WEBVTT

00:00:00.000 --> 00:00:02.730 Funding for Yale Cancer Answers

NOTE Confidence: 0.846712297857143

 $00{:}00{:}02.730 \dashrightarrow 00{:}00{:}05.460$ is provided by Smilow Cancer

NOTE Confidence: 0.846712297857143

 $00:00:05.553 \longrightarrow 00:00:07.917$ Hospital and AstraZeneca.

NOTE Confidence: 0.846712297857143

 $00:00:07.920 \longrightarrow 00:00:09.184$ Welcome to Yale Cancer

NOTE Confidence: 0.846712297857143

 $00:00:09.184 \longrightarrow 00:00:10.448$ Answers with your host

NOTE Confidence: 0.846712297857143

 $00:00:10.450 \longrightarrow 00:00:13.071$ Doctor Anees Chappar.

NOTE Confidence: 0.846712297857143

00:00:13.071 --> 00:00:14.475 Yale Cancer Answers features the latest

NOTE Confidence: 0.846712297857143

00:00:14.475 --> 00:00:16.230 information on cancer care by

NOTE Confidence: 0.846712297857143

 $00{:}00{:}16.293 \dashrightarrow 00{:}00{:}17.721$ welcoming on cologists and specialists

NOTE Confidence: 0.846712297857143

00:00:17.721 --> 00:00:20.206 who are on the forefront of the

NOTE Confidence: 0.846712297857143

 $00:00:20.206 \longrightarrow 00:00:22.052$ battle to fight cancer.

NOTE Confidence: 0.846712297857143

 $00:00:22.052 \longrightarrow 00:00:24.158$ This week, it's a conversation about colorectal

cancer

NOTE Confidence: 0.846712297857143

 $00:00:24.160 \longrightarrow 00:00:26.310$ with Doctor Ira Leeds.

NOTE Confidence: 0.846712297857143

 $00:00:26.310 \longrightarrow 00:00:27.948$ Dr. Leeds is an assistant professor of

NOTE Confidence: 0.846712297857143

 $00:00:27.948 \longrightarrow 00:00:30.060$ surgery at the Yale School of Medicine,

 $00{:}00{:}30.060 \dashrightarrow 00{:}00{:}32.070$ where Doctor Chapgar is a

NOTE Confidence: 0.846712297857143

 $00{:}00{:}32.070 \dashrightarrow 00{:}00{:}33.410$ professor of surgical oncology.

NOTE Confidence: 0.829765659166667

 $00:00:34.450 \longrightarrow 00:00:36.102$ Ira, maybe we can start

NOTE Confidence: 0.829765659166667

 $00:00:36.102 \longrightarrow 00:00:37.669$ off by laying the groundwork.

NOTE Confidence: 0.829765659166667

 $00:00:37.670 \longrightarrow 00:00:39.580$ Tell us a little bit

NOTE Confidence: 0.829765659166667

 $00:00:39.580 \longrightarrow 00:00:40.726$ about colorectal cancer.

NOTE Confidence: 0.829765659166667

 $00:00:40.730 \longrightarrow 00:00:42.338$ How common is it?

NOTE Confidence: 0.829765659166667

 $00:00:42.338 \longrightarrow 00:00:43.946$ How lethal is it?

NOTE Confidence: 0.829765659166667

00:00:43.950 --> 00:00:45.520 How many people get it?

NOTE Confidence: 0.882577536

 $00:00:45.910 \longrightarrow 00:00:47.070$ I'd be happy to.

NOTE Confidence: 0.882577536

00:00:47.070 --> 00:00:49.331 Colorectal cancer is one of the most

NOTE Confidence: 0.882577536

 $00{:}00{:}49.331 \dashrightarrow 00{:}00{:}51.310$ common cancers worldwide.

NOTE Confidence: 0.882577536

 $00{:}00{:}51.310 \dashrightarrow 00{:}00{:}53.758$ It's the third most common cancer and

 $00:00:57.549 \longrightarrow 00:00:58.618$ concerningly,

NOTE Confidence: 0.882577536

 $00{:}00{:}58.618 \longrightarrow 00{:}01{:}00.886$ it's also the second most lethal cancer

NOTE Confidence: 0.882577536

 $00{:}01{:}00.886 \dashrightarrow 00{:}01{:}02.920$ by number of total cancer deaths.

 $00:01:02.920 \longrightarrow 00:01:04.045$ The good news

NOTE Confidence: 0.882577536

 $00:01:04.045 \longrightarrow 00:01:06.340$ on the colon cancer side of

NOTE Confidence: 0.882577536

 $00:01:06.340 \longrightarrow 00:01:08.290$ things is that early detection

NOTE Confidence: 0.882577536

 $00:01:08.290 \longrightarrow 00:01:11.820$ has survival rates of over 90% whereas

NOTE Confidence: 0.882577536

 $00:01:11.820 \longrightarrow 00:01:15.370$ late detection has rates of 15%,

NOTE Confidence: 0.882577536

 $00:01:15.370 \longrightarrow 00:01:17.370$ so it really gives us

NOTE Confidence: 0.882577536

 $00:01:17.370 \longrightarrow 00:01:19.160$ an important urgency in the

NOTE Confidence: 0.882577536

00:01:19.160 --> 00:01:20.950 cancer care community to identify

NOTE Confidence: 0.882577536

 $00:01:21.013 \longrightarrow 00:01:23.098$ individuals with

NOTE Confidence: 0.882577536

 $00:01:23.098 \longrightarrow 00:01:25.183$ precancerous lesions early because the

NOTE Confidence: 0.882577536

 $00:01:25.243 \longrightarrow 00:01:27.299$ survival difference is significant.

NOTE Confidence: 0.882577536

00:01:27.300 --> 00:01:29.235 To put it in kind of very real terms,

 $00{:}01{:}33.808 \dashrightarrow 00{:}01{:}35.953$ 1 in 20 individuals in their lifetimes

NOTE Confidence: 0.882577536

 $00{:}01{:}35.953 \dashrightarrow 00{:}01{:}37.760$ will have colorectal cancer,

NOTE Confidence: 0.882577536

 $00:01:37.760 \longrightarrow 00:01:40.147$ and so it's something where all of

NOTE Confidence: 0.882577536

 $00{:}01{:}40.147 \dashrightarrow 00{:}01{:}42.467$ us probably know someone or will

00:01:42.467 --> 00:01:44.915 know someone or been affected.

00:01:51.630 --> 00:01:55.560 And speaking of early detection,

NOTE Confidence: 0.84202631

 $00:01:55.560 \longrightarrow 00:01:57.416$ tell us a little bit more

NOTE Confidence: 0.84202631

00:01:57.416 --> 00:01:59.218 about the screening guidelines.

NOTE Confidence: 0.84202631

 $00:01:59.220 \longrightarrow 00:02:01.390$ I understand that those have

NOTE Confidence: 0.84202631

 $00{:}02{:}01.390 \dashrightarrow 00{:}02{:}03.560$ changed recently so that younger

NOTE Confidence: 0.84202631

 $00:02:03.636 \longrightarrow 00:02:06.046$ people now are being recommended

NOTE Confidence: 0.84202631

 $00:02:06.046 \longrightarrow 00:02:07.974$ to get colorectal screening.

NOTE Confidence: 0.84202631

 $00:02:07.980 \longrightarrow 00:02:09.910$ Is that right?

NOTE Confidence: 0.872606231818182

 $00:02:09.920 \longrightarrow 00:02:10.824$ That's absolutely correct.

NOTE Confidence: 0.872606231818182

 $00{:}02{:}10.824 \dashrightarrow 00{:}02{:}12.632$ The screening guidelines continue

NOTE Confidence: 0.872606231818182

 $00:02:12.632 \longrightarrow 00:02:15.462$ to evolve and have for many years.

NOTE Confidence: 0.872606231818182

00:02:15.462 --> 00:02:17.674 The age of 50 was the magical

NOTE Confidence: 0.872606231818182

 $00:02:17.674 \longrightarrow 00:02:19.590$ number where everyone should be

NOTE Confidence: 0.872606231818182

 $00:02:19.590 \longrightarrow 00:02:21.882$ lining up to get colonoscopies or

NOTE Confidence: 0.872606231818182

 $00{:}02{:}21.954 \dashrightarrow 00{:}02{:}24.194$ alternatives to colonoscopies for

 $00:02:24.194 \longrightarrow 00:02:26.434$ their colorectal cancer screening.

NOTE Confidence: 0.872606231818182

00:02:26.440 --> 00:02:28.990 Many, if not almost all

NOTE Confidence: 0.872606231818182

 $00{:}02{:}28.990 \dashrightarrow 00{:}02{:}31.026$ societies that provide guidelines

NOTE Confidence: 0.872606231818182

 $00:02:31.026 \longrightarrow 00:02:34.748$ on this topic have moved to 45 as

NOTE Confidence: 0.872606231818182

 $00:02:34.750 \longrightarrow 00:02:36.864$ the new age when people should start

NOTE Confidence: 0.872606231818182

 $00:02:36.864 \longrightarrow 00:02:38.170$ screening for colorectal cancer,

NOTE Confidence: 0.872606231818182

 $00:02:38.170 \longrightarrow 00:02:39.840$ that's for average risk individuals.

NOTE Confidence: 0.872606231818182

 $00:02:39.840 \longrightarrow 00:02:41.136$ So there's a number of individuals,

NOTE Confidence: 0.872606231818182

 $00:02:41.140 \longrightarrow 00:02:43.642$ both with more rare diseases that

NOTE Confidence: 0.872606231818182

 $00:02:43.642 \longrightarrow 00:02:45.800$ predispose themselves to colorectal cancer,

NOTE Confidence: 0.872606231818182

00:02:45.800 --> 00:02:48.440 but also a particularly high risk

NOTE Confidence: 0.872606231818182

00:02:48.440 --> 00:02:50.424 sociodemographic groups, for example,

NOTE Confidence: 0.872606231818182

00:02:50.424 --> 00:02:52.866 African Americans who have earlier

NOTE Confidence: 0.872606231818182

 $00{:}02{:}52.866 \dashrightarrow 00{:}02{:}54.794$ screening guidelines as well.

NOTE Confidence: 0.872606231818182 00:02:54.800 --> 00:02:55.130 Interestingly,

 $00:02:55.130 \longrightarrow 00:02:56.450$ one of the other

NOTE Confidence: 0.872606231818182

 $00:02:56.450 \longrightarrow 00:02:58.600$ parts of the guidelines that's

NOTE Confidence: 0.872606231818182

 $00:02:58.600 \longrightarrow 00:03:00.008$ always a discussion point

NOTE Confidence: 0.872606231818182

 $00:03:00.008 \longrightarrow 00:03:02.120$ when guidelines come up is

NOTE Confidence: 0.872606231818182

 $00:03:02.186 \longrightarrow 00:03:03.278$ how do you screen?

NOTE Confidence: 0.872606231818182

 $00:03:03.280 \longrightarrow 00:03:04.984$ Colonoscopy has been the

NOTE Confidence: 0.872606231818182

 $00:03:04.984 \longrightarrow 00:03:06.688$ gold standard for decades.

NOTE Confidence: 0.872606231818182

 $00:03:06.690 \longrightarrow 00:03:08.340$ Colonoscopies require you to typically

NOTE Confidence: 0.872606231818182

 $00:03:08.340 \longrightarrow 00:03:10.570$ get a little bit of sedation,

NOTE Confidence: 0.872606231818182

 $00:03:10.570 \longrightarrow 00:03:12.194$ and it's a procedure where you have

NOTE Confidence: 0.872606231818182

 $00:03:12.194 \longrightarrow 00:03:14.390$ to take a bowel prep the night before,

NOTE Confidence: 0.872606231818182

 $00:03:14.390 \longrightarrow 00:03:16.694$ so it's certainly a bit of a burden

NOTE Confidence: 0.872606231818182

 $00:03:16.694 \longrightarrow 00:03:18.987$ on the average person to do so.

NOTE Confidence: 0.872606231818182

 $00:03:18.990 \longrightarrow 00:03:21.400$ There are alternatives to colonoscopies.

NOTE Confidence: 0.872606231818182

 $00:03:21.400 \longrightarrow 00:03:23.224$ There are a number of reasons

NOTE Confidence: 0.872606231818182

 $00{:}03{:}23.224 \dashrightarrow 00{:}03{:}24.899$ why a colonoscopy is arguably

 $00:03:24.899 \longrightarrow 00:03:26.459$ better for people that

NOTE Confidence: 0.872606231818182

 $00:03:26.460 \longrightarrow 00:03:27.804$ are able to adhere to the schedule,

NOTE Confidence: 0.872606231818182

 $00:03:27.810 \longrightarrow 00:03:29.472$ but the guidelines do really try

NOTE Confidence: 0.872606231818182

 $00:03:29.472 \longrightarrow 00:03:31.262$ to balance the burden of screening

NOTE Confidence: 0.872606231818182

 $00:03:31.262 \longrightarrow 00:03:33.146$ along with the benefits of screening.

NOTE Confidence: 0.877976135

 $00:03:34.150 \longrightarrow 00:03:35.886$ Let's talk a little bit

NOTE Confidence: 0.877976135

 $00:03:35.886 \longrightarrow 00:03:38.117$ about a few things that you

NOTE Confidence: 0.877976135

 $00:03:38.117 \longrightarrow 00:03:39.537$ touched on.

NOTE Confidence: 0.877976135

 $00:03:39.540 \longrightarrow 00:03:42.969$ So the first point is that screening is now

NOTE Confidence: 0.877976135

 $00{:}03{:}42.969 \dashrightarrow 00{:}03{:}46.000$ being recommended at 45 rather than 50.

NOTE Confidence: 0.877976135

 $00{:}03{:}46.000 \dashrightarrow 00{:}03{:}48.395$ Is that because the demographics

NOTE Confidence: 0.877976135

 $00:03:48.395 \longrightarrow 00:03:50.790$ of colon cancer are trending

NOTE Confidence: 0.877976135

 $00:03:50.870 \longrightarrow 00:03:53.069$ towards younger populations?

NOTE Confidence: 0.877976135

 $00{:}03{:}56.910 \dashrightarrow 00{:}03{:}59.076$ And who gets colon cancer in terms

NOTE Confidence: 0.877976135

 $00:03:59.076 \longrightarrow 00:04:00.520$ of the age demographic?

 $00:04:02.120 \longrightarrow 00:04:05.928$ So the trends in colorectal cancer are,

NOTE Confidence: 0.696660801428571

 $00:04:05.930 \longrightarrow 00:04:08.546$ at the very least, interesting, and

NOTE Confidence: 0.696660801428571

 $00:04:08.546 \longrightarrow 00:04:10.700$ potentially concerning in many ways.

NOTE Confidence: 0.696660801428571

 $00:04:10.700 \longrightarrow 00:04:14.498$ New onset of colon

NOTE Confidence: 0.696660801428571

 $00:04:14.498 \longrightarrow 00:04:18.050$ cancer is actually declining nationwide.

NOTE Confidence: 0.696660801428571

 $00:04:18.050 \longrightarrow 00:04:20.018$ The overall rate of colorectal cancer

NOTE Confidence: 0.696660801428571

 $00:04:20.018 \longrightarrow 00:04:22.395$ in the United States is declining and

NOTE Confidence: 0.696660801428571

 $00{:}04{:}22.395 \dashrightarrow 00{:}04{:}24.399$ and also favorably the mortality rate

NOTE Confidence: 0.696660801428571

 $00{:}04{:}24.399 \dashrightarrow 00{:}04{:}26.549$ from colorectal cancer is declining,

NOTE Confidence: 0.696660801428571

 $00:04:26.550 \longrightarrow 00:04:29.285$ and we attribute those overall

NOTE Confidence: 0.696660801428571

 $00:04:29.285 \longrightarrow 00:04:32.468$ trends to fairly good adherence to

NOTE Confidence: 0.696660801428571

 $00:04:32.468 \longrightarrow 00:04:34.556$ colonoscopy and colonoscopy

NOTE Confidence: 0.696660801428571

 $00:04:34.556 \longrightarrow 00:04:36.644$ alternative screening schedules

NOTE Confidence: 0.696660801428571

 $00:04:36.650 \longrightarrow 00:04:38.315$ in older individuals that are

NOTE Confidence: 0.696660801428571

00:04:38.315 --> 00:04:39.647 getting good colonoscopies and

NOTE Confidence: 0.696660801428571

 $00:04:39.647 \longrightarrow 00:04:41.371$ the adherence to that currently is

 $00:04:41.371 \longrightarrow 00:04:43.388$ about 60 to 70% of people that are

NOTE Confidence: 0.696660801428571

 $00{:}04{:}43.388 \to 00{:}04{:}45.316$ supposed to be getting them on time.

NOTE Confidence: 0.696660801428571

 $00:04:45.316 \longrightarrow 00:04:47.524$ The risk of colorectal cancer

NOTE Confidence: 0.696660801428571

 $00:04:47.524 \longrightarrow 00:04:49.503$ occurring in those patients seems

NOTE Confidence: 0.696660801428571

00:04:49.503 --> 00:04:51.837 to be declining and we attribute

NOTE Confidence: 0.696660801428571

 $00:04:51.837 \longrightarrow 00:04:53.969$ that to better screening.

NOTE Confidence: 0.696660801428571

00:04:53.970 --> 00:04:56.426 The concerning part is that in young people,

NOTE Confidence: 0.696660801428571

 $00:04:56.430 \longrightarrow 00:04:58.386$ which is defined as

NOTE Confidence: 0.696660801428571

 $00:04:58.386 \longrightarrow 00:05:00.080$ 20 to 49 years old,

NOTE Confidence: 0.696660801428571

 $00{:}05{:}00.080 \dashrightarrow 00{:}05{:}02.804$ the rate of colorectal cancer is

NOTE Confidence: 0.696660801428571

 $00:05:02.804 \longrightarrow 00:05:04.456$ increasing and that is concerning

NOTE Confidence: 0.696660801428571

 $00:05:04.456 \longrightarrow 00:05:06.250$ not just because that's a patient

NOTE Confidence: 0.696660801428571

 $00{:}05{:}06.310 \dashrightarrow 00{:}05{:}07.940$ population that historically has not

NOTE Confidence: 0.696660801428571

 $00:05:07.940 \longrightarrow 00:05:10.509$ been screened and one of the major reasons

NOTE Confidence: 0.696660801428571

 $00:05:10.509 \longrightarrow 00:05:12.567$ why the guidelines were changed to 45.

00:05:12.570 --> 00:05:15.594 But we also don't know why the rate of

NOTE Confidence: 0.696660801428571

 $00{:}05{:}15.594 \dashrightarrow 00{:}05{:}17.950$ colorectal cancer incidence is occurring

NOTE Confidence: 0.696660801428571

 $00:05:17.950 \longrightarrow 00:05:21.010$ more frequently in that younger population.

NOTE Confidence: 0.696660801428571

 $00:05:21.010 \longrightarrow 00:05:22.570$ So for those of us that

NOTE Confidence: 0.696660801428571

 $00:05:22.570 \longrightarrow 00:05:23.610$ think about this every day,

NOTE Confidence: 0.696660801428571

 $00:05:23.610 \longrightarrow 00:05:25.950$ it's relatively easy to agree that

NOTE Confidence: 0.696660801428571

 $00:05:25.950 \longrightarrow 00:05:27.957$ the screening guidelines

NOTE Confidence: 0.696660801428571

00:05:27.957 --> 00:05:30.177 should be lowered to younger ages

NOTE Confidence: 0.696660801428571

 $00:05:30.177 \longrightarrow 00:05:32.729$ and 45 is where it is now and

NOTE Confidence: 0.696660801428571

 $00:05:32.730 \longrightarrow 00:05:36.058$ in a completely unofficial

NOTE Confidence: 0.696660801428571

 $00{:}05{:}36.060 \dashrightarrow 00{:}05{:}38.818$ role I would not be surprised if

NOTE Confidence: 0.696660801428571

 $00:05:38.818 \longrightarrow 00:05:40.403$ those guidelines potentially got

NOTE Confidence: 0.696660801428571

00:05:40.403 --> 00:05:42.395 even earlier in future years,

NOTE Confidence: 0.696660801428571

 $00:05:42.400 \longrightarrow 00:05:44.488$ but we don't know at all why there

NOTE Confidence: 0.696660801428571

 $00:05:44.488 \longrightarrow 00:05:46.818$ is a higher rate of

NOTE Confidence: 0.696660801428571

00:05:46.818 --> 00:05:48.558 cancer in that population.

 $00:05:50.210 \longrightarrow 00:05:52.506$ The other thing that you mentioned was

NOTE Confidence: 0.913795659666667

 $00:05:52.506 \longrightarrow 00:05:54.333$ that these guidelines are for average

NOTE Confidence: 0.913795659666667

 $00{:}05{:}54.333 \dashrightarrow 00{:}05{:}56.556$ risk people and that there are a number

NOTE Confidence: 0.913795659666667

 $00:05:56.556 \longrightarrow 00:05:58.524$ of things that increase a person's

NOTE Confidence: 0.913795659666667

 $00:05:58.524 \longrightarrow 00:06:00.358$ risk of developing colorectal cancer.

NOTE Confidence: 0.913795659666667

 $00{:}06{:}00.358 \dashrightarrow 00{:}06{:}02.478$ So you mentioned certain demographic

NOTE Confidence: 0.913795659666667

00:06:02.478 --> 00:06:04.910 groups such as African Americans.

NOTE Confidence: 0.913795659666667

 $00{:}06{:}04.910 \dashrightarrow 00{:}06{:}07.745$ I was wondering if you could talk a little

NOTE Confidence: 0.913795659666667

 $00:06:07.745 \longrightarrow 00:06:10.470$ bit more about some of the conditions,

NOTE Confidence: 0.913795659666667

 $00:06:10.470 \longrightarrow 00:06:12.154$ genetic conditions,

NOTE Confidence: 0.913795659666667

 $00:06:12.154 \longrightarrow 00:06:15.183$ other predisposing factors that

NOTE Confidence: 0.913795659666667

 $00:06:15.183 \longrightarrow 00:06:17.698$ increase a persons risk and whether

NOTE Confidence: 0.913795659666667

 $00{:}06{:}17.698 \dashrightarrow 00{:}06{:}20.530$ those people should be screened

NOTE Confidence: 0.913795659666667

 $00:06:20.530 \longrightarrow 00:06:23.477$ earlier than the 45 year old guideline?

NOTE Confidence: 0.916850138571429

 $00:06:24.710 \longrightarrow 00:06:26.306$ When we think about a risk factor,

 $00{:}06{:}26.310 \dashrightarrow 00{:}06{:}28.166$ as I always try to break them down

NOTE Confidence: 0.916850138571429

 $00{:}06{:}28.166 \dashrightarrow 00{:}06{:}30.089$ into what I call non modifiable

NOTE Confidence: 0.916850138571429

 $00:06:30.089 \longrightarrow 00:06:31.489$ versus modifiable risk factors.

NOTE Confidence: 0.916850138571429

 $00:06:31.490 \longrightarrow 00:06:33.578$ So non modifiable risk factors or

NOTE Confidence: 0.916850138571429

 $00:06:33.578 \longrightarrow 00:06:35.859$ the risk factors that an individual

NOTE Confidence: 0.916850138571429

 $00:06:35.860 \longrightarrow 00:06:37.522$ has an increased risk based on

NOTE Confidence: 0.916850138571429

 $00:06:37.522 \longrightarrow 00:06:39.250$ compared to the average population.

NOTE Confidence: 0.916850138571429

 $00:06:39.250 \longrightarrow 00:06:41.230$ But at the same time there isn't a lot

NOTE Confidence: 0.916850138571429

 $00:06:41.230 \longrightarrow 00:06:43.219$ that could be done about that other

NOTE Confidence: 0.916850138571429

 $00:06:43.219 \longrightarrow 00:06:44.717$ than changing a screening schedule

NOTE Confidence: 0.916850138571429

 $00{:}06{:}44.717 \dashrightarrow 00{:}06{:}46.789$ to suit that increased risk which is

NOTE Confidence: 0.916850138571429

 $00:06:46.789 \longrightarrow 00:06:48.450$ modifiable or things that we really

NOTE Confidence: 0.916850138571429

 $00:06:48.450 \longrightarrow 00:06:50.704$ spend a lot of time talking to patients

NOTE Confidence: 0.916850138571429

 $00:06:50.704 \longrightarrow 00:06:52.522$ about because those are risk factors

NOTE Confidence: 0.916850138571429

00:06:52.522 --> 00:06:54.809 that if certain behaviors are changed,

NOTE Confidence: 0.916850138571429

 $00{:}06{:}54.810 \dashrightarrow 00{:}06{:}57.880$ may actually reduce their risk.

 $00{:}06{:}57.880 \dashrightarrow 00{:}06{:}59.565$ Increasing age is probably the

NOTE Confidence: 0.916850138571429

 $00:06:59.565 \longrightarrow 00:07:01.250$ one that's most frequently cited

NOTE Confidence: 0.916850138571429

 $00:07:01.310 \longrightarrow 00:07:02.650$ as a nominal risk factor.

 $00:07:03.415 \longrightarrow 00:07:05.200$ We cannot get younger overtime and we

NOTE Confidence: 0.916850138571429

 $00:07:05.256 \longrightarrow 00:07:07.208$ need to recognize that as we get older,

NOTE Confidence: 0.916850138571429

 $00{:}07{:}07.210 \dashrightarrow 00{:}07{:}08.585$ we do have an increased

NOTE Confidence: 0.916850138571429

 $00:07:08.585 \longrightarrow 00:07:09.685$ risk of colorectal cancer,

NOTE Confidence: 0.916850138571429

 $00:07:09.690 \longrightarrow 00:07:12.300$ which is why screening continues after

NOTE Confidence: 0.916850138571429

00:07:12.300 --> 00:07:14.831 that first episode of colonoscopy at

NOTE Confidence: 0.916850138571429

 $00:07:14.831 \longrightarrow 00:07:17.671$ the original age of 50 and now 45.

NOTE Confidence: 0.916850138571429

 $00{:}07{:}17.680 \dashrightarrow 00{:}07{:}19.945$ Family history and personal history

NOTE Confidence: 0.916850138571429

 $00:07:19.945 \longrightarrow 00:07:21.757$ are both incredibly important.

 $00:07:22.891 \longrightarrow 00:07:25.153$ Almost all the screening guidelines have

NOTE Confidence: 0.916850138571429

 $00{:}07{:}25.153 \dashrightarrow 00{:}07{:}27.534$ a carve out for patients who have

NOTE Confidence: 0.916850138571429

00:07:27.534 --> 00:07:29.749 early onset colon cancer in a family

NOTE Confidence: 0.916850138571429

 $00:07:29.749 \longrightarrow 00:07:31.453$ member and most of the guidelines

00:07:31.453 --> 00:07:33.930 say that an individual should start

NOTE Confidence: 0.916850138571429

 $00{:}07{:}33.930 \dashrightarrow 00{:}07{:}36.530$ their own personal screening 10 years

NOTE Confidence: 0.916850138571429

 $00:07:36.530 \longrightarrow 00:07:39.250$ before the age of onset

NOTE Confidence: 0.916850138571429

 $00:07:39.250 \longrightarrow 00:07:42.096$ in a first degree relative.

NOTE Confidence: 0.916850138571429

 $00:07:42.100 \longrightarrow 00:07:44.158$ The thinking there being that

NOTE Confidence: 0.916850138571429

 $00:07:44.160 \longrightarrow 00:07:47.272$ there is this idea that is widely

NOTE Confidence: 0.916850138571429

 $00:07:47.272 \longrightarrow 00:07:50.252$ accepted that most colorectal cancer

NOTE Confidence: 0.916850138571429

 $00:07:50.252 \longrightarrow 00:07:52.980$ comes from polyps that form in the colon,

NOTE Confidence: 0.916850138571429

 $00:07:52.980 \longrightarrow 00:07:55.476$ which is from the natural turnover

NOTE Confidence: 0.916850138571429

 $00:07:55.476 \longrightarrow 00:07:58.660$ of the surface of the colon,

NOTE Confidence: 0.916850138571429

 $00:07:58.660 \longrightarrow 00:08:00.260$ and so those polyps,

NOTE Confidence: 0.916850138571429

 $00:08:00.260 \longrightarrow 00:08:01.965$ then overtime have more and

NOTE Confidence: 0.916850138571429

 $00:08:01.965 \longrightarrow 00:08:03.329$ more turnover of cells,

NOTE Confidence: 0.916850138571429

 $00:08:03.330 \longrightarrow 00:08:05.600$ and those cells get increasingly

NOTE Confidence: 0.916850138571429

 $00:08:05.600 \longrightarrow 00:08:07.670$ cancer like and as that occurs

NOTE Confidence: 0.916850138571429

 $00:08:07.670 \longrightarrow 00:08:09.769$ in anywhere between a five

00:08:09.769 --> 00:08:11.399 and 10 year progression cycle,

NOTE Confidence: 0.916850138571429

 $00:08:11.400 \longrightarrow 00:08:13.848$ you can have what was a non cancerous

NOTE Confidence: 0.916850138571429

 $00:08:13.848 \longrightarrow 00:08:15.378$ polyp turn into a cancer.

NOTE Confidence: 0.916850138571429

 $00:08:15.380 \longrightarrow 00:08:17.200$ So that's where this thought that if

NOTE Confidence: 0.916850138571429

 $00:08:17.200 \longrightarrow 00:08:19.055$ you start 10 years before a primary

NOTE Confidence: 0.916850138571429

 $00:08:19.055 \longrightarrow 00:08:20.750$ relative who had colon cancer,

NOTE Confidence: 0.916850138571429

 $00:08:20.750 \longrightarrow 00:08:23.270$ you should be able to identify that

NOTE Confidence: 0.916850138571429

 $00{:}08{:}23.270 \dashrightarrow 00{:}08{:}25.628$ at the precancerous stage and address

NOTE Confidence: 0.916850138571429

 $00:08:25.628 \longrightarrow 00:08:27.633$ it by removal with colonoscopy.

NOTE Confidence: 0.916850138571429

 $00:08:27.640 \longrightarrow 00:08:30.153$ There is also a personal history if

NOTE Confidence: 0.916850138571429

 $00:08:30.153 \longrightarrow 00:08:32.167$ certain patients have been exposed

NOTE Confidence: 0.916850138571429

 $00:08:32.167 \longrightarrow 00:08:33.903$ to various environmental factors or

 $00:08:38.288 \longrightarrow 00:08:40.619$ cancer causing agents,

NOTE Confidence: 0.916850138571429

 $00:08:40.620 \longrightarrow 00:08:42.456$ that would be another reason to

NOTE Confidence: 0.916850138571429

 $00:08:42.456 \longrightarrow 00:08:44.562$ screen them earlier and then there

NOTE Confidence: 0.916850138571429

 $00:08:44.562 \longrightarrow 00:08:46.138$ are relatively rare diseases,

 $00:08:46.140 \longrightarrow 00:08:47.538$ particularly inherited syndromes

NOTE Confidence: 0.916850138571429

00:08:47.538 --> 00:08:49.868 like Lynch syndrome or

NOTE Confidence: 0.916850138571429

 $00{:}08{:}49.868 \dashrightarrow 00{:}08{:}51.958$ Familial adenomatous polyposis.

NOTE Confidence: 0.916850138571429

 $00:08:51.960 \longrightarrow 00:08:54.480$ These are conditions where

00:08:56.160 --> 00:08:58.590 numerous family members

NOTE Confidence: 0.916850138571429

 $00:08:58.590 \longrightarrow 00:09:00.820$ who have already had colon

NOTE Confidence: 0.916850138571429

 $00:09:00.820 \longrightarrow 00:09:02.604$ cancer or related cancers,

NOTE Confidence: 0.916850138571429

00:09:02.610 --> 00:09:05.106 and because of that increased risk,

NOTE Confidence: 0.916850138571429

 $00:09:05.110 \longrightarrow 00:09:07.310$ there are very well early

NOTE Confidence: 0.916850138571429

 $00:09:07.310 \longrightarrow 00:09:09.070$ screening guidelines for those

NOTE Confidence: 0.916850138571429

 $00{:}09{:}09.070 \dashrightarrow 00{:}09{:}10.569$ particular patient groups.

NOTE Confidence: 0.916850138571429

 $00:09:10.570 \longrightarrow 00:09:12.582$ Those diseases and inherited

NOTE Confidence: 0.916850138571429

00:09:12.582 --> 00:09:14.594 symptoms are relatively rare,

NOTE Confidence: 0.916850138571429

 $00:09:14.600 \longrightarrow 00:09:16.315$ and typically patients are getting

NOTE Confidence: 0.916850138571429

00:09:16.315 --> 00:09:18.030 passed on from family members saying,

 $00:09:19.530 \longrightarrow 00:09:21.060$ I started screening earlier than average

 $00:09:21.060 \longrightarrow 00:09:22.938$ because of this and you should too.

NOTE Confidence: 0.7997459625

 $00:09:29.940 \longrightarrow 00:09:32.229$ Tell us about the modifiable risk factors.

NOTE Confidence: 0.927403475

 $00:09:32.720 \longrightarrow 00:09:34.982$ So modifiable risk factors are incredibly

NOTE Confidence: 0.927403475

 $00:09:34.982 \longrightarrow 00:09:37.167$ important because this is where our

NOTE Confidence: 0.927403475

 $00:09:37.167 \longrightarrow 00:09:39.330$ patients own agency has something they can

NOTE Confidence: 0.927403475

00:09:39.330 --> 00:09:41.725 do to reduce their risk moving forward.

NOTE Confidence: 0.927403475

 $00:09:41.730 \longrightarrow 00:09:43.110$ There are things that we often times

NOTE Confidence: 0.927403475

 $00:09:43.110 \longrightarrow 00:09:44.605$ don't like to hear about when

NOTE Confidence: 0.927403475

00:09:44.605 --> 00:09:45.657 we are patients ourselves,

NOTE Confidence: 0.927403475

 $00:09:45.660 \longrightarrow 00:09:47.595$ because it does typically

NOTE Confidence: 0.927403475

 $00:09:47.595 \longrightarrow 00:09:48.756$ involve behavior change.

NOTE Confidence: 0.927403475

00:09:48.760 --> 00:09:51.336 But you know, I really tried to have

NOTE Confidence: 0.927403475

 $00:09:51.336 \longrightarrow 00:09:53.599$ patients wrap their heads around that.

NOTE Confidence: 0.927403475

 $00:09:53.600 \longrightarrow 00:09:55.136$ You can essentially

NOTE Confidence: 0.927403475

 $00:09:55.136 \longrightarrow 00:09:58.208$ eliminate your increased risk if you

NOTE Confidence: 0.927403475

00:09:58.208 --> 00:10:00.616 do these changes in behavior early

 $00:10:00.616 \longrightarrow 00:10:02.930$ enough on in the exposure cycle and

NOTE Confidence: 0.927403475

 $00:10:02.930 \longrightarrow 00:10:05.102$ the modifiable risk factors that

NOTE Confidence: 0.927403475

 $00:10:05.102 \longrightarrow 00:10:07.658$ we think about most are alcohol use,

NOTE Confidence: 0.927403475

00:10:07.660 --> 00:10:09.232 tobacco smoking,

NOTE Confidence: 0.927403475

00:10:09.232 --> 00:10:12.376 being overweight or obese.

NOTE Confidence: 0.927403475

 $00:10:12.380 \longrightarrow 00:10:15.880$ And then the more controversial area

NOTE Confidence: 0.927403475

 $00:10:15.880 \longrightarrow 00:10:18.568$ are the dietary changes that one

NOTE Confidence: 0.927403475

00:10:18.568 --> 00:10:21.180 can do in addition to simple weight

NOTE Confidence: 0.927403475

 $00:10:21.180 \longrightarrow 00:10:22.580$ loss that's related to obesity.

NOTE Confidence: 0.927403475

 $00:10:22.580 \longrightarrow 00:10:23.654$ So, for example,

NOTE Confidence: 0.927403475

00:10:23.654 --> 00:10:25.444 this evidence is still evolving.

NOTE Confidence: 0.927403475

 $00:10:25.450 \longrightarrow 00:10:26.420$ We don't know for sure,

NOTE Confidence: 0.927403475

00:10:26.420 --> 00:10:29.084 but things like high fiber diets,

NOTE Confidence: 0.927403475

 $00:10:29.084 \longrightarrow 00:10:31.306$ reducing complex artificial sugars,

NOTE Confidence: 0.927403475

 $00:10:31.306 \longrightarrow 00:10:33.910$ and so forth may have an improvement

 $00:10:33.910 \longrightarrow 00:10:36.876$ on one's risk factors for colon cancer.

 $00:10:39.120 \longrightarrow 00:10:40.620$ The other one that

NOTE Confidence: 0.927403475

 $00{:}10{:}40.620 \dashrightarrow 00{:}10{:}42.020$ I would controversially put in

NOTE Confidence: 0.927403475

 $00:10:42.020 \longrightarrow 00:10:43.140$ the modifiable risk factor

NOTE Confidence: 0.927403475

 $00:10:43.140 \longrightarrow 00:10:45.560$ group is race.

NOTE Confidence: 0.927403475

 $00:10:45.560 \longrightarrow 00:10:47.534$ Obviously a patient can't change their race,

NOTE Confidence: 0.927403475

 $00:10:47.540 \longrightarrow 00:10:49.192$ but I think at the society level

NOTE Confidence: 0.927403475

 $00:10:49.192 \longrightarrow 00:10:51.414$ we have to ask if whether or not

NOTE Confidence: 0.927403475

 $00:10:51.414 \longrightarrow 00:10:52.869$ the fact that African Americans

NOTE Confidence: 0.927403475

00:10:52.927 --> 00:10:54.712 in particular have an incredibly

NOTE Confidence: 0.927403475

 $00:10:54.712 \longrightarrow 00:10:56.497$ higher rate of colorectal cancer

NOTE Confidence: 0.927403475

 $00:10:56.500 \longrightarrow 00:10:57.648$ than the average population,

NOTE Confidence: 0.927403475

00:10:57.648 --> 00:10:59.083 is that because of something

NOTE Confidence: 0.927403475

 $00{:}10{:}59.083 \mathrel{--}{>} 00{:}11{:}00.656$ genetic and the data suggests that

NOTE Confidence: 0.927403475

 $00:11:00.656 \longrightarrow 00:11:01.891$ that's probably not the case.

NOTE Confidence: 0.927403475

 $00:11:01.900 \longrightarrow 00:11:04.630$ The data suggests that the risk of

 $00:11:04.630 \longrightarrow 00:11:06.690$ increased colon cancer in certain

NOTE Confidence: 0.927403475

 $00{:}11{:}06.690 {\:{\mbox{--}}\!>}\ 00{:}11{:}09.150$ races is likely due to socioeconomic

NOTE Confidence: 0.927403475

 $00:11:09.150 \longrightarrow 00:11:11.548$ factors and access issues to care,

NOTE Confidence: 0.927403475

 $00:11:11.550 \longrightarrow 00:11:13.989$ so I think as a society and

NOTE Confidence: 0.927403475

00:11:13.989 --> 00:11:16.537 also as a group of physicians,

NOTE Confidence: 0.927403475

00:11:16.540 --> 00:11:17.491 Health care providers,

NOTE Confidence: 0.927403475

00:11:17.491 --> 00:11:19.710 we need to think seriously how we're

NOTE Confidence: 0.927403475

 $00:11:19.765 \longrightarrow 00:11:21.535$ making sure that race is acknowledged

NOTE Confidence: 0.927403475

 $00{:}11{:}21.535 {\:{\circ}{\circ}{\circ}}>00{:}11{:}23.498$ in our care of patients because

NOTE Confidence: 0.927403475

 $00:11:23.498 \longrightarrow 00:11:25.550$ there are increased risks that we

NOTE Confidence: 0.927403475

 $00{:}11{:}25.610 \dashrightarrow 00{:}11{:}27.340$ likely could modify with improved

NOTE Confidence: 0.927403475

 $00:11:27.340 \longrightarrow 00:11:29.362$ access to care and addressing both

NOTE Confidence: 0.927403475

 $00{:}11{:}29.362 \dashrightarrow 00{:}11{:}31.258$ social terms of health as well

NOTE Confidence: 0.927403475

 $00:11:31.258 \longrightarrow 00:11:32.629$ as biomedical risk factors.

NOTE Confidence: 0.823524788

00:11:34.360 --> 00:11:36.120 A couple of pointed questions.

NOTE Confidence: 0.823524788

 $00:11:36.120 \longrightarrow 00:11:39.000$ I guess the first is in terms of gender.

 $00:11:39.000 \longrightarrow 00:11:40.640$ Is there a difference

NOTE Confidence: 0.823524788

00:11:40.640 --> 00:11:41.870 in colorectal incidence?

NOTE Confidence: 0.853850674210526

 $00:11:43.840 \longrightarrow 00:11:45.730$ The relationship to gender and

NOTE Confidence: 0.853850674210526

00:11:45.730 --> 00:11:48.320 colorectal cancer has more to do with

NOTE Confidence: 0.853850674210526

 $00:11:48.320 \longrightarrow 00:11:50.525$ where the cancers occur in the colon,

NOTE Confidence: 0.853850674210526

 $00:11:50.530 \longrightarrow 00:11:52.663$ and this is a complex issue that we can

NOTE Confidence: 0.853850674210526

 $00:11:52.663 \longrightarrow 00:11:54.390$ probably come back to if we have time.

NOTE Confidence: 0.853850674210526

00:11:54.390 --> 00:11:56.334 But colorectal cancer occurs

NOTE Confidence: 0.853850674210526

 $00:11:56.334 \longrightarrow 00:11:58.580$ in three general places.

NOTE Confidence: 0.853850674210526

 $00:11:58.580 \longrightarrow 00:12:00.380$ The right side of the colon,

NOTE Confidence: 0.853850674210526

 $00:12:00.380 \longrightarrow 00:12:01.268$ the left side of the colon,

NOTE Confidence: 0.853850674210526

 $00:12:01.270 \longrightarrow 00:12:03.049$ and the rectum.

NOTE Confidence: 0.853850674210526

 $00{:}12{:}03.050 \mathrel{--}{>} 00{:}12{:}04.525$ These are very different areas

NOTE Confidence: 0.853850674210526

 $00:12:04.525 \longrightarrow 00:12:06.800$ in terms of how they are handled

NOTE Confidence: 0.853850674210526

 $00:12:06.800 \longrightarrow 00:12:08.268$ from a suregons standpoint,

00:12:08.270 --> 00:12:10.839 which is why it's really relevant and

NOTE Confidence: 0.853850674210526

 $00:12:10.839 \longrightarrow 00:12:14.048$ to go to your direct question,

NOTE Confidence: 0.853850674210526

 $00:12:14.050 \longrightarrow 00:12:16.430$ the gender differences between the

NOTE Confidence: 0.853850674210526

00:12:16.430 --> 00:12:19.240 various anatomic sites varies as well.

NOTE Confidence: 0.853850674210526

00:12:19.240 --> 00:12:20.740 We don't really understand why and

NOTE Confidence: 0.853850674210526

00:12:20.740 --> 00:12:22.749 it's an area of open investigation,

NOTE Confidence: 0.853850674210526

 $00:12:22.750 \longrightarrow 00:12:25.382$ but it does seem to color

NOTE Confidence: 0.853850674210526

 $00:12:25.382 \longrightarrow 00:12:27.050$ where these cancers occur,

NOTE Confidence: 0.853850674210526

 $00:12:27.050 \longrightarrow 00:12:29.126$ and therefore genders seem to have

NOTE Confidence: 0.853850674210526

 $00:12:29.126 \longrightarrow 00:12:30.907$ differences in treatment strategies

NOTE Confidence: 0.853850674210526

 $00{:}12{:}30.907 \dashrightarrow 00{:}12{:}33.294$ because of where the sites of disease.

NOTE Confidence: 0.875746080666667

 $00:12:34.830 \longrightarrow 00:12:37.154$ So women have more colon cancers

NOTE Confidence: 0.875746080666667

 $00:12:37.154 \longrightarrow 00:12:39.779$ on one side of the colon than men?

NOTE Confidence: 0.875746080666667

 $00:12:39.780 \longrightarrow 00:12:41.538$ Correct, the right side.

NOTE Confidence: 0.875746080666667

00:12:41.540 --> 00:12:43.580 Interesting, and my second question,

NOTE Confidence: 0.875746080666667

 $00:12:43.580 \longrightarrow 00:12:46.980$ what about inflammatory bowel disease?

 $00{:}12{:}46.980 \dashrightarrow 00{:}12{:}48.708$ Does that increase your

NOTE Confidence: 0.875746080666667

 $00:12:48.708 \longrightarrow 00:12:50.436$ risk of colorectal cancer?

NOTE Confidence: 0.875746080666667

 $00:12:50.440 \longrightarrow 00:12:53.702$ And if so, are we seeing more

NOTE Confidence: 0.875746080666667

00:12:53.702 --> 00:12:55.583 inflammatory bowel disease in

NOTE Confidence: 0.875746080666667

 $00:12:55.583 \longrightarrow 00:12:57.538$ younger people which might give

NOTE Confidence: 0.875746080666667

 $00:12:57.538 \longrightarrow 00:13:00.820$ us a clue as to one potential

NOTE Confidence: 0.875746080666667

00:13:00.820 --> 00:13:03.530 etiologic factor for younger onset?

NOTE Confidence: 0.8750956775

 $00{:}13{:}04.930 \dashrightarrow 00{:}13{:}06.610$ So, inflammatory bowel disease

NOTE Confidence: 0.8750956775

 $00:13:06.610 \longrightarrow 00:13:08.290$ absolutely increases your risk.

00:13:09.784 --> 00:13:12.274 The screening guidelines for both

NOTE Confidence: 0.8750956775

 $00{:}13{:}12.274 \dashrightarrow 00{:}13{:}15.194$ patients with Crohn's disease and

NOTE Confidence: 0.8750956775

00:13:15.194 --> 00:13:17.966 colitis specifically target those

NOTE Confidence: 0.8750956775

 $00:13:18.045 \longrightarrow 00:13:20.680$ groups for early onset colonoscopies,

NOTE Confidence: 0.8750956775

 $00:13:20.680 \longrightarrow 00:13:22.568$ partially to evaluate their

NOTE Confidence: 0.8750956775

00:13:22.568 --> 00:13:23.984 inflammatory bowel disease,

NOTE Confidence: 0.8750956775

 $00:13:23.990 \longrightarrow 00:13:27.446$ but also to evaluate for the early

 $00:13:27.446 \longrightarrow 00:13:29.870$ development of colorectal cancer.

NOTE Confidence: 0.8750956775

 $00:13:29.870 \longrightarrow 00:13:31.886$ We talk a lot in that

NOTE Confidence: 0.8750956775

00:13:31.886 --> 00:13:32.750 population about dysplasia.

NOTE Confidence: 0.8750956775

 $00:13:32.750 \longrightarrow 00:13:34.118$ Dysplasia is what cells

NOTE Confidence: 0.8750956775

 $00:13:34.118 \longrightarrow 00:13:36.658$ look like under a microscope when they're

NOTE Confidence: 0.8750956775

00:13:36.658 --> 00:13:39.190 headed towards potentially being a cancer,

NOTE Confidence: 0.8750956775

 $00:13:39.190 \longrightarrow 00:13:42.515$ and so those patients get routine regular

NOTE Confidence: 0.8750956775

 $00:13:42.515 \longrightarrow 00:13:45.078$ biopsies to evaluate for dysplasia as

NOTE Confidence: 0.8750956775

 $00:13:45.078 \longrightarrow 00:13:48.010$ a sign that that would be the case,

NOTE Confidence: 0.8750956775

 $00:13:48.010 \longrightarrow 00:13:50.074$ and in that patient population the

NOTE Confidence: 0.8750956775

00:13:50.074 --> 00:13:51.792 recommendations in terms of what

NOTE Confidence: 0.8750956775

 $00:13:51.792 \longrightarrow 00:13:53.460$ you do with that are changing,

NOTE Confidence: 0.8750956775

 $00:13:53.460 \longrightarrow 00:13:55.032$ but the historical recommendations

NOTE Confidence: 0.8750956775

00:13:55.032 --> 00:13:57.390 have been to move towards early

NOTE Confidence: 0.8750956775

00:13:57.454 --> 00:13:59.094 surgical intervention to remove

 $00:13:59.094 \longrightarrow 00:14:01.683$ diseased portions of the colon because

NOTE Confidence: 0.8750956775

00:14:01.683 --> 00:14:04.348 of their increased cancer risk.

NOTE Confidence: 0.8750956775

 $00:14:04.350 \longrightarrow 00:14:06.498$ You bring up an interesting point

NOTE Confidence: 0.8750956775

00:14:06.498 --> 00:14:08.343 about inflammatory bowel disease

NOTE Confidence: 0.8750956775

 $00:14:08.343 \longrightarrow 00:14:10.835$ incidence and early onset of colon cancers,

NOTE Confidence: 0.8750956775

 $00:14:10.840 \longrightarrow 00:14:13.224$ and I think I would capture that

NOTE Confidence: 0.8750956775

00:14:13.224 --> 00:14:13.988 more broadly,

NOTE Confidence: 0.8750956775

 $00:14:13.988 \longrightarrow 00:14:16.280$ what one of the leading theories

NOTE Confidence: 0.8750956775

 $00:14:16.345 \longrightarrow 00:14:18.979$ around why we have increased colorectal

NOTE Confidence: 0.8750956775

00:14:18.979 --> 00:14:21.094 cancer in younger populations is

NOTE Confidence: 0.8750956775

 $00:14:21.094 \longrightarrow 00:14:22.864$ the inflammatory burden that the

NOTE Confidence: 0.8750956775

 $00{:}14{:}22.864 \dashrightarrow 00{:}14{:}24.820$ colon is seeing younger in life.

NOTE Confidence: 0.8750956775

 $00:14:24.820 \longrightarrow 00:14:26.080$ And there's a lot of reasons

NOTE Confidence: 0.8750956775

 $00:14:26.080 \longrightarrow 00:14:27.400$ why that may be the case.

NOTE Confidence: 0.8750956775

 $00:14:27.400 \longrightarrow 00:14:28.930$ The question has been raised,

NOTE Confidence: 0.8750956775

 $00{:}14{:}28.930 \dashrightarrow 00{:}14{:}31.192$ is it a matter of psychosocial

 $00:14:31.192 \longrightarrow 00:14:32.700$ stress and modern society?

NOTE Confidence: 0.8750956775

 $00:14:32.700 \longrightarrow 00:14:34.190$ Is it a matter of

NOTE Confidence: 0.8750956775

 $00:14:34.190 \longrightarrow 00:14:36.703$ the artificial sugar

NOTE Confidence: 0.8750956775

00:14:36.703 --> 00:14:38.359 ingredients that are in food.

NOTE Confidence: 0.8750956775

 $00:14:38.360 \longrightarrow 00:14:41.412$ Do they have

NOTE Confidence: 0.8750956775

 $00:14:41.412 \longrightarrow 00:14:43.217$ an established higher

NOTE Confidence: 0.8750956775

00:14:43.217 --> 00:14:45.140 inflammatory load that's seen by the

NOTE Confidence: 0.8750956775

 $00:14:45.140 \longrightarrow 00:14:46.974$ body and is that somehow creating

NOTE Confidence: 0.8750956775

00:14:47.034 --> 00:14:48.729 more inflammation in the colon?

NOTE Confidence: 0.8750956775

 $00{:}14{:}48.730 \dashrightarrow 00{:}14{:}50.082$ More inflammation begets this

NOTE Confidence: 0.8750956775

00:14:50.082 --> 00:14:51.772 dysplasia that we talked about

NOTE Confidence: 0.8750956775

 $00:14:51.772 \longrightarrow 00:14:53.488$ and does that lead to cancer?

NOTE Confidence: 0.8750956775

 $00:14:53.490 \longrightarrow 00:14:55.210$ These theories are out there,

00:14:56.290 --> 00:14:58.090 they're often discussed and they

NOTE Confidence: 0.8750956775

 $00:14:58.090 \longrightarrow 00:15:00.549$ have good biology that supports them.

NOTE Confidence: 0.8750956775

 $00:15:00.550 \longrightarrow 00:15:02.601$ We just haven't made the missing

 $00{:}15{:}02.601 \dashrightarrow 00{:}15{:}04.689$ link connection to the clinical evidence.

NOTE Confidence: 0.8750956775

 $00:15:08.250 \longrightarrow 00:15:10.252$ Well, we're going to pick up the

NOTE Confidence: 0.91839082368421

 $00{:}15{:}10.252 \dashrightarrow 00{:}15{:}11.878$ conversation right after we take a

NOTE Confidence: 0.91839082368421

00:15:11.878 --> 00:15:13.312 short break for a medical minute.

NOTE Confidence: 0.91839082368421

 $00{:}15{:}13.320 \dashrightarrow 00{:}15{:}15.294$ Please stay tuned to learn more

NOTE Confidence: 0.91839082368421

 $00:15:15.294 \longrightarrow 00:15:17.392$ about the surgical care of colorectal

NOTE Confidence: 0.91839082368421

 $00:15:17.392 \longrightarrow 00:15:19.187$ cancer with my guest doctor

NOTE Confidence: 0.91839082368421 00:15:19.190 --> 00:15:21.170 Ira Leeds. NOTE Confidence: 0.851226645555556

00:15:21.180 --> 00:15:23.010 Funding for Yale Cancer Answers comes

NOTE Confidence: 0.85122664555556

00:15:23.010 --> 00:15:24.474 from Smilow Cancer Hospital,

NOTE Confidence: 0.85122664555556

 $00:15:24.480 \longrightarrow 00:15:26.392$ where integrative medicine services

NOTE Confidence: 0.85122664555556

00:15:26.392 --> 00:15:28.304 help patients navigate physical,

NOTE Confidence: 0.85122664555556

 $00{:}15{:}28.310 \mathrel{--}{>} 00{:}15{:}30.162$ mental, and spiritual Wellness

NOTE Confidence: 0.85122664555556

00:15:30.162 --> 00:15:32.477 during and after cancer therapy.

NOTE Confidence: 0.85122664555556

 $00:15:32.480 \longrightarrow 00:15:33.540$ To learn more, visit

 $00:15:36.070 \longrightarrow 00:15:38.330$ yalecancercenter.org/integrative.

NOTE Confidence: 0.94603026

00:15:38.330 --> 00:15:40.170 The American Cancer Society

NOTE Confidence: 0.94603026

 $00:15:40.170 \longrightarrow 00:15:42.383$ estimates that more than 65,000

NOTE Confidence: 0.94603026

 $00{:}15{:}42.383 \dashrightarrow 00{:}15{:}44.248$ Americans will be diagnosed with

NOTE Confidence: 0.94603026

00:15:44.248 --> 00:15:46.429 head and neck cancer this year,

NOTE Confidence: 0.94603026

 $00:15:46.430 \longrightarrow 00:15:49.580$ making up about 4% of all cancers

NOTE Confidence: 0.94603026

 $00:15:49.580 \longrightarrow 00:15:51.490$ diagnosed when detected early.

NOTE Confidence: 0.94603026

00:15:51.490 --> 00:15:53.794 However, head and neck cancers are

NOTE Confidence: 0.94603026

 $00:15:53.794 \longrightarrow 00:15:55.910$ easily treated and highly curable.

NOTE Confidence: 0.94603026

00:15:55.910 --> 00:15:57.902 Clinical trials are currently

NOTE Confidence: 0.94603026

 $00{:}15{:}57.902 \dashrightarrow 00{:}15{:}59.894$ underway at federally designated

NOTE Confidence: 0.94603026

 $00:15:59.894 \longrightarrow 00:16:01.618$ Comprehensive cancer centers such

NOTE Confidence: 0.94603026

 $00:16:01.618 \longrightarrow 00:16:03.928$ as Yale Cancer Center and at Smilow

NOTE Confidence: 0.94603026

00:16:03.928 --> 00:16:06.124 Cancer Hospital to test innovative new

NOTE Confidence: 0.94603026

 $00:16:06.124 \longrightarrow 00:16:08.376$ treatments for head and neck cancers.

NOTE Confidence: 0.94603026

 $00:16:08.376 \longrightarrow 00:16:11.052$ Yale Cancer Center was recently awarded

 $00:16:11.052 \longrightarrow 00:16:13.232$ grants from the National Institutes

NOTE Confidence: 0.94603026

00:16:13.232 --> 00:16:15.913 of Health to fund the Yale Head

NOTE Confidence: 0.94603026

00:16:15.913 --> 00:16:18.214 and neck Cancer Specialized program

NOTE Confidence: 0.94603026

 $00:16:18.214 \longrightarrow 00:16:20.974$ of Research Excellence or SPORE to

NOTE Confidence: 0.94603026

 $00{:}16{:}20.980 \dashrightarrow 00{:}16{:}23.050$ address critical barriers to treatment

NOTE Confidence: 0.94603026

 $00:16:23.050 \longrightarrow 00:16:25.568$ of head and neck squamous cell

NOTE Confidence: 0.94603026

 $00:16:25.568 \longrightarrow 00:16:27.854$ carcinoma due to resistance to immune

NOTE Confidence: 0.94603026

 $00{:}16{:}27.854 \dashrightarrow 00{:}16{:}30.170$ DNA damaging and targeted the rapy.

NOTE Confidence: 0.94603026

 $00:16:30.170 \longrightarrow 00:16:33.200$ More information is available at

NOTE Confidence: 0.94603026

00:16:33.200 --> 00:16:34.541 yalecancercenter.org you're listening

NOTE Confidence: 0.94603026

 $00:16:34.541 \longrightarrow 00:16:36.329$ to Connecticut Public Radio.

NOTE Confidence: 0.862771145

 $00{:}16{:}37.700 \dashrightarrow 00{:}16{:}39.818$ Welcome back to Yale Cancer answers.

NOTE Confidence: 0.862771145

 $00{:}16{:}39.820 \dashrightarrow 00{:}16{:}42.025$ This is doctor Anis Jaguar and I'm

NOTE Confidence: 0.862771145

 $00:16:42.025 \longrightarrow 00:16:44.463$ joined tonight by my guest Doctor Ira

NOTE Confidence: 0.862771145

 $00:16:44.463 \longrightarrow 00:16:46.605$ leads we're learning about the surgical

 $00:16:46.674 \longrightarrow 00:16:49.098$ care of patients with colorectal cancer.

NOTE Confidence: 0.862771145

 $00{:}16{:}49.100 \dashrightarrow 00{:}16{:}51.585$ And before the break IRA we spent

NOTE Confidence: 0.862771145

 $00:16:51.585 \longrightarrow 00:16:54.687$ a lot of time talking about kind

NOTE Confidence: 0.862771145

 $00:16:54.687 \longrightarrow 00:16:57.127$ of what causes colon cancer,

NOTE Confidence: 0.862771145

 $00:16:57.130 \longrightarrow 00:16:59.658$ or at least what are some of the

NOTE Confidence: 0.862771145

00:16:59.658 --> 00:17:01.805 risk factors and what are the

NOTE Confidence: 0.862771145

 $00:17:01.805 \longrightarrow 00:17:03.959$ factors that lead to colon cancer,

NOTE Confidence: 0.862771145

00:17:03.960 --> 00:17:05.493 particularly occurring at

NOTE Confidence: 0.862771145

00:17:05.493 --> 00:17:08.048 a younger age so that.

NOTE Confidence: 0.862771145

 $00:17:08.050 \longrightarrow 00:17:10.370$ Guidelines have now changed

NOTE Confidence: 0.862771145

 $00{:}17{:}10.370 \dashrightarrow 00{:}17{:}12.690$ to get colonoscopies earlier.

NOTE Confidence: 0.862771145

 $00:17:12.690 \longrightarrow 00:17:14.970$ One thing I want to talk about just

NOTE Confidence: 0.862771145

 $00:17:14.970 \longrightarrow 00:17:17.195$ before we get into the management

NOTE Confidence: 0.862771145

 $00{:}17{:}17.195 \dashrightarrow 00{:}17{:}19.431$ of colorectal cancer is the type

NOTE Confidence: 0.862771145

 $00:17:19.431 \longrightarrow 00:17:20.819$ of screening you mentioned.

NOTE Confidence: 0.862771145

 $00:17:20.820 \longrightarrow 00:17:24.460$ This briefly before the break in terms

 $00:17:24.460 \longrightarrow 00:17:27.240$ of colonoscopy versus alternatives.

NOTE Confidence: 0.862771145

 $00{:}17{:}27.240 \dashrightarrow 00{:}17{:}29.632$ It can you flesh that out a little

NOTE Confidence: 0.862771145

00:17:29.632 --> 00:17:32.052 bit for us so clearly nobody is,

NOTE Confidence: 0.862771145

00:17:32.052 --> 00:17:34.420 you know, chomping at the bit saying oh,

NOTE Confidence: 0.862771145

 $00:17:34.420 \longrightarrow 00:17:37.230$ sign me up I'd love to get a prep and

NOTE Confidence: 0.862771145

00:17:37.313 --> 00:17:40.130 have a tube put up my rear bottom end

NOTE Confidence: 0.862771145

 $00:17:40.130 \longrightarrow 00:17:42.234$ so that you can look at my colon,

NOTE Confidence: 0.862771145

 $00:17:42.240 \longrightarrow 00:17:44.893$ but we know that colonoscopy is a

NOTE Confidence: 0.862771145

00:17:44.893 --> 00:17:47.623 great test to find colorectal cancer

NOTE Confidence: 0.862771145

 $00:17:47.623 \longrightarrow 00:17:50.629$ early and allows one to actually

NOTE Confidence: 0.862771145

 $00:17:50.629 \longrightarrow 00:17:53.799$ remove potentially precancerous polyps.

NOTE Confidence: 0.862771145

 $00:17:53.800 \longrightarrow 00:17:56.716$ But if you're not terribly enthused

NOTE Confidence: 0.862771145

00:17:56.716 --> 00:17:58.660 about having a colonoscopy,

NOTE Confidence: 0.862771145

 $00:17:58.660 \longrightarrow 00:18:01.132$ how good are the alternatives and

NOTE Confidence: 0.862771145

00:18:01.132 --> 00:18:02.368 D recommend them?

 $00:18:03.460 \longrightarrow 00:18:04.356$ That's a loaded question

NOTE Confidence: 0.89307524

 $00{:}18{:}04.356 \dashrightarrow 00{:}18{:}05.700$ when it's all said and done,

NOTE Confidence: 0.89307524

 $00:18:05.700 \longrightarrow 00:18:07.758$ but we'll try to break it up

NOTE Confidence: 0.89307524

 $00:18:07.758 \longrightarrow 00:18:09.599$ here into bite sized pieces.

NOTE Confidence: 0.89307524

 $00:18:09.600 \longrightarrow 00:18:12.602$ So I think to go to colonoscopy first, the.

NOTE Confidence: 0.89307524

 $00{:}18{:}12.602 \dashrightarrow 00{:}18{:}15.854$ The two biggest values to colonoscopy

NOTE Confidence: 0.89307524

 $00:18:15.854 \longrightarrow 00:18:19.019$ for me are the following.

NOTE Confidence: 0.89307524

 $00:18:19.020 \longrightarrow 00:18:20.958$ The first is that colonoscopy has

NOTE Confidence: 0.89307524

 $00{:}18{:}20.958 \dashrightarrow 00{:}18{:}23.061$ been shown to be able identify

NOTE Confidence: 0.89307524

 $00:18:23.061 \longrightarrow 00:18:24.906$ lesions typically earlier than a

NOTE Confidence: 0.89307524

 $00{:}18{:}24.906 \dashrightarrow 00{:}18{:}27.568$ lot of the alternatives out there,

NOTE Confidence: 0.89307524

 $00:18:27.570 \longrightarrow 00:18:29.946$ and the reason being is that

NOTE Confidence: 0.89307524

00:18:29.946 --> 00:18:32.008 colonoscopy can dentify both truly

NOTE Confidence: 0.89307524

 $00:18:32.008 \longrightarrow 00:18:34.426$ benign what so non cancerous lesions

NOTE Confidence: 0.89307524

00:18:34.426 --> 00:18:37.169 it can identify precancerous lesions,

NOTE Confidence: 0.89307524

 $00:18:37.170 \longrightarrow 00:18:39.386$ and it can identify cancer and

 $00:18:39.386 \longrightarrow 00:18:41.366$ why that's valuable is that.

NOTE Confidence: 0.89307524

00:18:41.370 --> 00:18:43.590 It by getting your regular screening,

NOTE Confidence: 0.89307524

 $00:18:43.590 \longrightarrow 00:18:43.940$ colonoscopy.

NOTE Confidence: 0.89307524

00:18:43.940 --> 00:18:46.740 It kind of gives a time lapse image

NOTE Confidence: 0.89307524

00:18:46.740 --> 00:18:49.297 of what's happening in your colon,

NOTE Confidence: 0.89307524

 $00:18:49.300 \longrightarrow 00:18:50.890$ which I think is valuable.

NOTE Confidence: 0.89307524

00:18:50.890 --> 00:18:52.228 If something were to ever develop,

NOTE Confidence: 0.89307524

 $00:18:52.230 \longrightarrow 00:18:54.666$ kind of what somebody saw before.

NOTE Confidence: 0.89307524

 $00{:}18{:}54.670 \dashrightarrow 00{:}18{:}56.326$ The second reason why colonoscopy is

NOTE Confidence: 0.89307524

 $00:18:56.326 \longrightarrow 00:18:58.270$ so valuable is that you're in there.

NOTE Confidence: 0.89307524

 $00:18:58.270 \dashrightarrow 00:19:00.646$ You can already do what you need to do,

NOTE Confidence: 0.89307524

 $00:19:00.650 \longrightarrow 00:19:03.580$ often times for these precancerous lesions,

NOTE Confidence: 0.89307524

 $00{:}19{:}03.580 \dashrightarrow 00{:}19{:}06.226$ with almost every other screening test,

NOTE Confidence: 0.89307524

 $00:19:06.230 \longrightarrow 00:19:07.775$ it's going to basically stratify

NOTE Confidence: 0.89307524

00:19:07.775 --> 00:19:09.690 a patient to a low risk,

 $00:19:09.690 \longrightarrow 00:19:10.905$ meaning there was nothing detected

NOTE Confidence: 0.89307524

 $00:19:10.905 \longrightarrow 00:19:12.650$ on the tests or high risk group,

NOTE Confidence: 0.89307524

 $00:19:12.650 \longrightarrow 00:19:15.359$ which means that the test was abnormal,

NOTE Confidence: 0.89307524

 $00:19:15.360 \longrightarrow 00:19:17.130$ and therefore the patient needs

NOTE Confidence: 0.89307524

 $00:19:17.130 \longrightarrow 00:19:17.838$ a colonoscopy.

NOTE Confidence: 0.89307524

 $00:19:17.840 \longrightarrow 00:19:19.060$ So a lot of these,

NOTE Confidence: 0.89307524

 $00:19:19.060 \longrightarrow 00:19:22.535$ even the best non colonoscopy

NOTE Confidence: 0.89307524

 $00:19:22.535 \longrightarrow 00:19:25.046$ screening modalities are still routing.

NOTE Confidence: 0.89307524

 $00{:}19{:}25.046 \dashrightarrow 00{:}19{:}25.418 \ \mathrm{Folks},$

NOTE Confidence: 0.89307524

00:19:25.418 --> 00:19:27.278 two colonoscopy when they have

NOTE Confidence: 0.89307524

 $00:19:27.278 \longrightarrow 00:19:28.600$ an abnormal test.

NOTE Confidence: 0.89307524

 $00:19:28.600 \longrightarrow 00:19:30.168$ So there is a little bit of this

NOTE Confidence: 0.89307524

00:19:30.168 --> 00:19:31.443 question of you know if there's

NOTE Confidence: 0.89307524

 $00:19:31.443 \longrightarrow 00:19:32.993$ so much that can be gleaned from

NOTE Confidence: 0.89307524

 $00:19:32.993 \longrightarrow 00:19:34.218$ a colonoscopy to begin with,

NOTE Confidence: 0.89307524

 $00:19:34.220 \longrightarrow 00:19:35.550$ should we putting everyone through

 $00:19:35.550 \longrightarrow 00:19:36.880$ the colonoscopy round and then,

NOTE Confidence: 0.89307524

 $00:19:36.880 \longrightarrow 00:19:38.056$ as I mentioned before,

NOTE Confidence: 0.89307524

00:19:38.056 --> 00:19:39.820 the biggest argument against that,

NOTE Confidence: 0.89307524

 $00:19:39.820 \longrightarrow 00:19:41.455$ is that colonoscopy for some

NOTE Confidence: 0.89307524

 $00:19:41.455 \longrightarrow 00:19:43.620$ folks is has an undue burden,

NOTE Confidence: 0.89307524

 $00:19:43.620 \longrightarrow 00:19:45.734$ both in terms of pleasantness but also

NOTE Confidence: 0.89307524

 $00:19:45.734 \longrightarrow 00:19:48.086$ in terms of work loss and so forth.

NOTE Confidence: 0.89307524

 $00:19:48.090 \longrightarrow 00:19:49.080$ So if you can do,

NOTE Confidence: 0.89307524

 $00:19:49.080 \longrightarrow 00:19:50.988$ for example a stool test that

NOTE Confidence: 0.89307524

 $00{:}19{:}50.988 \dashrightarrow 00{:}19{:}53.662$ you can do in your home at 1

NOTE Confidence: 0.89307524

 $00{:}19{:}53.662 \dashrightarrow 00{:}19{:}55.094$ evening when you've got the time.

NOTE Confidence: 0.89307524

 $00:19:55.094 \longrightarrow 00:19:57.080$ To do it and send it off for analysis,

NOTE Confidence: 0.89307524

 $00:19:57.080 \longrightarrow 00:19:59.056$ and that if it's negative then you're done.

NOTE Confidence: 0.89307524

 $00:19:59.060 \longrightarrow 00:20:00.452$ You have no further burden on

NOTE Confidence: 0.89307524

 $00:20:00.452 \longrightarrow 00:20:02.346$ your day to day life to get your

 $00:20:02.346 \longrightarrow 00:20:04.089$ results you need to go back to

NOTE Confidence: 0.89307524

 $00{:}20{:}04.089 \dashrightarrow 00{:}20{:}05.714$ being an average risk individual

NOTE Confidence: 0.89307524

 $00:20:05.714 \longrightarrow 00:20:07.645$ with no further colonoscopy needs.

NOTE Confidence: 0.89307524

 $00:20:07.645 \longrightarrow 00:20:12.645$ So I think we're the both the the.

NOTE Confidence: 0.89307524

 $00:20:12.650 \longrightarrow 00:20:14.580$ The clearance for these tests.

NOTE Confidence: 0.89307524

 $00:20:14.580 \longrightarrow 00:20:15.360$ In other words,

NOTE Confidence: 0.89307524

 $00:20:15.360 \longrightarrow 00:20:17.180$ what they're allowed to proclaim to be,

NOTE Confidence: 0.89307524

 $00:20:17.180 \longrightarrow 00:20:18.476$ and also where they really do,

NOTE Confidence: 0.89307524

 $00{:}20{:}18.480 \dashrightarrow 00{:}20{:}20{:}650$ have a sweet spot as the average

NOTE Confidence: 0.89307524

 $00{:}20{:}20{:}650 \dashrightarrow 00{:}20{:}22.290$ risk individual who's never had

NOTE Confidence: 0.89307524

 $00{:}20{:}22.290 \dashrightarrow 00{:}20{:}24.330$ any abnormal findings on a prior

NOTE Confidence: 0.89307524

 $00:20:24.330 \longrightarrow 00:20:25.913$ colonoscopy and does not have

NOTE Confidence: 0.89307524

00:20:25.913 --> 00:20:27.388 the high risk family features

NOTE Confidence: 0.89307524

 $00:20:27.388 \longrightarrow 00:20:29.547$ that we talked about before those

NOTE Confidence: 0.89307524

 $00{:}20{:}29.547 \dashrightarrow 00{:}20{:}31.775$ individuals if interested in

NOTE Confidence: 0.89307524

 $00:20:31.775 \longrightarrow 00:20:35.179$ pursuing a non invasive test like

00:20:35.179 --> 00:20:37.608 a colonoscopy have been shown to

NOTE Confidence: 0.89307524

 $00{:}20{:}37.608 \dashrightarrow 00{:}20{:}40.130$ have equal benefit from one of the

NOTE Confidence: 0.89307524

 $00:20:40.130 \longrightarrow 00:20:42.110$ more advanced tests out there.

NOTE Confidence: 0.89307524

00:20:42.110 --> 00:20:44.132 It's basically a test that you

NOTE Confidence: 0.89307524

 $00{:}20{:}44.132 \dashrightarrow 00{:}20{:}46.931$ give a stool sample and it uses a

NOTE Confidence: 0.89307524

 $00:20:46.931 \longrightarrow 00:20:48.651$ variety of assays or laboratory

NOTE Confidence: 0.89307524

00:20:48.651 --> 00:20:51.336 tests on that sample to look for both

NOTE Confidence: 0.89307524

 $00{:}20{:}51.336 \dashrightarrow 00{:}20{:}54.360$ can cerous DNA in the stool as well as

NOTE Confidence: 0.870083047692307

 $00:20:54.360 \longrightarrow 00:20:55.932$ a signature of what a bleeding

NOTE Confidence: 0.870083047692307

00:20:55.932 --> 00:20:57.748 lesion in your colon might be like,

NOTE Confidence: 0.870083047692307

 $00:20:57.750 \longrightarrow 00:20:59.801$ which is one of the micro bleed

NOTE Confidence: 0.870083047692307

 $00:20:59.801 \longrightarrow 00:21:02.217$ is one of the hallmarks for pre

NOTE Confidence: 0.870083047692307

 $00{:}21{:}02.217 \dashrightarrow 00{:}21{:}04.910$ cancer or early cancer in the colon,

NOTE Confidence: 0.870083047692307

 $00:21:04.910 \longrightarrow 00:21:07.413$ so that's what it's detecting and it's been

NOTE Confidence: 0.870083047692307

 $00:21:07.413 \longrightarrow 00:21:09.570$ shown to have a very good detection rate.

00:21:09.570 --> 00:21:11.760 And so if that's normal,

NOTE Confidence: 0.870083047692307

 $00{:}21{:}11.760 \dashrightarrow 00{:}21{:}13.512$ then we can confidently say that

NOTE Confidence: 0.870083047692307

 $00:21:13.512 \longrightarrow 00:21:15.634$ patient does not need a colonoscopy if

NOTE Confidence: 0.870083047692307

00:21:15.634 --> 00:21:17.720 they have no other high risk features,

NOTE Confidence: 0.870083047692307

 $00:21:17.720 \longrightarrow 00:21:19.337$ there are a number of different options

NOTE Confidence: 0.870083047692307

 $00{:}21{:}19.337 \dashrightarrow 00{:}21{:}20.840$ that are listed in the guidelines,

NOTE Confidence: 0.870083047692307

 $00:21:20.840 \longrightarrow 00:21:22.802$ but those two are probably the

NOTE Confidence: 0.870083047692307

 $00:21:22.802 \longrightarrow 00:21:24.110$ most common recommended today.

NOTE Confidence: 0.870083047692307

 $00:21:24.110 \longrightarrow 00:21:27.006$ The biggest drawback to the stool test that

NOTE Confidence: 0.870083047692307

00:21:27.006 --> 00:21:29.776 I mentioned is that it is quite expensive.

NOTE Confidence: 0.870083047692307

 $00:21:29.780 \longrightarrow 00:21:31.280$ Depending on insurance

NOTE Confidence: 0.870083047692307

00:21:31.280 --> 00:21:33.280 reimbursements and so forth,

NOTE Confidence: 0.870083047692307

 $00:21:33.280 \longrightarrow 00:21:35.980$ so it's not the biggest.

NOTE Confidence: 0.870083047692307

 $00{:}21{:}35.980 \dashrightarrow 00{:}21{:}37.468$ The biggest benefit to it is

NOTE Confidence: 0.870083047692307

00:21:37.468 --> 00:21:39.297 the is the burden of going to

NOTE Confidence: 0.870083047692307

 $00:21:39.297 \longrightarrow 00:21:40.845$ get a colonoscopy more so than.

 $00:21:40.850 \longrightarrow 00:21:42.310$ Anything else in regards to

NOTE Confidence: 0.870083047692307

 $00:21:42.310 \longrightarrow 00:21:43.478$ resource use for it?

NOTE Confidence: 0.826797348888889

00:21:44.610 --> 00:21:47.270 Cool, so let's suppose you

NOTE Confidence: 0.826797348888889

 $00:21:47.270 \longrightarrow 00:21:49.398$ went for your colonoscopy,

NOTE Confidence: 0.826797348888889

 $00:21:49.400 \longrightarrow 00:21:51.890$ and a lesion was found.

NOTE Confidence: 0.826797348888889

 $00:21:51.890 \longrightarrow 00:21:54.298$ A polyp was found and biopsied and

NOTE Confidence: 0.826797348888889

 $00:21:54.298 \longrightarrow 00:21:56.877$ it turns out that it is a cancer.

NOTE Confidence: 0.826797348888889

 $00{:}21{:}56.880 \dashrightarrow 00{:}21{:}58.924$ Can you help us to understand a

NOTE Confidence: 0.826797348888889

 $00{:}21{:}58.924 \dashrightarrow 00{:}22{:}00.958$ little bit more about how you know

NOTE Confidence: 0.826797348888889

 $00:22:00.958 \longrightarrow 00:22:03.014$ whether this is kind of a good

NOTE Confidence: 0.826797348888889

00:22:03.014 --> 00:22:04.406 cancer where your colonoscopy

NOTE Confidence: 0.826797348888889

00:22:04.406 --> 00:22:06.806 has has gotten it and you don't

NOTE Confidence: 0.826797348888889

 $00{:}22{:}06.806 \dashrightarrow 00{:}22{:}08.446$ need anything further versus a

NOTE Confidence: 0.826797348888889

 $00:22:08.446 \longrightarrow 00:22:10.462$ not so good cancer where there

NOTE Confidence: 0.826797348888889

00:22:10.462 --> 00:22:12.716 might actually be a need for you

00:22:12.780 --> 00:22:14.796 to see a colorectal surgeon and?

NOTE Confidence: 0.826797348888889

00:22:14.800 --> 00:22:16.288 Have more therapy done

NOTE Confidence: 0.876331486153846

 $00:22:16.500 \longrightarrow 00:22:18.390$ so there's a couple key things that

NOTE Confidence: 0.876331486153846

 $00:22:18.390 \longrightarrow 00:22:20.762$ you need to know when you as a

NOTE Confidence: 0.876331486153846

 $00:22:20.762 \longrightarrow 00:22:22.658$ surgeon when you're getting given a

NOTE Confidence: 0.876331486153846

 $00{:}22{:}22.658 \dashrightarrow 00{:}22{:}24.338$ biopsy report from a colonoscopy.

NOTE Confidence: 0.876331486153846

 $00:22:24.340 \longrightarrow 00:22:26.440$ The things that we think about

NOTE Confidence: 0.876331486153846

 $00:22:26.440 \longrightarrow 00:22:29.523$ the most are for a true cancer is

NOTE Confidence: 0.876331486153846

 $00{:}22{:}29.523 \dashrightarrow 00{:}22{:}31.533$ something called TNM staging or

NOTE Confidence: 0.876331486153846

 $00:22:31.533 \longrightarrow 00:22:34.170$ tumor nodes and metastasis staging.

NOTE Confidence: 0.876331486153846

 $00:22:34.170 \longrightarrow 00:22:35.976$ The tea or the tumor is what

NOTE Confidence: 0.876331486153846

 $00{:}22{:}35.976 \dashrightarrow 00{:}22{:}37.537$ is happening at the microscopic

NOTE Confidence: 0.876331486153846

 $00{:}22{:}37.537 \dashrightarrow 00{:}22{:}39.697$ level in terms of local invasion.

NOTE Confidence: 0.876331486153846

 $00:22:39.700 \longrightarrow 00:22:41.639$ Where is the thing that was biopsied?

NOTE Confidence: 0.876331486153846

 $00:22:41.640 \longrightarrow 00:22:42.824$ Where is it going?

NOTE Confidence: 0.876331486153846

 $00:22:42.824 \longrightarrow 00:22:45.819$ Is it in just the very first flute fuels

 $00:22:45.819 \longrightarrow 00:22:48.493$ level layers of cells of the colon?

NOTE Confidence: 0.876331486153846

 $00:22:48.500 \longrightarrow 00:22:50.096$ Is it invading through the colon?

NOTE Confidence: 0.876331486153846

 $00{:}22{:}50.100 \to 00{:}22{:}52.983$ Is invading into other structures in

NOTE Confidence: 0.876331486153846

 $00:22:52.983 \longrightarrow 00:22:55.174$ as nodes or there are nodes lymph

NOTE Confidence: 0.876331486153846

 $00:22:55.174 \longrightarrow 00:22:57.256$ nodes that are basically the first

NOTE Confidence: 0.876331486153846

 $00:22:57.256 \longrightarrow 00:22:59.808$ sign that a colon cancer has been

NOTE Confidence: 0.876331486153846

 $00:22:59.808 \longrightarrow 00:23:02.208$ getting to spread beyond the original

NOTE Confidence: 0.876331486153846

 $00:23:02.208 \longrightarrow 00:23:04.986$ tumor and then finally, is Amar metastases?

NOTE Confidence: 0.876331486153846

 $00:23:04.990 \longrightarrow 00:23:06.982$ That means they're spread of the

NOTE Confidence: 0.876331486153846

 $00:23:06.982 \longrightarrow 00:23:08.310$ cancer beyond the colon,

NOTE Confidence: 0.876331486153846

 $00:23:08.310 \longrightarrow 00:23:09.670$ intestine into other organs.

NOTE Confidence: 0.87633148615384600:23:09.670 --> 00:23:10.350 The body,

NOTE Confidence: 0.876331486153846

 $00{:}23{:}10.350 \to 00{:}23{:}12.905$ most commonly the liver or the lungs.

NOTE Confidence: 0.876331486153846

 $00{:}23{:}12.910 \dashrightarrow 00{:}23{:}15.178$ So four colon cancer that's been diagnosis.

NOTE Confidence: 0.87633148615384600:23:15.180 --> 00:23:15.906 Colon cancer.

00:23:15.906 --> 00:23:18.084 On colonoscopy it is important to

NOTE Confidence: 0.876331486153846

 $00:23:18.084 \longrightarrow 00:23:21.104$ get a complete scan of the body of

NOTE Confidence: 0.876331486153846

 $00:23:21.104 \longrightarrow 00:23:23.315$ particularly of the chest and the

NOTE Confidence: 0.876331486153846

00:23:23.315 --> 00:23:25.618 abdomen to make sure that you don't

NOTE Confidence: 0.876331486153846

 $00:23:25.618 \longrightarrow 00:23:27.998$ have any far ranging metastases

NOTE Confidence: 0.876331486153846

 $00:23:27.998 \longrightarrow 00:23:30.046$ or or tumor spread.

NOTE Confidence: 0.876331486153846

 $00:23:30.050 \longrightarrow 00:23:31.890$ The second issue that is

NOTE Confidence: 0.876331486153846

 $00:23:31.890 \longrightarrow 00:23:33.730$ where does it look locally?

NOTE Confidence: 0.876331486153846

 $00:23:33.730 \longrightarrow 00:23:35.098$ And that's where sometimes

NOTE Confidence: 0.876331486153846

 $00:23:35.098 \longrightarrow 00:23:37.150$ the biopsy alone can do that.

NOTE Confidence: 0.876331486153846

00:23:37.150 --> 00:23:39.726 If the biopsy comes back as cancer

NOTE Confidence: 0.876331486153846

 $00:23:39.730 \longrightarrow 00:23:41.722$ and the entire polyp was not

NOTE Confidence: 0.876331486153846

 $00:23:41.722 \longrightarrow 00:23:43.050$ removed with that biopsy,

NOTE Confidence: 0.876331486153846

 $00:23:43.050 \longrightarrow 00:23:44.905$ then that's kind of the first step

NOTE Confidence: 0.876331486153846

00:23:44.905 --> 00:23:46.775 that someone needs to go back and see

NOTE Confidence: 0.876331486153846

 $00:23:46.775 \longrightarrow 00:23:48.648$ if that can be removed into Scopic Lee.

 $00:23:48.650 \longrightarrow 00:23:50.870$ Sometimes it's very obvious from the

NOTE Confidence: 0.876331486153846

 $00:23:50.870 \longrightarrow 00:23:52.568$ original colonoscopic exam that it's

NOTE Confidence: 0.876331486153846

 $00:23:52.568 \longrightarrow 00:23:54.560$ not going to be removed locally,

NOTE Confidence: 0.876331486153846

 $00:23:54.560 \longrightarrow 00:23:55.688$ but if it's on a stock,

NOTE Confidence: 0.876331486153846

00:23:55.690 --> 00:23:57.850 if it's kind of dangling into the colon,

NOTE Confidence: 0.876331486153846

 $00:23:57.850 \longrightarrow 00:23:59.842$ sometimes those are at a very

NOTE Confidence: 0.876331486153846

00:23:59.842 --> 00:24:01.652 good candidates for local removal

NOTE Confidence: 0.876331486153846

 $00:24:01.652 \longrightarrow 00:24:02.918$ with Columbus scope.

NOTE Confidence: 0.876331486153846

00:24:02.920 --> 00:24:05.349 If that's done and on the micro,

NOTE Confidence: 0.876331486153846

 $00:24:05.350 \longrightarrow 00:24:07.780$ the microscopic evaluation of that specimen,

NOTE Confidence: 0.876331486153846

 $00:24:07.780 \longrightarrow 00:24:09.568$ you can say clearly that here's

NOTE Confidence: 0.876331486153846

 $00:24:09.568 \longrightarrow 00:24:12.032$ the cut edge of where we took this

NOTE Confidence: 0.876331486153846

 $00{:}24{:}12.032 \dashrightarrow 00{:}24{:}14.264$ tumor off this polyp off and there

NOTE Confidence: 0.876331486153846

 $00:24:14.264 \longrightarrow 00:24:16.049$ is no cancer at that.

NOTE Confidence: 0.876331486153846

 $00:24:16.050 \longrightarrow 00:24:18.122$ And then we looked at the individual

 $00:24:18.122 \longrightarrow 00:24:19.999$ cancer cells in the bulk of the

NOTE Confidence: 0.876331486153846

 $00:24:19.999 \longrightarrow 00:24:22.190$ polyp and we can see that they have

NOTE Confidence: 0.876331486153846

 $00:24:22.190 \longrightarrow 00:24:24.020$ certain features that are favorable

NOTE Confidence: 0.876331486153846

 $00:24:24.020 \longrightarrow 00:24:27.268$ then that may be all that patient needs.

NOTE Confidence: 0.876331486153846

 $00:24:27.270 \longrightarrow 00:24:28.138$ On the flip side,

NOTE Confidence: 0.876331486153846

 $00:24:28.138 \longrightarrow 00:24:29.223$ if there is tumor invasion,

NOTE Confidence: 0.876331486153846

 $00:24:29.230 \longrightarrow 00:24:30.515$ if there's high concerning features

NOTE Confidence: 0.876331486153846

 $00:24:30.515 \longrightarrow 00:24:32.575$ of the polyp in terms of what it

NOTE Confidence: 0.876331486153846

00:24:32.575 --> 00:24:33.785 looks like under the microscope,

NOTE Confidence: 0.876331486153846

 $00:24:33.790 \longrightarrow 00:24:36.086$ then that's something we're a segment of.

NOTE Confidence: 0.876331486153846

 $00{:}24{:}36.090 \dashrightarrow 00{:}24{:}38.478$ The colon needs to be removed,

NOTE Confidence: 0.876331486153846

00:24:38.480 --> 00:24:40.766 and that would require a typically,

NOTE Confidence: 0.876331486153846

 $00:24:40.770 \longrightarrow 00:24:42.804$ and in 2021 it would typically

NOTE Confidence: 0.876331486153846

00:24:42.804 --> 00:24:44.160 require mentally invasive surgery

NOTE Confidence: 0.876331486153846

 $00:24:44.218 \longrightarrow 00:24:46.170$ to remove a segment of the colon and

NOTE Confidence: 0.876331486153846

 $00:24:46.170 \longrightarrow 00:24:48.247$ the nodal bundle that's attached to it.

00:24:48.250 --> 00:24:50.847 To get that end staging for very

NOTE Confidence: 0.876331486153846 00:24:50.847 --> 00:24:51.589 early tumors,

NOTE Confidence: 0.876331486153846

00:24:51.590 --> 00:24:53.860 the risk of an end spread meaning

NOTE Confidence: 0.876331486153846

 $00:24:53.860 \longrightarrow 00:24:55.900$ a nodal spread is so low that for

NOTE Confidence: 0.876331486153846

 $00:24:55.960 \longrightarrow 00:24:57.592$ those very early tumors that we

NOTE Confidence: 0.876331486153846

 $00:24:57.592 \longrightarrow 00:24:59.268$ just took off. Instead, we're done.

NOTE Confidence: 0.876331486153846

00:24:59.268 --> 00:25:00.984 Those don't need that nodal bundle,

NOTE Confidence: 0.945040754285714

 $00:25:00.990 \longrightarrow 00:25:02.894$ which is where that justification comes from.

NOTE Confidence: 0.890972297368421

00:25:03.180 --> 00:25:04.740 So Speaking of burden,

NOTE Confidence: 0.890972297368421

 $00:25:04.740 \longrightarrow 00:25:07.549$ if you had a very small cancer

NOTE Confidence: 0.890972297368421

 $00:25:07.549 \longrightarrow 00:25:10.565$ such that it was just in a polyp,

NOTE Confidence: 0.890972297368421

 $00{:}25{:}10.570 \dashrightarrow 00{:}25{:}12.508$ do those patients still need the

NOTE Confidence: 0.890972297368421

 $00{:}25{:}12.508 \dashrightarrow 00{:}25{:}14.958$ scans of their chest in their abdomen

NOTE Confidence: 0.890972297368421

 $00:25:14.958 \longrightarrow 00:25:16.783$ to look for distant metastases?

NOTE Confidence: 0.890972297368421

 $00:25:16.790 \longrightarrow 00:25:18.170$ One would think that if

 $00:25:18.170 \longrightarrow 00:25:19.550$ the nodal burden is low,

NOTE Confidence: 0.890972297368421

 $00:25:19.550 \longrightarrow 00:25:20.930$ then the distant metastases

NOTE Confidence: 0.890972297368421

 $00:25:20.930 \longrightarrow 00:25:23.000$ burden should also be very low.

NOTE Confidence: 0.957109263

 $00:25:23.620 \longrightarrow 00:25:25.195$ I think it's certainly consideration

NOTE Confidence: 0.957109263

 $00:25:25.195 \longrightarrow 00:25:27.209$ this is one of those particularly

NOTE Confidence: 0.957109263

00:25:27.209 --> 00:25:28.965 controversial points and staging

NOTE Confidence: 0.957109263

 $00:25:28.965 \longrightarrow 00:25:32.159$ guidelines that has is up for discussion,

NOTE Confidence: 0.957109263

 $00:25:32.160 \longrightarrow 00:25:33.265$ and I think shared decision

NOTE Confidence: 0.957109263

00:25:33.265 --> 00:25:34.370 making does come into it.

NOTE Confidence: 0.957109263

 $00:25:34.370 \longrightarrow 00:25:36.435$ This is something that either that a

NOTE Confidence: 0.957109263

 $00{:}25{:}36.435 {\: -->\:} 00{:}25{:}37.883$ colorectal surgeon should probably involve

NOTE Confidence: 0.957109263

 $00:25:37.883 \longrightarrow 00:25:40.319$ with to talk to the patient about one on one,

NOTE Confidence: 0.957109263

 $00:25:40.320 \longrightarrow 00:25:43.911$ because there are very small risks up

NOTE Confidence: 0.957109263

 $00:25:43.911 \longrightarrow 00:25:47.677$ spread and that needs to be discussed.

NOTE Confidence: 0.957109263

00:25:47.680 --> 00:25:49.008 With the patient eventually,

NOTE Confidence: 0.957109263

 $00:25:49.008 \longrightarrow 00:25:51.000$ because those guidelines are in flux,

00:25:51.000 --> 00:25:53.140 and then if I can go back for one second,

NOTE Confidence: 0.957109263

 $00{:}25{:}53.140 \dashrightarrow 00{:}25{:}55.210$ I think you know we we talked a lot about

NOTE Confidence: 0.957109263

 $00:25:55.264 \longrightarrow 00:25:57.199$ the kind of you see a polyp in the colon,

NOTE Confidence: 0.957109263

 $00:25:57.200 \longrightarrow 00:25:58.240$ just to kind of clarify,

NOTE Confidence: 0.957109263

 $00:25:58.240 \longrightarrow 00:26:00.305$ one of the tricky parts about the

NOTE Confidence: 0.957109263

 $00:26:00.305 \longrightarrow 00:26:02.068$ anatomic specificity that we mentioned

NOTE Confidence: 0.957109263

 $00:26:02.068 \longrightarrow 00:26:03.863$ earlier was that colon cancer can

NOTE Confidence: 0.957109263

00:26:03.863 --> 00:26:05.480 be dealt with and more with less

NOTE Confidence: 0.957109263

 $00{:}26{:}05.534 \dashrightarrow 00{:}26{:}06.998$ the way that we just discussed.

NOTE Confidence: 0.957109263

 $00:26:07.000 \longrightarrow 00:26:09.415$ Whereas rectal cancer is a different bird,

NOTE Confidence: 0.957109263

 $00:26:09.420 \longrightarrow 00:26:11.220$ rectal cancer does make up about

NOTE Confidence: 0.957109263

 $00:26:11.220 \longrightarrow 00:26:13.148$ 30% of all colorectal cancer,

NOTE Confidence: 0.957109263

00:26:13.148 --> 00:26:15.590 and the decision making around how

NOTE Confidence: 0.957109263

 $00:26:15.658 \longrightarrow 00:26:18.100$ to address those tumors does differ.

NOTE Confidence: 0.89753308

 $00:26:18.560 \longrightarrow 00:26:20.330$ OK, tell us more about that.

00:26:20.330 --> 00:26:21.218 How does it differ?

NOTE Confidence: 0.87419022222222

 $00{:}26{:}22.050 \dashrightarrow 00{:}26{:}23.315$ So the interesting thing with

NOTE Confidence: 0.87419022222222

00:26:23.315 --> 00:26:24.327 rectal cancer is biologically,

NOTE Confidence: 0.87419022222222

 $00:26:24.330 \longrightarrow 00:26:25.758$ it's very similar to colon cancer.

NOTE Confidence: 0.87419022222222

 $00:26:25.760 \longrightarrow 00:26:27.391$ It looks very the same under the

NOTE Confidence: 0.87419022222222

 $00:26:27.391 \longrightarrow 00:26:28.627$ microscope and it's the same

NOTE Confidence: 0.87419022222222

 $00{:}26{:}28.627 \dashrightarrow 00{:}26{:}30.079$ kind of cell story that created

NOTE Confidence: 0.87419022222222

00:26:30.079 --> 00:26:31.468 those cancers in the first place,

NOTE Confidence: 0.874190222222222

00:26:31.470 --> 00:26:33.270 where rectal cancer does differ

NOTE Confidence: 0.87419022222222

 $00:26:33.270 \longrightarrow 00:26:35.070$ is that it's anatomically fixed,

NOTE Confidence: 0.87419022222222

00:26:35.070 --> 00:26:36.806 meaning the ***** is fixed in the pelvis,

NOTE Confidence: 0.87419022222222

 $00:26:36.810 \longrightarrow 00:26:39.000$ whereas the colon flops around.

NOTE Confidence: 0.87419022222222

 $00:26:39.000 \longrightarrow 00:26:42.116$ It's an incredibly powerful difference

NOTE Confidence: 0.874190222222222

 $00:26:42.116 \longrightarrow 00:26:44.174$ that becomes more so every day

NOTE Confidence: 0.87419022222222

 $00:26:44.174 \longrightarrow 00:26:46.584$ because we realize that we have more

NOTE Confidence: 0.87419022222222

 $00:26:46.584 \longrightarrow 00:26:48.244$ modalities or options for therapy

00:26:48.305 --> 00:26:50.195 that we can use for rectal cancer

NOTE Confidence: 0.87419022222222

 $00:26:50.195 \longrightarrow 00:26:51.954$ because of its anatomically fixed.

NOTE Confidence: 0.87419022222222

 $00:26:51.954 \longrightarrow 00:26:55.144$ Position what this means in 2021 is

NOTE Confidence: 0.87419022222222

 $00:26:55.144 \longrightarrow 00:26:57.616$ that many many rectal cancers need

NOTE Confidence: 0.87419022222222

00:26:57.616 --> 00:26:59.770 chemotherapy and radiation upfront,

NOTE Confidence: 0.874190222222222

 $00:26:59.770 \longrightarrow 00:27:01.230$ which is entirely different.

NOTE Confidence: 0.87419022222222

00:27:01.230 --> 00:27:03.121 Colon cancer, which if anything,

NOTE Confidence: 0.874190222222222

 $00:27:03.121 \longrightarrow 00:27:05.443$ only gets those options for therapy

NOTE Confidence: 0.87419022222222

00:27:05.443 --> 00:27:07.837 after the original tumor is removed.

NOTE Confidence: 0.87419022222222

 $00{:}27{:}07.840 \dashrightarrow 00{:}27{:}09.639$ Rectal cancer has been shown that it

NOTE Confidence: 0.874190222222222

00:27:09.639 --> 00:27:11.853 seems to do better if we give those

NOTE Confidence: 0.87419022222222

 $00:27:11.853 \longrightarrow 00:27:13.632$ modalities up front and then follow

NOTE Confidence: 0.87419022222222

 $00{:}27{:}13.632 \longrightarrow 00{:}27{:}14.956$ with surgery after considerable

NOTE Confidence: 0.87419022222222

 $00:27:14.956 \longrightarrow 00:27:16.961$ lead in period of often times,

NOTE Confidence: 0.87419022222222

 $00:27:16.961 \longrightarrow 00:27:19.007$ three to six months of chemo

 $00:27:19.007 \longrightarrow 00:27:19.689$ radiation therapy.

NOTE Confidence: 0.887424365

 $00{:}27{:}21.160 \to 00{:}27{:}22.660$ This brings up an interesting point.

NOTE Confidence: 0.887424365

 $00:27:22.660 \longrightarrow 00:27:25.859$ Oftentimes, here on the show we we

NOTE Confidence: 0.887424365

 $00:27:25.859 \longrightarrow 00:27:28.218$ talk about multidisciplinary care and

NOTE Confidence: 0.887424365

 $00:27:28.218 \longrightarrow 00:27:30.498$ we talk about personalized therapy.

NOTE Confidence: 0.887424365

 $00:27:30.500 \longrightarrow 00:27:33.296$ So how do you decide which

NOTE Confidence: 0.887424365

00:27:33.296 --> 00:27:34.694 patients need chemotherapy?

NOTE Confidence: 0.887424365

 $00:27:34.700 \longrightarrow 00:27:36.280$ Which patients need radiation?

NOTE Confidence: 0.887424365

 $00:27:36.280 \longrightarrow 00:27:39.070$ Which patients do well with surgery alone?

NOTE Confidence: 0.911012823333333

 $00:27:39.830 \longrightarrow 00:27:41.510$ It the multidisciplinary point

NOTE Confidence: 0.9110128233333333

 $00{:}27{:}41.510 \dashrightarrow 00{:}27{:}43.610$ that you mentioned is critical.

NOTE Confidence: 0.911012823333333

 $00:27:43.610 \longrightarrow 00:27:45.782$ It's getting increasingly complicated,

NOTE Confidence: 0.911012823333333

 $00:27:45.782 \longrightarrow 00:27:47.954$ particularly with advanced disease.

NOTE Confidence: 0.9110128233333333

00:27:47.960 --> 00:27:50.207 It's very hard to make these decisions

NOTE Confidence: 0.911012823333333

00:27:50.207 --> 00:27:51.670 without a colorectal surgeon,

NOTE Confidence: 0.911012823333333

 $00{:}27{:}51.670 \dashrightarrow 00{:}27{:}54.115$ medical on cologists and a number

 $00:27:54.115 \longrightarrow 00:27:56.071$ of others supporting positions

NOTE Confidence: 0.911012823333333

 $00:27:56.071 \longrightarrow 00:27:58.070$ from radiology pathology.

NOTE Confidence: 0.911012823333333

00:27:58.070 --> 00:27:59.408 Interventional radiology all

NOTE Confidence: 0.911012823333333

00:27:59.408 --> 00:28:01.638 getting together to talk about

NOTE Confidence: 0.911012823333333

00:28:01.638 --> 00:28:03.997 what's the best course of action?

NOTE Confidence: 0.911012823333333

 $00:28:04.000 \longrightarrow 00:28:05.644$ There are a couple sort of

NOTE Confidence: 0.911012823333333

 $00:28:05.644 \longrightarrow 00:28:07.090$ easier points to make here.

NOTE Confidence: 0.911012823333333

 $00:28:07.090 \longrightarrow 00:28:09.820$ I think that for colon cancer that's

NOTE Confidence: 0.911012823333333

 $00{:}28{:}09.820 \dashrightarrow 00{:}28{:}12.853$ early stage in the colon and not the

NOTE Confidence: 0.911012823333333

00:28:12.853 --> 00:28:14.986 ***** that's typically a surgery

NOTE Confidence: 0.911012823333333

 $00{:}28{:}14.986 \dashrightarrow 00{:}28{:}17.900$ first approach in most cases for things

NOTE Confidence: 0.911012823333333

 $00{:}28{:}17.900 \dashrightarrow 00{:}28{:}20.315$ that are in that for rectal cancer

NOTE Confidence: 0.9110128233333333

 $00{:}28{:}20.315 \dashrightarrow 00{:}28{:}22.888$ as well as advanced colon cancer,

NOTE Confidence: 0.911012823333333

 $00{:}28{:}22.890 \dashrightarrow 00{:}28{:}25.362$ it really does require everyone in the room

NOTE Confidence: 0.911012823333333

 $00:28:25.362 \longrightarrow 00:28:28.100$ to have that conversation about a patient.

00:28:28.100 --> 00:28:28.446 Ultimately,

NOTE Confidence: 0.911012823333333

 $00{:}28{:}28.446 \longrightarrow 00{:}28{:}30.522$ with the patient to see what's

NOTE Confidence: 0.911012823333333

 $00:28:30.522 \longrightarrow 00:28:32.470$ the best first line approach.

NOTE Confidence: 0.868071322

 $00:28:33.100 \longrightarrow 00:28:35.361$ Doctor Ira leads is an assistant professor

NOTE Confidence: 0.868071322

 $00:28:35.361 \longrightarrow 00:28:38.008$ of surgery at the Yale School of Medicine.

NOTE Confidence: 0.868071322

 $00:28:38.010 \longrightarrow 00:28:39.174$ If you have questions,

NOTE Confidence: 0.868071322

 $00:28:39.174 \longrightarrow 00:28:40.338$ the address is cancer.

NOTE Confidence: 0.868071322

00:28:40.340 --> 00:28:43.357 Answers at yale.edu and past editions of

NOTE Confidence: 0.868071322

 $00:28:43.357 \longrightarrow 00:28:46.404$ the program are available in audio and

NOTE Confidence: 0.868071322

 $00:28:46.404 \longrightarrow 00:28:47.975$ written form at yalecancercenter.org.

NOTE Confidence: 0.868071322

00:28:47.975 --> 00:28:50.495 We hope you'll join us next week to

NOTE Confidence: 0.868071322

 $00{:}28{:}50.495 \dashrightarrow 00{:}28{:}52.410$ learn more about the fight against

NOTE Confidence: 0.868071322

 $00{:}28{:}52.410 \dashrightarrow 00{:}28{:}53.960$ cancer here on Connecticut Public

NOTE Confidence: 0.868071322

 $00{:}28{:}54.010 \dashrightarrow 00{:}28{:}55.485$ radio funding for Yale Cancer

NOTE Confidence: 0.868071322

00:28:55.485 --> 00:28:56.960 Answers is provided by Smilow

NOTE Confidence: 0.868071322

 $00{:}28{:}56.960 \dashrightarrow 00{:}29{:}00.000$ Cancer Hospital and Astra Zeneca.