Prebiotics and probiotics Their health benefits

Your screening options Tests that can save your life

Beat the fear Talking to your doctor

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Mike McCready Pearl Jam's lead guitarist

"I was away from home and I didn't know what was happening. I was scared it was a death sentence."

BREAKING THE SI

Colon cancer survivor Sharon Osbourne gets serious about speaking up

The Cancer Institute at St. Joseph Medical Center

featuring

The Hodes Comprehensive Liver & Pancreas Center and The Colorectal Oncology Center

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The colon is one of those body parts we don't pay much attention to unless it's not working properly or something goes wrong, but it is a vital contributor to overall health.





Cause for concern

digestive system, the colon primarily responsible for the absorption of water and minerals and the elimination of waste. The colon plays important roles in immune function, acts as a barrier protecting us from toxins and harmful bacteria, and supports the growth of millions of friendly bacteria that further digest some types of food, produce vital nutrients and further contribute to healthy immune function. These are just some of the reasons why it is so important to be proactive in protecting this important organ.

Maintaining a healthy weight, staying active, choosing a diet high in fruits, vegetables, fiber and whole grains while avoiding too much red, processed meats and not smoking are key to maintaining colon health and also to preventing colon cancer. In fact, more than half of all colon cancers can be prevented by healthy

lifestyle choices alone. Screening for colorectal cancer is also important. Ninety-five percent of colon cancer cases can be cured if detected early, yet screening for colon cancer consistently lags behind screenings for other types of cancers. This is one reason why colon cancer remains a leading cause of cancer deaths in both men and women despite being one of the most preventable and curable forms of cancer.

A national voice

Join Get Your Guts in Gear - The Ride for

Susie's Cause was named for Susan Cohan, a courageous young woman who was committed to changing these statistics. It was her vision that by encouraging both prevention and early detection through innovative educational and outreach programs the Foundation would not only help spare others from unnecessary suffering and deaths from colon cancer, but would also be a trusted source of information, hope and support for those facing colon cancer, and for those



Executive Vice President, Susan Cohan Kasdas Colon Cancer Foundation

'... more than half of all colon cancers can be prevented by healthy lifestyle choices alone."

researching ways to more successfully treat this disease.

For the past six years Susie's Cause has established itself as the National Voice for the prevention, screening, and early detection treatment of colon cancer.

We are proud to provide to the dedicated readers of the Washington Post this comprehensive report on Colon Health. We are thankful to the many sponsors that graciously supported this extraordinary project. We appreciate the experts that have generously given their time and their knowledge; the families of precious loved ones lost and patients literally fighting for their lives; and to Susie for her divine guidance from above. With humility and pride, Susie's Cause dedicates this program to all of you.

Join with us in April for our Susie's Cause National Colon Cancer Screening Month. For more information about Susie's Cause, visit our website at www. coloncancerfoundation.org or call 410 244 1778.

WE RECOMMEND Delbert L. Chumley, M.D., **FACG** President,

College of Gastroenterology

"Don't let fear or embarrassment stop you from taking a simple test that could save your life."

Understanding IBD and IBS

detection and prevention.

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COLON HEALTH 3RD EDITION, MARCH 2011

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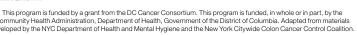
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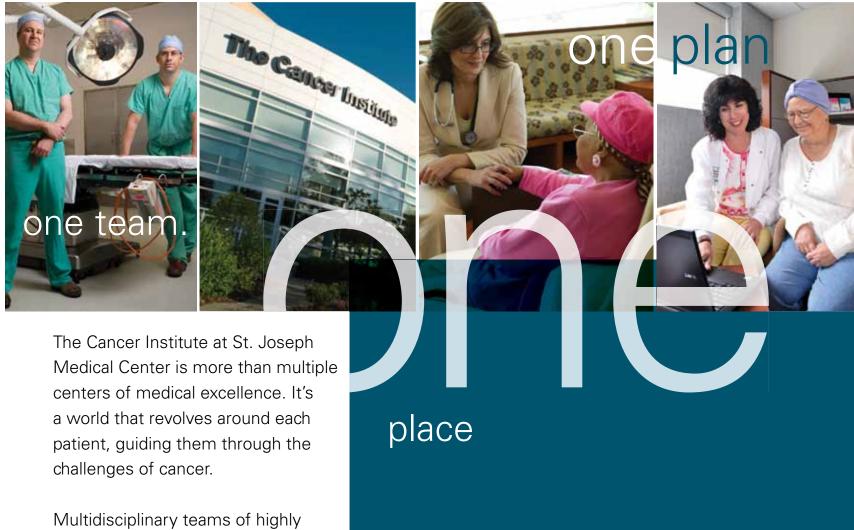








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St. Joseph is one of the 16 original pilot sites in the NCCCP network, which has grown to 30 hospitals nationwide. Additionally, St. Joseph's Cancer Institute was awarded a \$2.9 million stimulus grant through NCI to increase participation in clinical trials, increase minority outreach concerning clinical trials, and to expand the institute's nurse navigator staff.

To learn more about the Cancer Institute, visit www.StJosephTowson.com or call 410-337-1338.

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DON'T MISS



Marc Wexler and Sam Pugliese Founders, Be Active Brands, Inc., Jala All Natural Frozen Yogurt

Probiotic, a combination of Latin and Greek words meaning "for life," is the new "buzz" word for a healthier lifestyle.

Probiotics benefit the immune system, as well as the digestive system. These organisms, when administered in adequate amounts, confer multiple health benefits to its host.

There are four common types of probiotics: Bifidabacterium Lactis (supplies good bacteria to overrule the bad bacteria in the system), Lactobacillus Acidophilus (aids the decrease of certain diseases and gastrointestinal disorders while strengthening a weakened immune system), Streptococcus Thermophilus (promotes gastrointestinal health) and lastly, Lactobacillus Delbrueckii Bulgaricus (for lactose intolerance).

Good health starts with awareness. Understanding the various types of probiotics and their benefits are key in making important nutritional choices for digestive wellness and colon health.

Question: How does a rock star cope with chronic illness? **Answer:** By making his battle with Crohn's disease public.



Can't stop him

LEADER TO LEADER

When Pearl Jam lead guitarist Mike McCready steps on stage, his biggest fear isn't bungling a song. It's experiencing sudden, crippling pain, and the need to get to a bathroom quickly.

"Living with Crohn's Disease isn't easy," the Seattle-based McCready says candidly. "When you're in the middle of a set in front of 60,000 people and you have an episode, you just have to go right there. It's a nightmare."

Being proactive

McCready, 44, was diagnosed in the 1980's with what doctors then believed was ulcerative colitis.

based on his abdominal pain and bloody stools. "I was away from home and I

didn't know what was happening. I was scared it was a death sentence.'

Today McCready manages his Crohn's Disease through medication, diet and exercise, which he considers key for overall colon health. Sharing his story also helps him cope.

out after my wife convinced

"I came

me to stop complaining and be proactive. I realized a lot of folks had it

much worse." McCready admits keeppositive isn't always easy.

"I was so angry back when we opened for The Rolling Stones. That was huge, and right before we went on, I had an attack. I had to watch my bandmates perform the first song while I used the offstage port-o-potty."

Still, years later, McCready, remains upbeat.

"With Crohn's, I definitely eat better. I live a much healthier lifestyle, and that's very important."

CINDY RILEY

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INSPIRATION

Not a quiet fight

- Question: Why does a TV star speak out about colon cancer?
- **Answer:** Quite simply, to save lives.

LEADER TO LEADER

Sharon Osbourne admits she was never concerned about colon health until she battled cancer in 2002.

"I had never even heard of colon cancer," explains the talk show personality and one-time reality TV star. "I had no idea what the doctors were talking about. It never occurred to me that was the problem."

Today, Osbourne, 57, feels healthy and strong. But that wasn't the case leading up to her diagnosis.

"I would lie in bed with stomach pains, and was constantly tired. There was always an excuse. I



was working too hard, or I ate something bad. You have to listen to your body. It's trying to tell you something is wrong."

Helping spread the word

Osbourne underwent surgery and chemotherapy, which took its toll, even with in-home assis-

tance. After seeing patients waiting at bus stops just to get to their chemo treatments, the busy wife and mother began raising money to help those in need. Promoting colon cancer awareness became just as important.

"People don't discuss the colon because they think it's embarrassing. But it's the second biggest cancer, affecting men and women equally."

Though she's a bit lax at times, Osbourne recognizes the importance of maintaining a proper diet for colon health.

"I was a fast food junkie. I ate all the wrong things, like milkshakes, ice cream and butter. I mean, this one colon has to deal with all the rubbish we put in our bodies. We don't realize the damage done each day. We must do a better job taking care of ourselves."

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DON'T MISS!

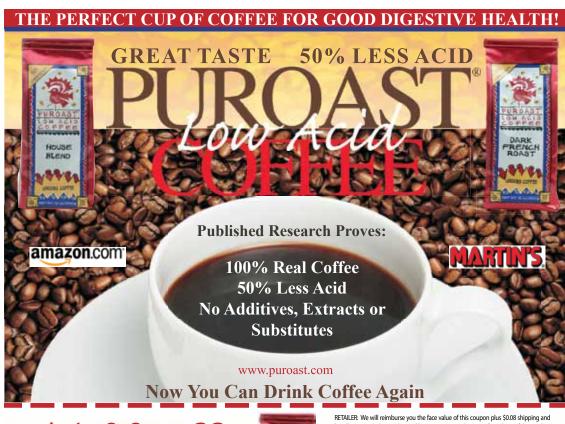
Prebiotics are fiber-like carbohydrates that escape digestion in the stomach and small intestine and reach the colon intact, where they are selectively fermented by specific bacteria.

Among the bacteria stimulated by prebiotics are bifidobacteria and lactobacilli, organisms that are thought to contribute to gut health. Prebiotics in the gut are analogous to fertilizer in one's garden—encouraging flowers, but not weeds, to grow and flourish. Accumulating evidence suggest that prebiotics, by increasing the proportion of bifidobacteria and lactobacilli in the intestinal tract, reduce gastrointestinal infections, reduce the incidence of atopic eczema



Bob HutkinsProfessor of Food Microbiology,
University of Nebraska

and other allergy symptoms, and increase calcium absorption. Although more studies are needed, changing the composition of the gut by prebiotics may even improve the health of individuals suffering from other chronic conditions, including inflammatory bowel disease, diabetes, obesity, and cancer.







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INSIGHT



QUESTIONS AND ANSWERS

What advice would you offer to someone to improve their colon health?

Eat properly, drink fluids and consume fresh fruits and vegetables on a regular basis. Exercise, use of Aspirin or Non-Steroidals (NSAIDs) can lower risk. Smoking and moderate consumption of alcohol could raise the risk.

What is the most exciting advancement around colon health that has surfaced today?

The fact that people even talk about the subject and are willing to get screened is huge. Screening is the most life saving instrument we have, in that it can prevent colon or rectal cancer by removing polyps before they become a cancer or can detect it early. New targeted chemotherapy agents improving survival rates is also exciting and is opening up an area of personalized treatment.

What are the warning signs people should look out for in determining an issue?

There are no early warning signs, that's why it's important to be screened. Late warning signs include a change in bowel habits (persistent constipation, diarrhea, for more



Howard K. Berg MD, FACS, FASCRS
St. Joseph's Medical Center

than three weeks), rectal bleeding, pencil thin stool, crampy abdominal discomfort. Anemia leading to lack of energy can be seen with right sided tumors, secondary to chronic blood loss.

What is something people typically don't often know about their colon health, but should be aware of?

Only about 25-30 percent of people that should be screened are getting screened. Those at higher risk would include people who have close relatives with colon or rectal cancer, or colon polyps especially if that was found when the affected person was less than 50 years of age. Also African Americans may develop polyps at an earlier age and should begin screening at age 45 even if average risk.

Understanding IBD and IBS

In the U.S. alone, there are more than 1.5 million people living with the devastating effects of IBD. New patients are diagnosed every day.

IBD has increased 50 percent among children in the past decade, affecting 150,000 children under the age of 18 nationwide.

But what exactly is IBD?

IBD, or inflammatory bowel diseases, is a group of digestive conditions that affect the gastrointestinal tract. The two major types of IBD are Crohn's disease and ulcerative colitis.

No one knows exactly what causes IBD, but one thing is for certain, these diseases are chronic conditions. This means that Crohn's and colitis are long-term illnesses and can be controlled with treatment, but not medically cured.

"I wish we had a treatment that was 100 percent effective and 100 percent safe. We do not," comments Corey Siegel, MD, of the Crohn's & Colitis Foundation's National Scientific Advisory Committee. "However, we have come an extremely long way in the last four to five years, and this is an exciting time for treating IBD."

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"We have come an extremely long way in the last four to five years, and this is an exciting time for treating IBD."

A difficult diagnosis

The symptoms of IBD can include diarrhea, abdominal pain, nausea, fever, loss of appetite, weight loss, fatigue and, at times, rectal bleeding. However, diagnosing IBD can be somewhat difficult since there are a number of other conditions that can produce similar symptoms.

Doctors have come to rely on various medical tests, such as blood tests, stool tests, and colonoscopies to rule out other potential causes like infection.

If you're experiencing similar abdominal symptoms but your doctors have ruled out IBD, it could be IBS, otherwise known as

irritable bowel syndrome. Many people are easily confused by the two types of gastrointestinal disorders—IBD and IBS—but there are distinctive differences.

IBS vs. IBD

First of all, IBS is not a disease, but better classified as a functional gastrointestinal disorder. The symptoms of IBS include abdominal pain and diarrhea, much like IBD, but IBS does not cause inflammation of the intestine, making it a less serious condition.

Despite the prevalence of IBD and other gastrointestinal disorders, many people have never heard of these maladies nor the help and support made available to them through groups, such as the Crohn's & Colitis Foundation of America (CCFA).

Enduring a gastrointestinal disorder can be difficult at times, but you don't have to do it alone. Visit the CCFA's website, www.ccfa. org, for more information and know that there are others out there who can relate to your situation.

* The information in this article is not meant to replace the advice of a trusted medical professional. If you or someone you know is suffering from IBD or IBS, talk to your physician immediately about treatment options.



↓ DON'T MISS!

"Key-hole" surgery or "minimally-invasive techniques", has taken advantage of the significant technologic advances in laparoscopic instruments.

In the field of colon and rectal surgery, safer and more effective approaches for removing diseased segments of the colon have been developed for treating benign and malignant diseases. Today, patients benefit from these advancements through smaller incisions with less postoperative pain, quicker patient recovery, shorter hospital stay, and fewer complications. Patients are able to return



Harry T. Papaconstantinou, M.D., FASCRS Chair, Public Relations Committee, American Society of Colon and Rectal Surgery

to work faster and resume their daily routine earlier than traditional open surgery.

Not all surgeons perform laparoscopic colectomy, and not all patients are candidates for these procedures. If you require surgery for a colon or bowel problem, make sure to ask your surgeon about your options, including laparoscopic-assisted colectomy. For more information, or to find a colon and rectal surgeon in your area, go to the ASCRS Website (www.fascrs.org).

Tough talk about a touchy subject

Nobody likes to talk about his or her colon. Sure, it's an uncomfortable subject. And that's one reason why more than 102,000 Americans will be diagnosed with colon cancer this year.

The tragedy about that statistic is colon cancer, the fourth most diagnosed cancer in America, is one of the easiest to prevent. Knowing the facts and taking action can save your life.

While no one knows why colon cancer develops, certain risk factors increase the odds. If you are over age 50, or have a family history of colon cancer, you are more likely to develop colon cancer yourself. A woman with a history

of cancer of the ovary, uterus or breast, or anyone who has had ulcerative colitis, Crohn's disease or Irritable Bowel Disorder (IBD) is at increased risk of also developing colorectal cancer.

So what can you do?

For starters, if you smoke, quit. Smoking increases your risk of developing polyps that become colon cancer. Studies also suggest that limiting alcohol use and eating a plant-based diet high in fiber, folate, calcium, and low in animal fat and getting plenty of exercise are also helpful. Lastly, but perhaps most importantly, talk to your doctor about getting screened. A simple and painless test can identify and remove polyps before they

can turn cancerous.

Your colon works hard for you, don't you think it's time to give it the attention it deserves? Talk to your doctor if there are changes in your bowel habits, or you notice anything abnormal with your digestive tract, such as having diarrhea or constipation, experience gas pain or cramping, feel tired all the time or lose weight for no apparent reason. Talking open and honestly with your doctor allows you to take an active role in your colon health. It's a simple conversation that could save your life.

LYNETTE SUMMERILL

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INSIGHT

Colorectal cancer, second only to lung cancer as the leading cause of cancer deaths in the United States, **affects men and women equally.**

The power of prevention





Delbert L. Chumley, M.D., FACG President, American College of Gastroenterology

Endo-Surgery

Few Americans know that colorectal cancer can be prevented—not just detected—through screening tests.

Research indicates that colorectal cancer arises from pre-cancerous growths or polyps that grow in the colon. When detected early, polyps can be removed, preventing the development of colorectal cancer. That is what makes colonoscopy such a powerful prevention strategy.

Time to speak up

Talk to your doctor about the screening test that is right for you. The American College of Gastroenterology's official 2009 screen-

ing guidelines distinguish between tests that prevent colorectal cancer and tests that detect colorectal cancer. The ACG recommends colonoscopy as the preferred cancer prevention strategy.

For African Americans, who tend to be diagnosed with colorectal cancer at younger ages than whites, and who experience decreased survival compared with whites, our organization recommends colorectal cancer screening beginning at age 45, rather than at age 50 for average risk patients.

Remember, don't let fear or embarrassment stop you from taking a simple test that could save your life. If you won't do it for yourself, do it for the ones who love you.

To learn more about the benefits of colorectal cancer screening, visit www.acg.gi.org.

The content in this independent supplement was not reviewed by Dr. Chumley. Dr. Chumley and the American College of Gastroenterology do not endorse any of the advertisers appearing within this independent supplement or the companies mentioned in the editorial sections. Dr. Chumley received no compensation for writing this article.

WHAT ARE MY SCREENING OPTIONS?

Colonoscopy

Colonoscopy every 10 years is the preferred colorectal cancer prevention test. For normal risk individuals, the ACG recommends colonoscopy beginning at age 50, and age 45 for African Americans.

Fecal Immunochemical Test

Annual fecal immunochemical testing (FIT) is a relatively new test that detects hidden blood in the stool. If results are positive, a

colonoscopy is performed.

CT Colonography every five years

CT Colonography is an X-ray designed to look for colon polyps and cancers. CTC every five years is an alternative to colonoscopy for patients who decline colonoscopy. If polyps are detected, a regular colonoscopy is required to remove these pre-cancerous growths. CTC is reliable in detecting polyps larger than one cen-

timeter in size. Smaller polyps, which constitute 80 percent of growths in the colon, are typically found through colonoscopy.

Alternative tests

- Flexible Sigmoidoscopy every five to 10 years
- Annual Hemoccult® Sensa®Fecal DNA Testing every three
- Years

Source: American College of Gastroenterology 2009 Colorectal Cancer Screening Guideline

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