

Unpleasant procedure becomes a little less so

Virtual screenings can allow patients to bypass invasive colonoscopies

BY HIRAN RATNAYAKE • THE NEWS JOURNAL • NOVEMBER 18, 2008



Dr. Mark Baumel is CEO of Colon Health Centers of America

John Sentman knew he needed a colorectal cancer screening. He's 56, and a colonoscopy is recommended for anyone older than 50. But even though the procedure was covered by his insurance, he continued to put it off.

"It was just the hassle of getting it," said Sentman, who lives in Mill Creek. "The whole procedure didn't sound like something I wanted to do."

Many patients avoid screenings for obvious reasons. A traditional colonoscopy involves snaking a narrow tube through the patient's large intestine, often while sedated. Preparing for the procedure is also an unpleasant experience, since the patient is required to fast and imbibe nasty solutions to cleanse the bowel.

A virtual colonoscopy is a noninvasive and cheaper alternative. But if the patient undergoing one is found to have a suspicious polyp in the intestine, he must then get a traditional colonoscopy --

and endure the same prep a second time.

Then Sentman learned of a new screening process now available in Delaware. At the Colon Health Center of Delaware in Newark, a patient can get a virtual colonoscopy and, if necessary, a traditional colonoscopy at a nearby gastroenterological practice the same day. That way the patient doesn't have to endure a second bowel prep.

"The whole idea is that if they are clean after the virtual colonoscopy, they can go home," said Dr. Mark Baumel, CEO of Colon Health Centers of America and head of the local practice. "If they need to get a polyp removed, they can get it removed immediately."

More practices nationwide are acquiring the imaging and endoscopy capabilities needed to provide this kind of service, said Dr. Joel V. Brill, chair of the Practice Management & Economics Committee for the American Gastroenterological Association.

"Patients want convenience and they want excellence," he said. "With this, you not only get the diagnosis but you can also get the procedure if you need it."

Integrating the procedures

Gastroenterologists perform traditional colonoscopies. But it is radiologists who specialize in reading virtual colonoscopies, which range from \$500 to \$1,500 -- about half the cost of traditional colonoscopies.

"I knew that virtual colonoscopies were going to be a big disruption that could impact their work," said Baumel, former chief medical officer with Mercy Health System in Philadelphia who has consulted with gastroenterologists. "Or it could be a big benefit for them if they could just put the whole thing together. Gastroenterologists needed the solution that would be the best for them."

The solution, he said, was an integrated screening approach. Baumel opened the first Colon Health Center in Delaware, a partnership with Mid-Atlantic GI Consultants, because Blue Cross Blue Shield of Delaware is one of few health insurance plans covering virtual colonoscopies. Baumel hopes to open more centers around the region.

In Delaware, colorectal cancer was the second-leading cause of cancer-related deaths, killing 828 people between 2000 and 2004, according to the most recent statistics. Colon cancer is also one of the most treatable cancers if it's caught early. But about 40 percent of



Kathy Garrett, CT and radiology technologist, operates the computer imaging equipment.

local Blue Cross members who are candidates for colorectal screenings haven't received them, said Dr. Paul Kaplan, the company's chief medical officer.

Blue Cross Blue Shield of Delaware is conducting a pilot study to see if coverage of virtual colonoscopies boosts the number of people who get screened.

"I think this integrated approach will definitely make it more acceptable to people," Kaplan said. "The prep is the hardest part, and the last thing you want to do is put more barriers in front of people."

To further appeal to patients, Colon Health Centers of America hired decorator M. Yurick Design to create an aesthetic interior that resembles a spa. In the lobby of the Colon Health Center in Newark, a trickling wall fountain is surrounded by shimmering wallpaper and dim amber lights. A 52-inch flat-screen TV occupies another wall decorated in soft pastel colors, and tropical plants dot the floors.

Same-day follow-up

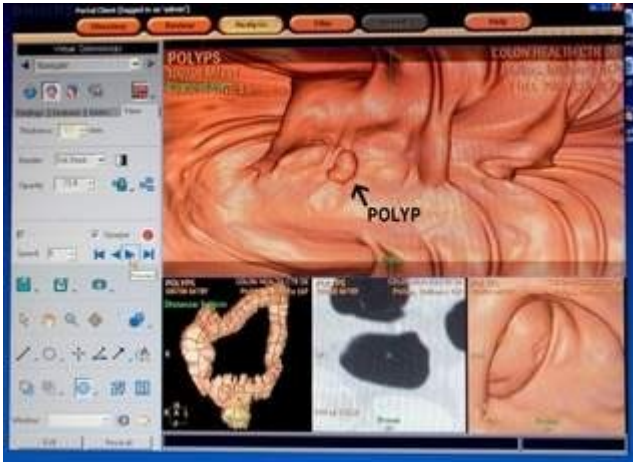
Sentman went for his screening at the Colon Health Center of Delaware last month. A computed tomography machine took hundreds of images of his colon during the virtual colonoscopy. The electronic images were then immediately sent to radiologists in Ohio who examined them for anything suspicious.

Sentman said he waited just an hour before getting the results. He spent the time watching TV and surfing the Web on his laptop computer in a private booth.

When the results arrived, he was found to have a suspicious thickening of the wall of his large intestine. So, a couple hours later, that thickening was biopsied to test for cancer during a traditional colonoscopy at Mid-Atlantic GI Consultants, a half-mile away.

Each day, the center keeps two slots open for patients who may need a same-day traditional colonoscopy. So far 35 of the 250 patients who have been screened at the Colon Health Center have been sent to Mid-Atlantic GI Consultants the same day for follow up.

Sentman was glad he was able to avoid a second bowel prep. To ready himself for the screening, he had to fast for 24 hours and consume two solutions of magnesium citrate and laxative tablets and one solution of barium sulfate and iodine. Not only do the solutions taste unpleasant, but they cause frequent diarrhea which helps clean out the colon, giving radiologists and gastroenterologists a clear view.



The Colon Health Center of Delaware offers noninvasive virtual colonoscopies. If a polyp is found during the screening, the patient is sent to Mid-Atlantic GI Consultants, about a half-mile away, for a traditional colonoscopy.

"If you're trying to minimize costs with health care, how much more expensive is it going to be if someone doesn't get it done and ends up with colon cancer?" said Sentman, whose biopsy came back negative for cancer. "Then you got thousands and thousands of dollars you're going to spend. So this is a good way to reach people like myself who are leery of a colonoscopy."

Research offers validation

The U.S. Preventive Services Task Force recommends colorectal cancer screenings every 10 years for patients between the ages of 50 and 75. But it has not recommended virtual colonoscopies, concluding that the evidence is insufficient to assess the benefits and harms of such screenings.

Medicare doesn't cover virtual colonoscopies. But if that changes, insurers will likely follow suit. "If Medicare covers it, that certainly produces pressure on the commercial insurers," said Brill, also chief medical officer of a medical management company in Phoenix.

Proponents of virtual colonoscopies say there's an increasing amount of research validating the effectiveness of the screenings. Two medical studies on the procedure were published in the September issue of the *New England Journal of Medicine*. One study found that virtual colonoscopies are as effective in detecting precancerous growths as traditional colonoscopies. The other study involved almost 1,300 patients who had tested negative for growths through virtual colonoscopies. It found that, five years later, none of those patients had developed colorectal cancer. Virtual colonoscopy has been available for roughly 15 years.

Since his experience, Sentman's aversion of colorectal cancer screenings has vanished.

"I've told several people that they ought to get it done," he said.