

Preventive Cancer Screenings Save Lives



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Breast cancer is the most common cancer among women in Wisconsin. Breast Cancer accounts for nearly one-third of all cancers diagnosed among women. Women are at a higher risk of developing breast cancer if they have family history, cancer genes, or history of breast cancer. Women with these risk factors may benefit from starting screening practices at a younger age and more often than those women without risk factors. The risk of developing breast cancer may be reduced by staying physically active, maintaining a healthy body weight, and limiting alcohol use. The majority of breast cancers can be treated successfully if detected early. Thirty five percent of all deaths could be prevented with regular screening.

Cervical cancer cases and death rates have been cut in half over the past thirty years. The primary cause of cervical cancer is due to an infection with certain types of Human Papilloma Virus (HPV). Women who begin having sex at an early age or who have had many sexual partners are at increased risk for HPV infection and cervical cancer. However, a woman may be infected with HPV even if she has had only one sexual partner. Cervical cancer begins in the cells lining the cervix. Normal cells slowly change into pre-cancer cells that can then turn into cancer. These cell changes can be detected by the Pap test and treated to prevent cancer. That is why screening tests give us a chance to prevent, detect, and successfully treat cervical cancer. Most women with advanced cervical cancer have not had a Pap test in the past five years. Women who have precancerous cells detected through Pap tests are nearly 100% likely to survive with proper evaluation, treatment, and follow-up. With the approved HPV vaccine, we are likely to see a further reduction in the number of cervical cancer cases.

Colorectal cancer is the second most common cancer diagnosed in men and women in state of Wisconsin. Risk factors that may aid in the development of colorectal cancer include being 50 years of age and older, history of colorectal polyps and/or chronic inflammatory bowel disease, a family history of colorectal cancer and/or polyps, and/or inherited genetic mutations, known as Lynch syndrome. Studies have also found that having Type II diabetes also puts you at a higher risk for developing colorectal cancer. Some risk factors that can be changed include being sedentary or not physically active, having a diet that is high in red or processed meat and low in fruits/vegetables, being obese, being a long-term smoker, and consuming alcohol. Screening tests that detect and remove precancerous polyps are the most reliable method of preventing colorectal cancer. Early stage colorectal cancer does not usually have symptoms. Screening is necessary to detect this cancer at its earliest stage. Although the number of people receiving a colorectal cancer screen is

Improving, colorectal cancer screening is not being done as often as Breast and Cervical cancer screening. Screening can result in the detection and removal of colorectal polyps before they become cancerous. Screening can also find colorectal cancer early, when treatment can be most effective. Survival from colorectal cancer is more than 90% when the cancer is diagnosed at the earliest stage. The survival rate is lower once the cancer has spread outside of the colon wall. People at a higher risk of colorectal cancer should begin screening before age 50 and should discuss their screening options with their healthcare provider.

Screening and Early Detection

Early detection of cancer through screening has been proven to reduce death from cancers of the breast, cervix, and colon. Screening refers to testing average risk adults who have no symptoms of the disease. Besides detecting cancer early, screening for colorectal or cervical cancers can remove the precancerous cells and prevent cancer altogether.

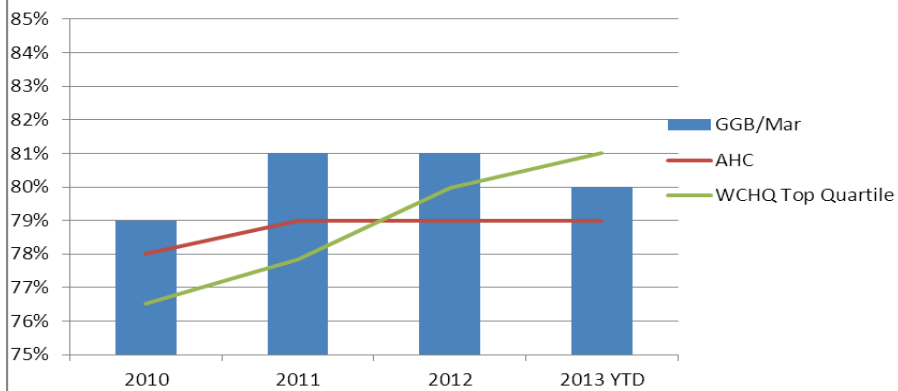
Following the recommended cancer screening schedule is an important step that goes along with healthy behaviors to reduce the risk of developing and dying from cancer. Aurora Health Care follows the US Preventative Services Task Force (USPSTF) guidelines for all three cancers discussed.

- **Breast:** A discussion of the risks and benefits of regular breast cancer screening should begin at age 40, and biannual screening to begin no later than 50. Mammogram at least every 2 years for women ages 50-74.
- **Cervical:** Pap smear (cytology) for women age 21 to 29 years every 3 years. Ages 30-65 years screen every 3 years with Pap (cytology) OR screen with a combination of cytology and HPV testing every 5 years if normal results.
- **Colorectal:** Screen men and women starting ages 50 through age 74 years for colorectal cancer using fecal occult blood testing every year, or sigmoidoscopy every 5 years, or colonoscopy every 10 years.

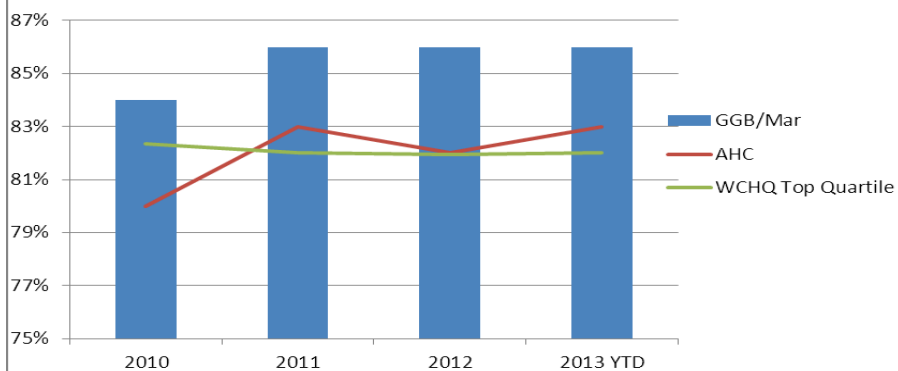
At Aurora we believe our patients deserve and expect the best care. This is why our Primary Care teams educate and offer these screening services to patients at every visit. Calling patients who are overdue on their screening is also an important step we do. If patients are unable to schedule these screens at their current visit, an appointment reminder can be placed to ensure these screens get scheduled. In addition, a new electronic health record was implemented to allow patients the means to schedule their own care needs and to help communicate with the care team at Aurora. The Electronic health record also alerts the care team when patients are due for screening and tracks the history for each patient. Specific to breast cancer, Aurora began using digital mammography at most of our sites. Compared to analog mammography, digital mammography can improve the patient experience because it is faster, uses less radiation, and is more sensitive in young women with dense breasts.

As a result of our efforts, we are proud to say that our Market and Aurora Health Care has proven to be leaders in preventing Breast, Cervical and Colorectal cancers in Wisconsin. This is evidenced by our screening rates shown in the graphs below.

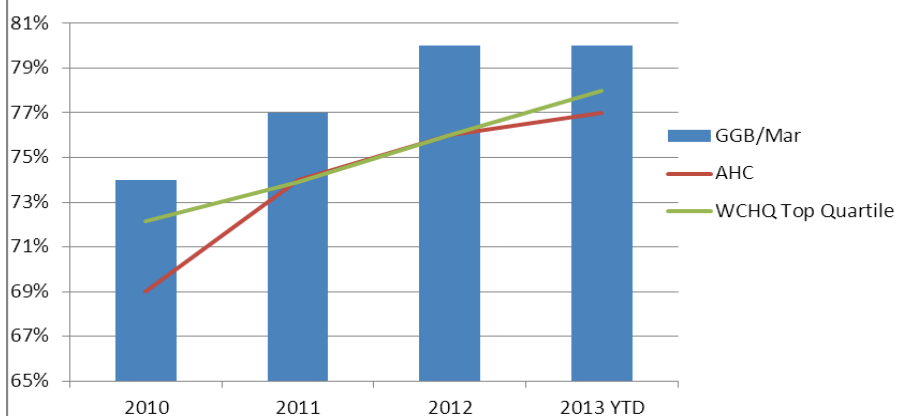
Breast Cancer Screening



Cervical Cancer Screening



Colorectal Cancer Screening



References

1. Wisconsin Cancer Facts and Figures 2013-14.
2. USPSTF Screening recommendations for Breast (2009), Cervical (2012), and Colorectal (2008) Cancers.
3. American Cancer Society: Cancer Prevention and Early Detection Facts and Figures 2013.