer Foods That are High in Calories and Fat and Low in Nutrients

- Foods with added sugars and fats can cause weight gain and leave little room for more healthy, cancer-preventing foods.



## Limit Alcohol

- Evidence suggests all types of alcoholic drinks may increase your risk of a number of cancers, including mouth, throat (pharynx), voice box (larynx), esophageal, liver, breast, colon and rectal.
- If you drink at all, limit alcoholic drinks to no more than one drink daily for women and two for men.



## Eat Plenty of Fruits and Vegetables

- Fill half your plate each meal with a variety of colorful and naturally nutrient-rich fruits and vegetables.



## How Many Fruits and Vegetables Do You Need?

- Almost everyone needs to eat more fruits and vegetables.



- Adults (based on activity of < 30 minutes a day)
  - Fruits: 1 ½ - 2 cups
  - Vegetables: 2 - 3 cups

- CDC Fruit and Vegetable Calculator

<http://www.cdc.gov/nutrition/everyone/fruitsvegetables/howmany.html>



## What Counts as a Cup?

Ever wondered what counted as ½ a cup of grapes or carrots without counting?

1 cup celery?



Visit:

<http://www.cdc.gov/nutrition/everyone/fruitvegetables/cup.html>



## Prebiotics and Probiotics: The Dynamic Duo

- Research continues in this area of nutrition — investigating how effective and safe these substances are and how much we need to obtain health benefits — the following slides present what we know now.



## What Are Prebiotics and What Do They Do?

- Prebiotics are natural, non-digestible food ingredients that are linked to promoting the growth of helpful bacteria in your gut.
- Food Sources: bananas, onions, garlic, leeks, asparagus, artichokes, soybeans and whole-wheat foods





## What Are Probiotics and What Do They Do?

- Probiotics are actually the "good" bacteria — or live cultures — just like those naturally found in your gut.
- Food Sources:**
  - Enjoy fermented dairy foods like yogurt, kefir products, and aged cheeses, which contain live cultures, such as bifidobacteria and lactobacilli.
  - Plus, some non-dairy foods which also have beneficial cultures, including kimchi, sauerkraut, miso, tempeh and soy beverages.



## What Are Functional Foods?

The Academy of Nutrition and Dietetics defines a functional food as:

a food that provides additional health benefits that may reduce disease risk and/or promote good health.



## Functional foods include:

- Conventional foods** such as grains, fruits, vegetables and nuts.
- Modified foods** such as yogurt, cereals and orange juice.
- Medical foods** such as special formulations of foods and beverages for certain health conditions.
- Foods for special dietary use** such as infant formula and hypoallergenic foods.



## Five Functional Foods:

- Cold-Water Fish — Sardines and Salmon**
- Nuts**
- Whole Grains — Barley**
- Beans**
- Berries**







### Current State Employee CRC Stats

- When we look at eligible members (eligible is defined as adults aged 50 to 75 years), only 18% of employees and 17% of spouses are seeking preventive services appropriately.
- In the past two years, there have been, on average, 190 unique individuals that have been treated for a diagnosis of colon cancer.\*
- Average annual spend – cost to the State for claims paid - of the last two years was \$1.6M.\*

\*Second & third bullets are whole population.

HEALTHY opportunities  
YOUR HEALTH. YOUR FUTURE.

### Current State Employee Nutrition Stats

- Nutrition is the 2<sup>nd</sup> highest lifestyle behavior risk among those participating in the Healthy Opportunities Wellness Program
  - 56.7% of Executive Branch Non-Contract employees do not meet the recommended # of daily servings for more than 2 of 5 nutrition guidelines (*self-reported in health assessment*)
  - 57.2% of SPOC employees do not meet the recommended # of daily servings for more than 2 of 5 nutrition guidelines (*self-reported in health assessment*)

HEALTHY opportunities  
YOUR HEALTH. YOUR FUTURE.

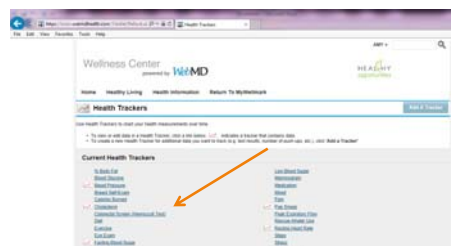
## Preventive Screening Benefits

Plan	With Wellness	Without Wellness
Blue Advantage	Covered at 100% per ACA guidelines	\$10 Copay
Blue Access	Covered at 100% per ACA guidelines	\$10 Copay
Iowa Select	Covered at 100% per ACA guidelines*	\$15 copay for the office visit + 10% coinsurance for a test in the office
Program 3 Plus	Covered at 100% per ACA guidelines	\$15 copay for the office visit + 20% coinsurance for a test in the office
Deductive 3 Plus	Covered at 100% per ACA guidelines	20% coinsurance after meeting the deductible of \$300 (single) or \$400 (family)

\*Preventive care from participating providers with Wellmark is not subject to the deductible.

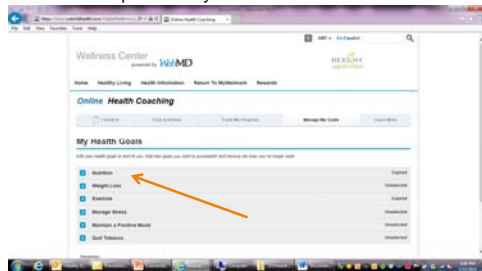
## Next Steps

- Get Screened!
  - Wellness-Eligible Employees – enter your screening information in the online Health Trackers in the Wellness Center powered by WebMD



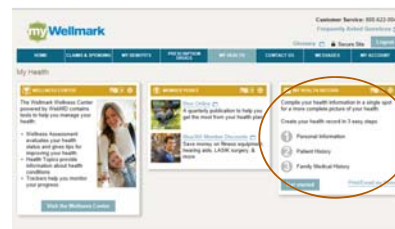
## Next Steps

- Planning to make some nutrition improvements?
  - Wellness-Eligible Employees – Online Health Coaching through the Wellness Center powered by WebMD



## Next Steps – Not Wellness-Eligible?

- Get Screened!
  - Employees not participating in the Healthy Opportunities Wellness Program can use the Online Health Record available at [www.wellmark.com](http://www.wellmark.com) (must first be registered at myWellmark)



## Next Steps – *Not Wellness-Eligible?*

- Track Nutrition using the USDA's Super Tracker - <https://www.supertracker.usda.gov/default.aspx>



## Questions...

Jeanna Jones, Public Education/Social Marketing Coordinator  
Iowa Get Screened  
515-242-6516

[Jeanna.jones@idph.iowa.gov](mailto:Jeanna.jones@idph.iowa.gov)

Carol Voss, Nutrition Coordinator  
Bureau of Nutrition & Health Promotion  
515-242-5566

[Carol.voss@idph.iowa.gov](mailto:Carol.voss@idph.iowa.gov)

Amy Liechti, Wellness Specialist  
Department of Administrative Services  
515.725.1232

[Amy.liechti@iowa.gov](mailto:Amy.liechti@iowa.gov)



Thank you!

