



Public Outcomes Report Cancer of Large Bowel Organ

2013



Submitted by Omar Majid, MD

Cancer of the large bowel organ is considered to be the third most common cancer in both men and women, as was cause of cancer related death. The Figure 1 below is an estimation of what is to be expected in the United States in 2014, for all common cancer types.

Estimated New Cases*

			Males	Females			
Prostate	233,000	27%			Breast	232,670	29%
Lung & bronchus	116,000	14%			Lung & bronchus	108,210	13%
Colorectum	71,830	8%			Colorectum	65,000	8%
Urinary bladder	56,390	7%			Uterine corpus	52,630	6%
Melanoma of the skin	43,890	5%			Thyroid	47,790	6%
Kidney & renal pelvis	39,140	5%			Non-Hodgkin lymphoma	32,530	4%
Non-Hodgkin lymphoma	38,270	4%			Melanoma of the skin	32,210	4%
Oral cavity & pharynx	30,220	4%			Kidney & renal pelvis	24,780	3%
Leukemia	30,100	4%			Pancreas	22,890	3%
Liver & intrahepatic bile duct	24,600	3%			Leukemia	22,280	3%
All Sites	855,220	100%	All Sites	810,320	100%		

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LMHS REGISTRY CASES

In Lima Memorial Health System (LMHS) tumor registry the observation in 2011 for cancer cases is:

Summary by Body System and Sex Report

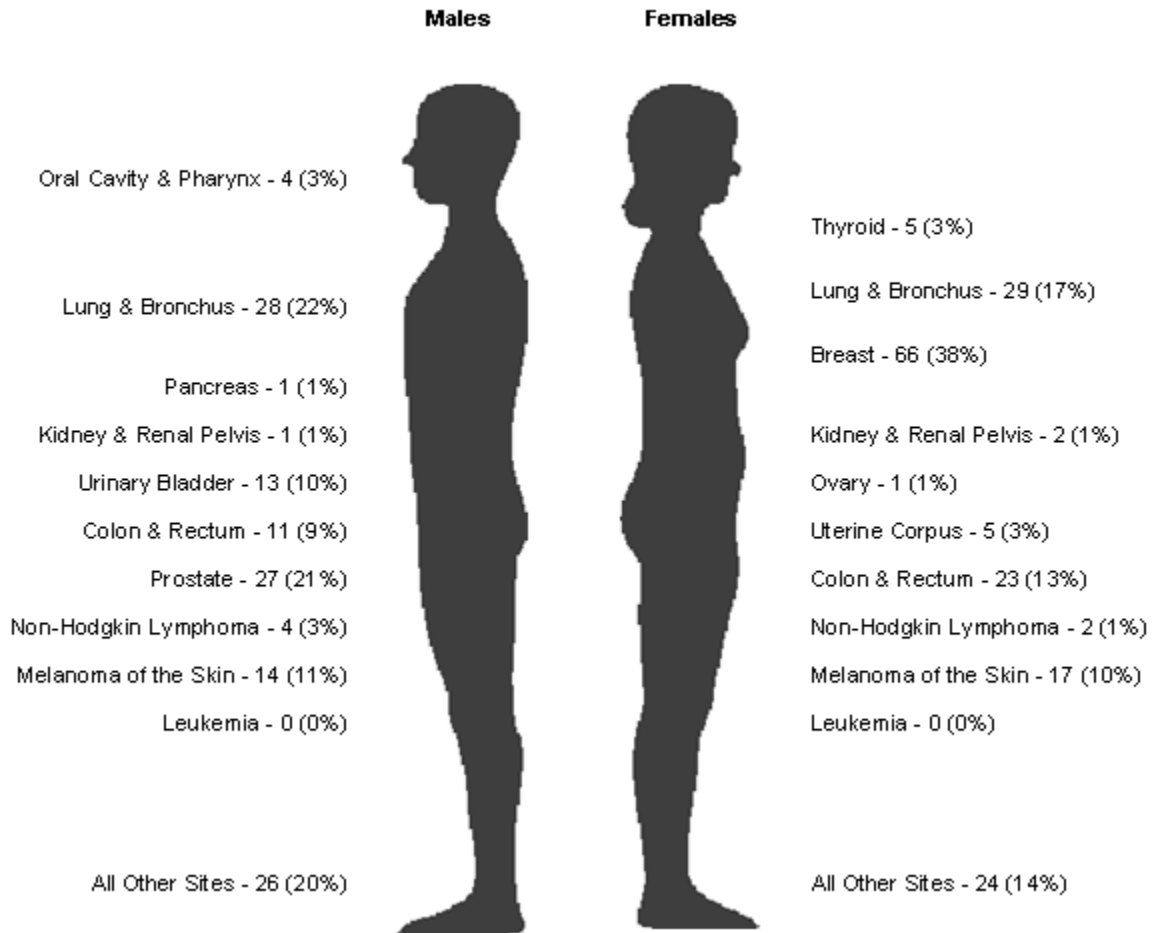


Figure 2. Lima Memorial Health System(LMHS) 2012

INCIDENCE OF CANCERS

Nationally the observance for incidence of cancer cases over the years 1975 thru 2010 is illustrated in Figure 3. There has been a steady decrease in Colorectal(large bowel) cases since 1985. A large part is attributed to education of the United States population to change dietary habits and screening programs to detect and manage pre-cancerous polyps.

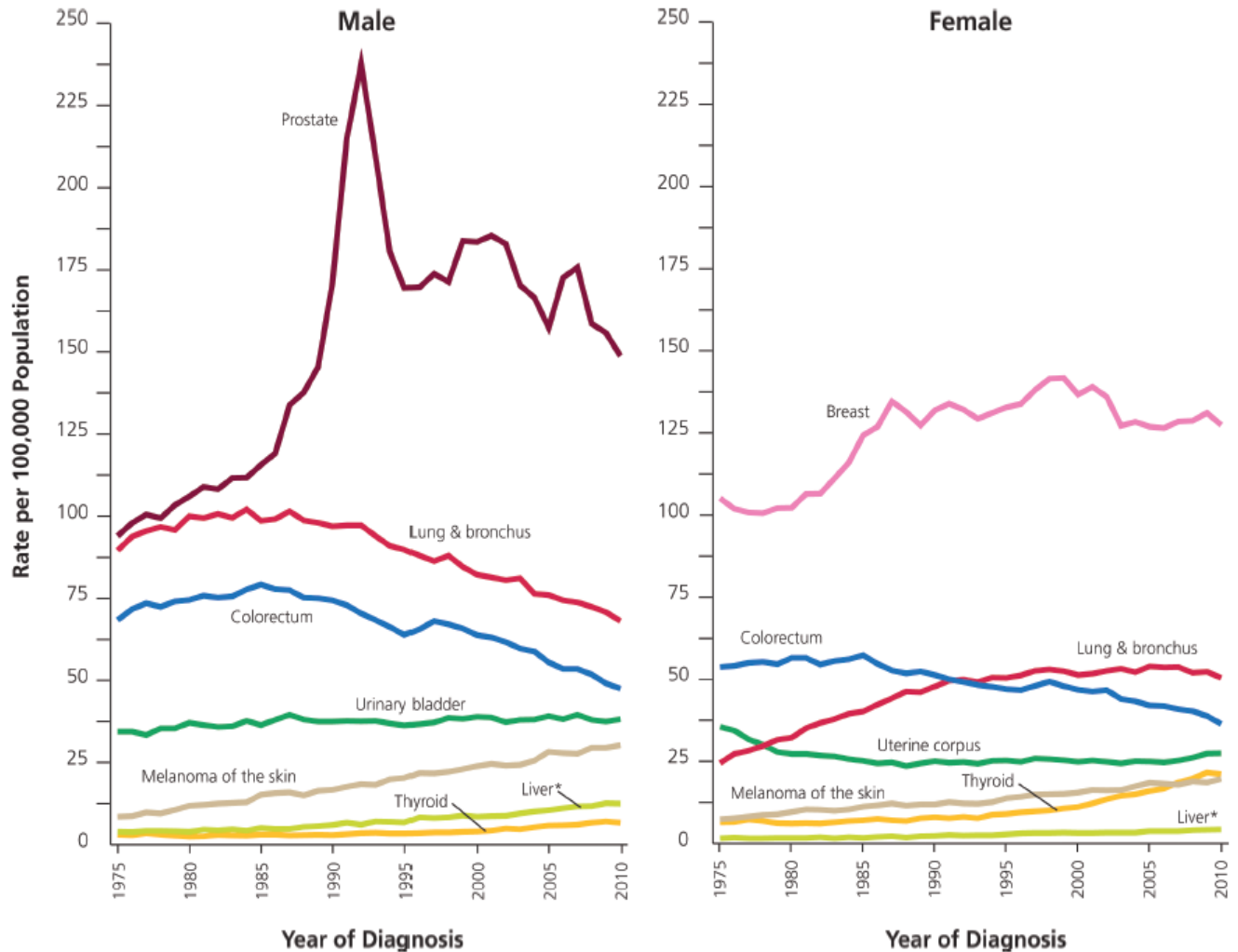


FIGURE 3. Trends in Incidence Rates for Selected Cancers by Sex, United States, 1975 to 2010.

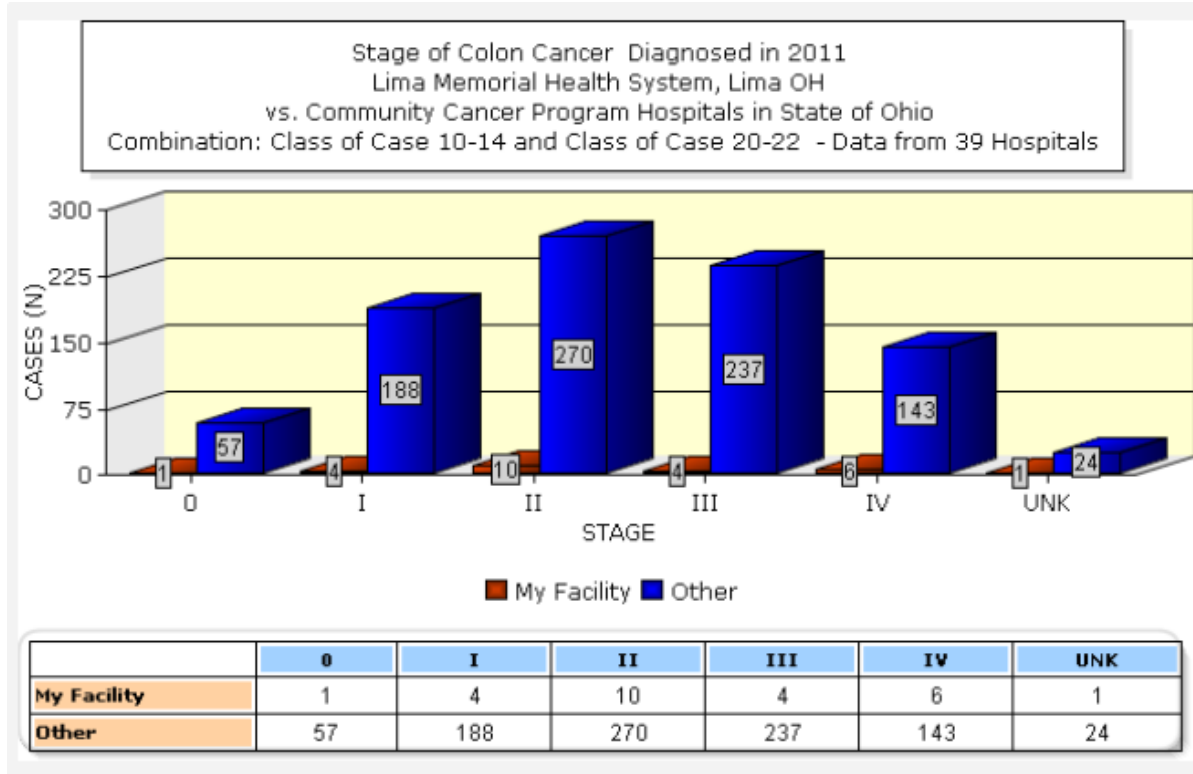
Rates are age adjusted to the 2000 US standard population and adjusted for delays in reporting. *Includes intrahepatic bile duct.

SCREENING: There are basically two main organizations that provide guidelines on screening for colon cancer. They are very similar. Detailed information can be found at www.cancer.org. In March 2008, the American Cancer Society, the U.S. Multi-Society Task Force on Colorectal Cancer, and the American College of Radiology released a consensus guideline for colorectal cancer screening. In October 2008 the U.S. Preventive Services Task Force (2) also updated their screening recommendations, complimenting each other. The various risk factors listed at www.cancer.org will require subjects to be more aggressively screened.

SYMPTOMS: Colon Cancer's constant symptom is blood in stool. So far 20-30 percent subjects will present with this. Most cases are picked up by screening methods.

TREATMENT: Treatment of colon cancer relies heavily on surgery. Resection of the affected bowel with ample margins with the taking of adequate number of local lymph nodes is the aim. Chemotherapy is the next mainstay of treatment, that is used according to the National Comprehensive Cancer Network (NCCN) guidelines. Radiation Therapy is used less than Surgery and Chemotherapy.

STAGE OF COLON CANCER: The next graph and table compares Staging of Colon cancer at LMHS to Ohio.



Stage of Colon Cancer Diagnosed in 2011
 Lima Memorial Health System, Lima OH
 vs. Community Cancer Program Hospitals in State of Ohio
 Combination: Class of Case 10-14 and Class of Case 20-22 - Data from 39 Hospitals

#	Stage	My (N)	Oth. (N)	My (%)	Oth. (%)
1.	0	1	57	3.85%	6.2%
2.	I	4	188	15.38%	20.46%
3.	II	10	270	38.46%	29.38%
4.	III	4	237	15.38%	25.79%
5.	IV	6	143	23.08%	15.56%
6.	UNK	1	24	3.85%	2.61%
Col. TOTAL		26	919	100%	100%

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STATUS OF COLON CASES SEEN AND MANAGED AT LMHS IN 2012:

Total analytic cases 31, of which pure colon were 29, of which 22 alive, 8 expired.