

Maryland Colorectal Cancer (CRC) Program Information
 Maryland Department of Health and Mental Hygiene
 Cancer Prevention, Education, Screening and Treatment Program (CPEST)
 Cigarette Restitution Fund Program (CRFP), Center for Cancer Surveillance and Control

Report Period: July 1, 2000 – December 31, 2008

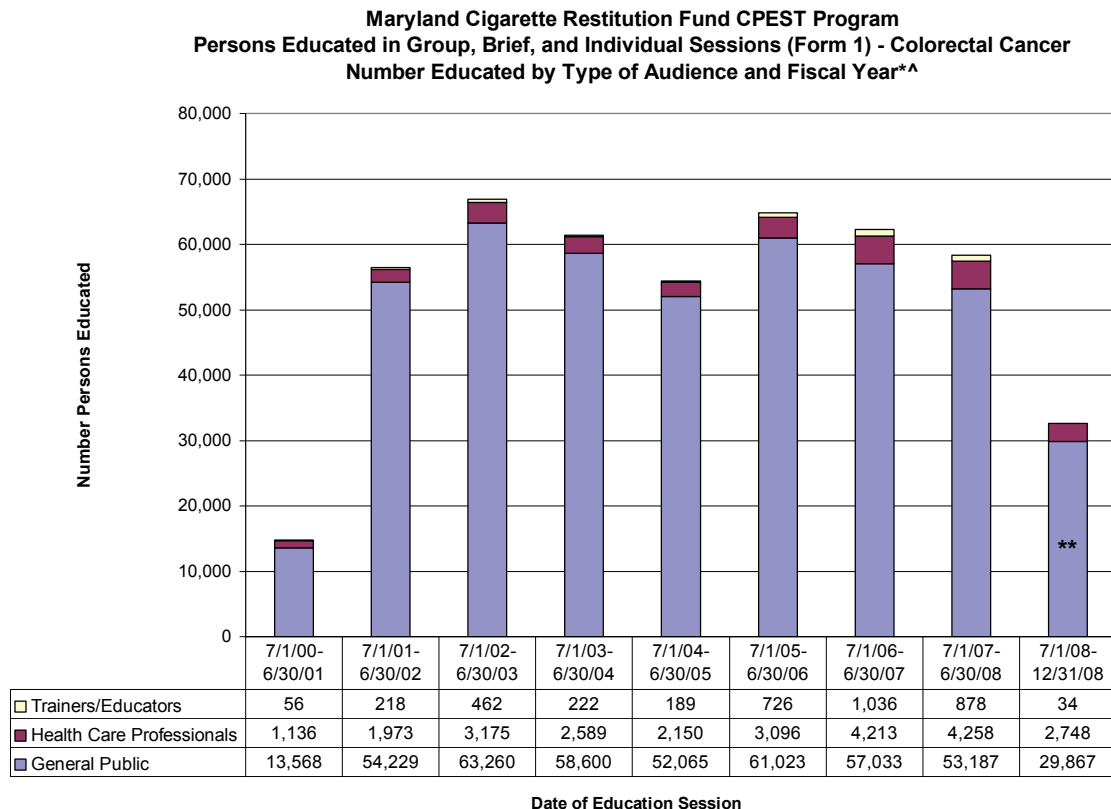
Overall Goals: Decrease cancer mortality; Reduce disparities among minorities

Local Public Health Activities

- Form Local Community Health Coalitions
- Write Local Comprehensive Cancer Plans
- Implement Plans:
 - Educate the population
 - Screen those with low income and un- or under-insured
 - Treat or “link” to treatment

Education

Statewide Number Educated about CRC—July 1, 2000 – December 31, 2008:
471,991 people in brief, group, or individual sessions
 (442,832 general public, 25,338 health care professionals, 3,821 trainers); 24 out
 of 24 jurisdictions educated for CRC in FY08



*The number of persons educated includes any session where colorectal cancer was selected in the EDB.

^A person can be educated more than once.

**Interval is for 6-month period.

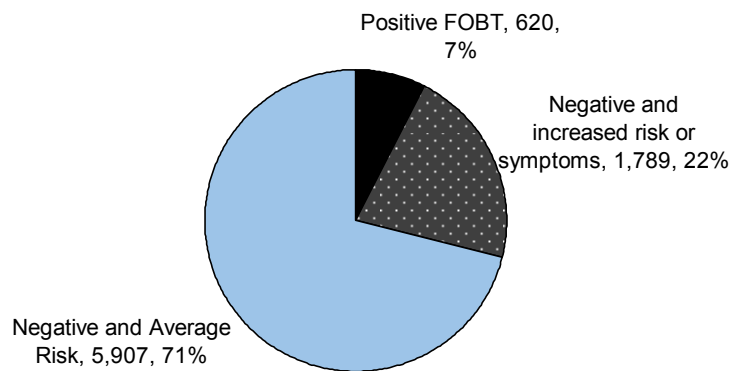
CRC Messages Targeted via Media and Resource Materials – July 1, 2000 – Dec. 31, 2008:
>130 million people potentially reached through, e.g., TV, radio, and print media, etc.

Public Health Screening for CRC in CRFP

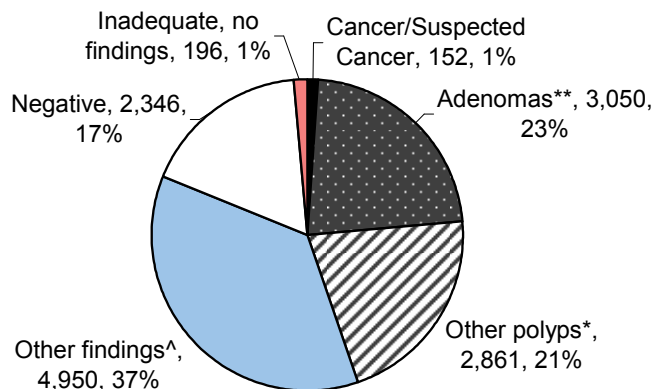
Screening by Minority Race/Ethnicity and Gender (includes some screened with FOBT who are not low income or uninsured), July 1, 2000 – December 31, 2008:
17,543 people screened for CRC by one or more methods

- 33% minority women
- 32% non-minority women
- 15% minority men
- 14% non-minority men
- 3% unknown minority status, women
- 2% unknown minority status, men

Results of 8,316 Fecal Occult Blood Tests (FOBT); includes many who are not low income or uninsured, July 1, 2000 – December 31, 2008:



Findings of 13,555 Colonoscopies (low income and uninsured or under-insured), July 1, 2000 – December 31, 2008 (categorized by most advanced finding):



*Other polyps: hyperplastic and other polyps

**Includes 53 adenomas with high grade dysplasia

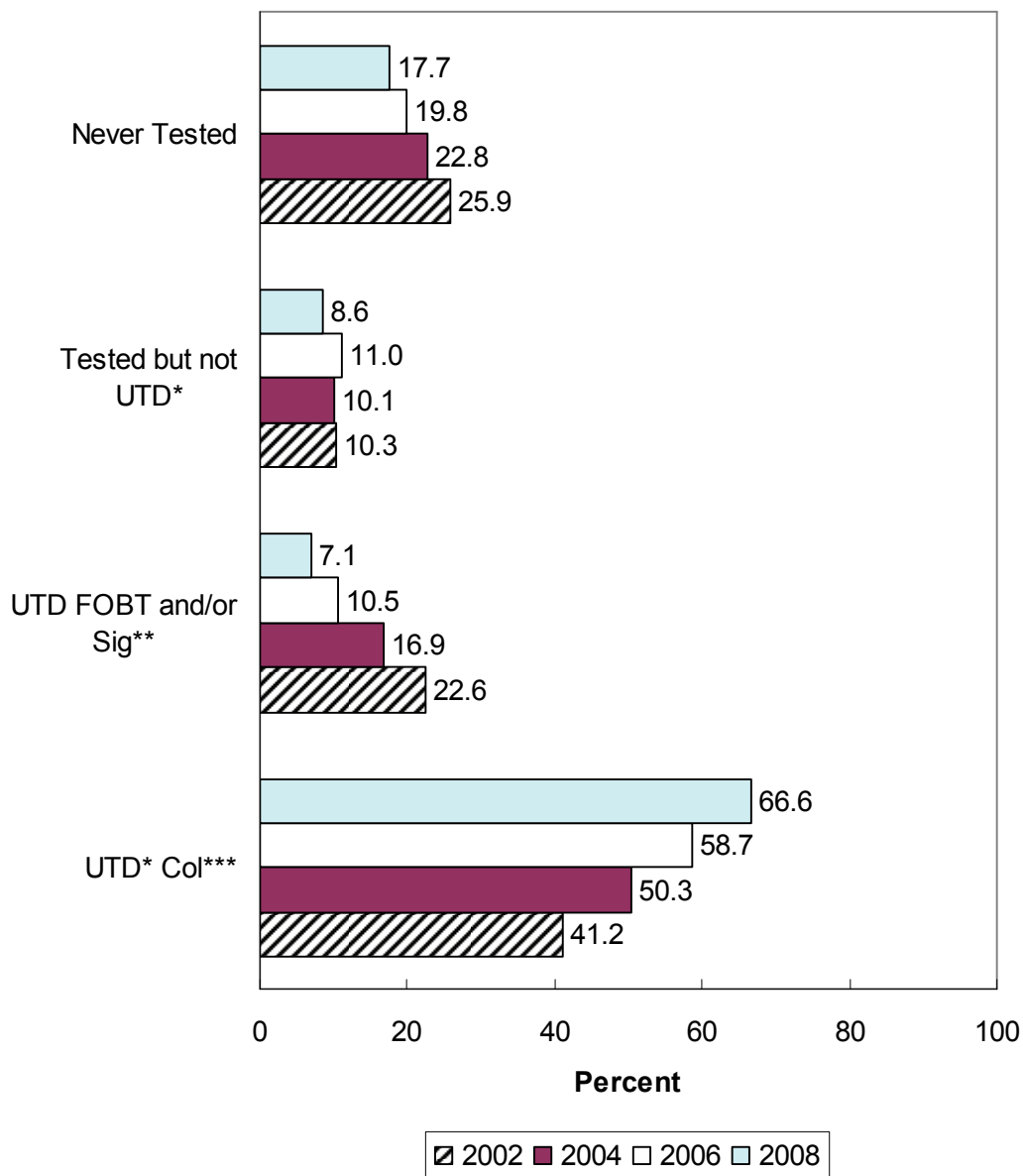
^Other findings: hemorrhoids, diverticuli, inflammatory bowel disease, etc.

Unplanned Events/Complications of Colonoscopy—July 1, 2000—December 31, 2008:

Among the colonoscopies, the following complications have been reported: 6 bowel perforations; 10 hemorrhages that required hospitalization/surgery; 7 bleeding that required ER or doctor visit and 7 bleeding that did not result in doctor visit; 37 instances of abdominal issues mostly after the procedure (e.g., pain, discomfort, nausea, vomiting); 31 instances of cardiac-related symptoms such as arrhythmia, change in blood pressure, or fainting; and 15 other problems (e.g., drug reaction, combative, IV-related, or bowel prep-associated problem).

Current Colorectal Cancer Screening Status of Marylanders Age ≥ 50 Years

Population-Based Maryland Cancer Survey, 2002, 2004, 2006, 2008



*UTD: Up-to-Date according to American Cancer Society Guidelines

**Fecal Occult Blood Test and/or Flexible Sigmoidoscopy

***Colonoscopy

For the Maryland Cancer Survey reports go to:

http://www.fha.state.md.us/cancer/surv_data-reports.cfm

For Colorectal Cancer Screening Program information, go to:

http://www.fha.state.md.us/cancer/crc_screening.cfm

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