## Site-Specific Report

## **Colorectal Cancer**

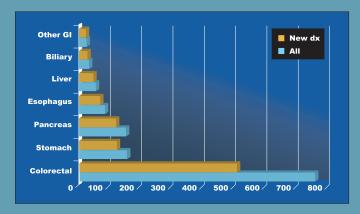
Stony Brook's Cancer Care Program has selected colorectal cancer as its annual site-specific report. Colon and rectal cancer affect approximately 150,000 Americans each year. Incidence rates have declined marginally in the past five years, yet colorectal cancer remains the third most common cancer in both men and women. Understanding the causes of colon cancer has increased tremendously, with a consensus that screening recommendations have contributed to improvements in survival. It is well established that adenomatous polyps forming in the colon or rectum if left untreated give rise to a form of cancer known as adenocarcinoma. Colon cancer increases with age, with a significant increase after the fifth decade of life. Increased awareness about prevention, detection, screenings and polyp removal are thought to play a role in the decline of the progression of polyps to invasive cancers.

Stony Brook's specialists provide prevention, diagnostic, treatment and follow-up programs for patients with colorectal and other gastrointestinal (GI) cancers, such as tumors originating in the esophagus, stomach, pancreas, liver and biliary tract. Treatment modalities include surgery, radiation therapy and chemotherapy, used alone or in combination depending on the extent of the disease. Treatment planning includes complete and accurate staging of the extent of the disease. Location of the tumor is also a factor in determining treatment. Surgery is the most common treatment for early-stage colorectal cancer. Patients whose cancer has deeply penetrated the bowel or has involved the regional lymph nodes may receive additional treatment. New methods of chemotherapy and radiation therapy developed through clinical trial research have demonstrated more effective response rates in these patients. With early diagnosis and improved treatment, the overall five-year survival rate for persons with colorectal cancer is now 62 percent.

## Colorectal Cancer Statistics

The following illustrates Stony Brook University Hospital's experience with colorectal cases from 1999 to 2003 and compares the data with the National Cancer Data Base and the National Institutes of Health SEER data.

## Gastrointestinal cancers by primary site seen at Stony Brook University Hospital from 1999 to 2003



Age group at diagnosis in patients presenting with colorectal cancer at Stony Brook University Hospital from 1999 to 2003



Treatment modalities utilized in colon and rectal cancer at Stony Brook University Hospital 1999 to 2003 vs. National Cancer Data Base 2001

Treatment	SBUH	NCDB
Surgery only	37%□	59%
Surgery and Chemotherapy	24%	19%
Surgery, Radiation, Chemotherapy	20%□	7%
Surgery and Radiation	2%	1%
Radiation and Chemotherapy	4%□	3%
Chemotherapy only	3%□	2%
No treatment in 4 months	10%□	9%