Screening Colonoscopy: Your Gut Will Thank You for It

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Introduction

- According to American Cancer Society, colorectal cancer is the third most diagnosed cancer and the second most common cause of cancer-related death in the United States.
- Over the last two decades, the rates of colorectal cancer in the population aged 45-50 has increased by 1.3% and 2.3% per year. (Levy, Thelin, and Da Silva, 2023).
- The recommended age for screening colonoscopy has been lowered from 50 to 45 because colorectal cancer and colorectal cancer-related deaths are on the rise among people under 50 (Bartosch, 2021).
- Colorectal cancer rates have increased 51% since 1994 for people under 50 (Bartosch, 2021).
- It has been noted that patients may miss the window of opportunity for detecting colorectal cancer early due to extensive waiting periods for consultations from a GI physician.

Objective

- Develop, implement, and maintain an evidenced-based colorectal cancer screening program with improved accessibility for patients.
- Review the impact of the Advocate South Suburban Hospital’s DASC program during 2021, 2022, and through July 2023.

Approach

- South Suburban Hospital gastroenterology, anesthesia and nursing collaborated to develop evidence-based guidelines for the Direct Access Screening Colonoscopy (DASC) program.
- This team undertook a review of current literature regarding screening colonoscopy.
- DASC program guidelines are consistent with recommendations from the US Preventive Services Task Force, including the direction that all adults 45 years or older should be offered screening colonoscopies, even in the absence of risk factors.

Results

- The total number of DASC cases completed has increased annually, with projections for 2023 to near 2000 completed cases.
- Total cases completed in the 45-50 age group has doubled from 2021 to July 2023.
- Eighty-five percent of the 45-50 age group is only an average risk for colon cancer.
- Fifty percent of the 45-50 age group at average risk was positive for polyps.
- On average, 50% of the total 45-50 age group has been positive for polyps.
- The one malignancy found in 2023 was in the 45-50 age group.
- One of the eight malignancies found in 2021 was in the 45-50 age group.

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<thead>
<tr>
<th></th>
<th>2021</th>
<th>2022</th>
<th>2023 July</th>
</tr>
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<tbody>
<tr>
<td>Total DASC Complete</td>
<td>1324</td>
<td>1500</td>
<td>1050</td>
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<tr>
<td>DASC Complete Age 45-50</td>
<td>128</td>
<td>250</td>
<td>267</td>
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<tr>
<td>Total Polyp Positive</td>
<td>880</td>
<td>904</td>
<td>604</td>
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<tr>
<td>Polyp Positive Age 45-50</td>
<td>71</td>
<td>115</td>
<td>126</td>
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<td>Advanced GI/Surgeon/Oncology/Genetics Referral</td>
<td>20</td>
<td>16</td>
<td>12</td>
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<tr>
<td>Malignancy</td>
<td>8</td>
<td>3</td>
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</tbody>
</table>

Discussion

- An interprofessional team of gastroenterologists, anesthesiologists, and nurses collaborated to improve patient access to screening colonoscopy.
- The number of patients participating in the DASC program has increased from 2021 to 2022, with at least 60% of patients having precancerous polyps removed.
- Collaboration within the DASC program has produced a measurable improvement to patient access to screening colonoscopy and timely intervention.

Implications for Practice

- Providing accurate education to nursing staff regarding the prevalence of colorectal cancer, recommended timing for colorectal screenings, and the availability of the DASC program can have a direct and positive impact on personal health and community health.
- While data collection continues in 2023, further analysis of the data can be done, focusing on more demographic data and potential reasons for the increase in colorectal cancer rates in the 45-50 age group.

Acknowledgements

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