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CCM NEWSLETTER

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Flu Season and Colorectal Cancer



Make Way COVID-19, The Flu Is Coming

Talk of COVID-19 dominated our spring and summer, but an old familiar friend has been waiting to make its appearance; THE FLU! Just like COVID-19, the flu is a contagious respiratory illness, which, although around all year long, is most active in the fall and winter season. Flu cases start to increase in October, peak between December and February, and then trail off as late as May. The flu can cause mild to severe illness, but young kids, older adults, and people with certain health conditions are at increased risk for severe complications. Around

70-85% of flu related deaths are in people aged 65 or older. Also, 50-70% of seasonal flu- related hospitalizations happen in people who are 65 or older. ¹So, if you are asking yourself- “Do I really need a flu shot this year?” The answer should be “YES!” Here are a couple quick points about the vaccine:

- Everyone 6 months and older should get the vaccine each year by the end of the October
- The vaccine is updated every year to keep up with the changing strains
- Immunity goes away in 1 year -- that’s why you have to get the vaccine EVERY year
- The vaccine starts to work 2 weeks AFTER you get it

You may be thinking, “But, I don’t need the flu shot! The year that I get it- I get the flu- and the years I don’t get it- I’m fine!” I hear you, but think about this: Odds are you put on a seatbelt when you get in a car right? Well, think of the vaccines as a seatbelt, but even better- because this seatbelt could decrease your chances of getting into a crash AND protect you if you do crash! Studies have shown that getting the flu vaccine is effective in decreasing the risk of medical visits and hospitalizations from the flu. The clinic received their first stock of the flu vaccine on September 14th. We sincerely hope you decided to take this next step in protecting yourself this season and every season.

¹ <https://www.cdc.gov/flu/highrisk/65over.htm>

Colorectal Cancer Awareness



You may hear more about colorectal cancer in popular news due to the unfortunate death of actor Chadwick Boseman. Boseman was best known for his recent role as Black Panther, the iconic superhero from the Marvel movie. He died from colon cancer at the age of 43.

Colorectal cancer is the 2nd leading cause of cancer deaths in the United States.² More than half of colon cancer is caused by lifestyle factors: smoking, being overweight or obese, increased use of alcohol, red or processed meat, not eating enough fiber or calcium, and being physically inactive. It is characteristically a “slow growing” cancer, which means that screening is key for early detection and prevention! While the American Cancer Society has recommended screening to start at age 45, there isn’t enough good evidence yet about the outcomes of screening average risk adults age 45-49.³ Therefore, the American Academy of Family Physicians have elected to continue to follow the recommendations put forth by the American College of Physicians. They recommend routine screening for average risk adults ages 50-75. Below are the current screening recommendations:

Screening	Interval
Colonoscopy (<i>requires bowel prep and anesthesia</i>)	Every 10 years
Flex Sigmoidoscopy (<i>requires bowel prep and possibly anesthesia</i>) AND FIT (<i>one stool sample</i>)	Flex Sigmoidoscopy- every 10 years + FIT- every 2 years
FIT - tests stool for hidden blood (<i>stool sample, no bowel prep</i>)	Every 2 years
Guaiaac Fecal Occult Blood Test (<i>stool sample, no bowel prep</i>)	Every 2 years

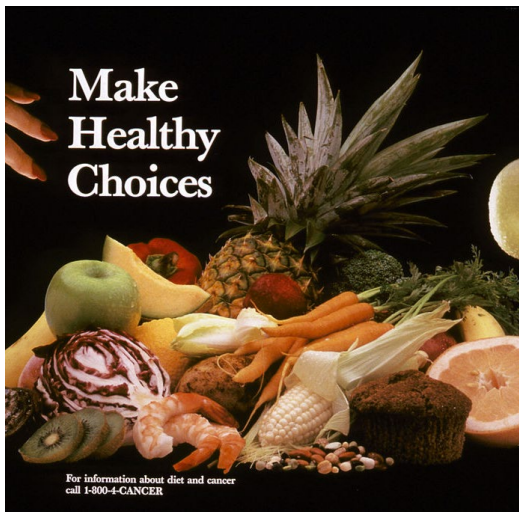
Other ways of screening are NOT recommended due to limited evidence of proven benefit.

² *Am Fam Physician*. 2019 Jan 15;99(2):129-130.

³ *Am Fam Physician*. 2020 Aug 15;102(4):253-254.

It's important to note that these recommendations do NOT apply to people with a history of polyps, colorectal cancer, inflammatory bowel disease (IBD) or other inherited syndromes that would increase the risk for colorectal cancer.

Low dose aspirin has recently been discovered to play a role in the prevention of colon cancer- BUT- if taken long term-- like 10-20 years.⁴ However, because the effect of aspirin on colon cancer kicks in 10-20 years down the road, patients over the age of 60 with a future life expectancy of less than 10 years may want to talk to a physician to see if starting aspirin is the right decision.



What can you do to reduce your risk of colon cancer and illness? The tried and true methods won't lead you astray- eat in moderation, but mostly healthy foods; limit alcohol; avoid tobacco; move your body; wash your hands; cover your coughs; and avoid large crowds.

Modern medicine is a wonderful thing! Innovative and intelligent people have come up with ways to help us prevent cancer and vaccines to protect us from contagious diseases. Please take advantage of being alive during this amazing era of healthcare- schedule your screenings, get your vaccines, and put your health first!

We are open and operating our usual business hours. We welcome you to connect with us either in the clinic or via telemedicine visits.



Dr. Tanner is a board certified Family Medicine physician. She is a contributing writer for the monthly CCM newsletters and consultant for the clinic's CCM program. She resides in Frisco, Texas with her husband and 3 children.

⁴ *Am Fam Physician*. 2019 Nov 1;100(9):online.