

## Colonoscopy Secrets That Can Save Your Life

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Colon cancer is the second leading cause of death from cancer in America. Once you have invasive colon cancer, there is only a 10% chance of survival beyond five years. However, if colon cancer is removed before it spreads to lymph nodes or other organs, 90% of patients survive more than five years.<sup>1</sup>

If there were a procedure that could identify and remove precancerous and cancerous tissue before they spread, it could save millions of lives. Guess what? There is. It's called a colonoscopy.

Having a colonoscopy could reduce your chance of having colon cancer by up to 90%—but only 50 to 60% of the people who could benefit have the procedure. What about the remaining 40 to 50%? What's stopping them from having a colonoscopy?

There are several reasons people don't get a colonoscopy:

1. The laxatives that are taken before the colonoscopy are uncomfortable and even dangerous.
2. Their doctor hasn't talked

to them about it.

3. It's just too invasive for some people.
4. People do not have insurance nor the money to pay for a colonoscopy.<sup>2</sup>

There are ways to increase the safety, comfort and effectiveness of colonoscopies that could increase the number of people who get them. This Special Report will tell you what they are.

If you are one of the 40 to 50% who hasn't had a colonoscopy, keep reading. You may change your mind. If you're someone who will be having a second or third colonoscopy, find out the secrets to getting the safest, most effective procedure possible.

In this report you will learn:

- What is the safest and most effective type of colonoscopy
- Which type of colonoscopy to avoid like the plague
- Which laxative bowel preparations taken before a colonoscopy are the most dangerous—even deadly
- Which bowel preparation

procedure is the safest, most effective and rated most comfortable by patients

- What to do before and after a colonoscopy to prevent dangerous side effects
- What time to schedule your colonoscopy for the best results
- What questions to ask your doctor to improve your chances of a safe, effective colonoscopy
- How to dramatically reduce your risk of colon cancer—naturally

### Why So Much Colon Cancer? It's What You Eat!

Why do so many Americans have colon cancer? No one knows for sure, but many experts believe the standard American diet increases your risk of colon cancer. The main suspect is a diet high in foods that cause *inflammation* in your cells.<sup>3</sup>

In 2000, scientists discovered that inflammation was a major risk factor in heart disease. That was big news. Then an article in the



journal *Oncology* (February, 2002) reported, "...chronic inflammation can predispose individuals to cancer...the longer the inflammation

## Breaking News! All Fish Are Not Healthy

You may have heard that eating fish is healthy. It's true. Fish like salmon (especially wild salmon), sardines and trout are high in omega-3 fatty acids that are extremely healthy for you. However, some fish that are farm raised may not be good for you.

A 2008 study found that farm-raised tilapia are fed a diet high in corn. Corn is rich in a type of fat that is inflammatory. Farm-raised catfish also have high levels of inflammatory triggers. Eating these fish can actually increase your levels of inflammation.

Tilapia is one of the most popular fish in America—and the least expensive. However, if you are concerned about lowering inflammation—a major risk factor for colon cancer—it is best to avoid tilapia and farm-raised catfish. Canned Alaskan wild salmon is an inexpensive and healthier choice.

Weaver KL, et al. The content of favorable and unfavorable polyunsaturated fatty acids found in commonly eaten fish. *J Am Diet Assoc.* 2008 Jul;108(7):1178-85.

persists, the higher the risk."

A flood of research found that chronic inflammation may be the root cause for every single chronic disease: Heart disease, diabetes, metabolic syndrome, cancer, bowel disease, arthritis, Alzheimer's, and more.

Reducing inflammation with a healthy diet, exercise, nutritional supplements like probiotics and reducing stress are some of the most important things you can do to reduce your risk of all the chronic diseases of aging—including colon cancer.<sup>4</sup>

A study published in the *Journal of the American Medical Association* (JAMA) in 2004 of almost 23,000 adults over a period of 11 years found that those who had higher levels of the marker of inflammation (CRP) had more than *twice the risk* of developing colon cancer.<sup>5</sup>

In 2005, Harvard researchers published their results from a study of different types of diet and inflammation. They found that healthy diets like the Mediterranean diet rich in fruits and vegetables, olive oil, nuts, whole grains, healthy fish and red wine lowered the markers of inflammation significantly.<sup>6</sup>

## Won't Fiber Prevent Colon Cancer?

An important study in the 1970s studied a tribe in Africa that ate a high-fiber diet. They had very low

rates of colon cancer. For years doctors have told patients to add Metamucil, bran cereal, and other high fiber supplements to their diet to prevent colon cancer. However, scientific studies have not proven that adding fiber to the standard American diet prevents colon cancer. Eating a low-fat diet doesn't prevent colon cancer, either.<sup>7,8</sup>

Now, nutritionists and scientists are looking at the *whole diet*. And the whole diet of most Americans reeks of inflammation.

Most Americans daily consume sodas sweetened with high fructose corn syrup, trans fats, white sugar and flour, and beef and fish that are fed a high-inflammation diet that passes that inflammation on to the consumer. *Our diet is saturated with inflammatory triggers.*

In the near future, expect to see studies that look at the impact of the *kind* of fats and meats and their effect on inflammation and cancer. Animals, such as beef cattle, and fish that are fed corn can increase your inflammation markers. Animals such as range-fed beef and wild fish that have a diet rich in healthy omega-3s have the opposite effect. They reduce inflammation. (See "Breaking News.")

Fortunately, nutritionists have identified safe, natural, delicious foods that decrease inflammation and *reduce*



your risk of cancer.

Later in this report you'll find out which foods to avoid like crazy and which foods you can eat to support a healthy colon throughout your life. You'll also learn the best supplements to take to keep your colon healthy and recover from a colonoscopy the fastest.

### **What's a Colonoscopy?**

Colonoscopy is a medical procedure that examines your colon with a long, flexible tube with a miniature camera attached to the end.

The doctor doing the colonoscopy looks for changes in the tissue in your colon that are cancerous or could turn into cancer. Precancerous tissues are often polyps—small, round nodes of tissue. Recently, researchers have identified another type of precancerous tissue that is flat or depressed, not rounded, called “flat lesions.” Flat lesions are considered even more dangerous than polyps. They are ten times more likely to turn cancerous.<sup>9</sup>

For many years, doctors in America said that Americans did not have these flat lesions, only Asians had them. They were wrong.

Dr. Robert Smith, the director of screening for the American Cancer Society, said in an interview with *The New York Times*, “This paper shows they're more prevalent than we believed, and also

quite serious with regard to the presence of features associated with an elevated risk of cancer.”<sup>10</sup>

Removing precancerous polyps or flat lesions reduces your chance of dying from colon cancer about 80-90%. Removing cancer tissue at an early stage reduces your chance of dying from cancer by 69%.<sup>11</sup>

You want the doctor doing the colonoscopy to find all of the potentially cancerous tissue and the cancerous lesions. Unfortunately, not all doctors are equally successful. According to *The New York Times*, an article in *The New England Journal of Medicine* in December, 2006, found that some doctors were 10 times better than others at finding precancerous polyps. The main factor was time. Doctors who took their time found more precancerous polyps.

Doctors who don't rush through the procedure probably have a better chance of finding flat lesions, too. If at all possible, find a doctor who understands the importance of taking his or her time to do a thorough examination of your colon.

### **Want to Reduce Your Chances of Colon Cancer By Up to 90%?**

Fortunately, colon cancer cells grow very slowly, taking from 5 to 15 years to be lethal.

That is another reason colonoscopy can be very effective at preventing death from colon cancer. Their slow growth provides a window in which to look for signs of cancer.

The current research indicates that it's best to start having colonoscopies when you turn 50, and have one every 10 years after that. If your doctor finds polyps, flat lesions or cancer in your first colonoscopy, then experts suggest you return in five years for a second one.

Some doctors perform colonoscopies more frequently than the above schedule, but the experts say it's unnecessary and could be harmful. Any medical procedure has risks so increasing the frequency of colonoscopies increases those risks. If you have a colonoscopy without any polyps and your doctor recommends a colonoscopy sooner than 10 years, get a second opinion. Many doctors are overprescribing colonoscopies at \$2,000 a pop.<sup>12</sup>

### **All Colonoscopies Are Not Created Equal**

Once you decide to get a colonoscopy, make sure you get the safest, most effective one.

The standard colonoscopy requires that a colonoscopy tube be inserted into the colon through the rectum.

Obviously, a lot of people would prefer a procedure that doesn't require a tube to be inserted. Some doctors and



scientists have developed a virtual colonoscopy—also called a computed tomography (CT) colonography—which doesn't require an inserted camera.

## **The Colonoscopy to Avoid Like the Plague**

The advantages of a virtual colonoscopy sound great—at first: No anesthesia, no tube inserted into your colon. Why do some experts recommend avoiding it like the plague?

### **5 Excellent Reasons to Avoid a Virtual Colonoscopy**

**1. You will be exposed to a very high dose of radiation.** Here's what the U.S. Food and Drug Administration (FDA), a highly conservative governmental institution, says about virtual colonoscopy (CT) radiation levels.

**Radiation Dose:** The effective doses from diagnostic CT procedures are typically estimated to be in the range of 1 to 10 mSv. This range is not much less than the lowest doses of 5 to 20 mSv received by some of the Japanese survivors of the atomic bombs.<sup>13</sup>

The FDA concludes that this level of radiation increases the relative risk for dying from cancer.

In other words, even *one* virtual colonoscopy exposes

you to enough radiation to *increase* your risk of cancer.

Under ideal circumstances, if you start at 50 and have one every 10 years, by the age of 71 you will be exposed to about *three times* the radiation of someone exposed to the atom bomb.

If the doctor finds pre-cancerous tissue, and you have a follow-up virtual colonoscopy every five years (the currently recommended schedule), you will be exposed to about *five times* the amount of radiation as someone on the outskirts of Hiroshima.

Virtual colonoscopy exposes you to too much radiation to be a safe choice.

**2. You may still have to have a regular colonoscopy.** If the doctors see anything suspicious during the virtual procedure, you will have to have a regular colonoscopy anyway. You will double your expense, time and discomfort.

**3. You still have to undergo the strong laxative bowel preparation procedure.** This is the most uncomfortable part of having a colonoscopy.

**4. Virtual colonoscopy is not as good at detecting polyps, cancer or dangerous flat lesions.**

A study that compared the number of cancers detected in the same patients found

that standard colonoscopy detected all of the cancers while virtual colonoscopy missed some. Every cancer missed in a colonoscopy can mean that person may die of colon cancer. The researchers concluded that standard colonoscopy was more likely to detect polyps and cancer than virtual colonoscopy.<sup>14</sup>

A 2007 meta-analysis of 30 published studies comparing standard with virtual colonoscopy concluded that virtual colonoscopy was less accurate for smaller polyps.<sup>15</sup> A 2008 study published in the *Journal of Clinical Gastroenterology* found that virtual colonoscopy was not as effective in detecting flat lesions, detecting only 37.4% of them, and was also less effective in detecting other polyps.<sup>16</sup>

**5. Patients like virtual colonoscopy less than the standard colonoscopy.** In the most extensive study so far, the performance of standard colonoscopy, virtual colonoscopy and barium enema were compared in a study of 614 participants who underwent all three procedures. When patients were asked which procedure they would be most willing to repeat, they chose the standard procedure. They said they had the least pain and discomfort with the standard colonoscopy.<sup>17</sup>



## **Bowel Preparations— Unpleasant, Uncomfortable and Possibly Deadly**

Hands down, everyone from patients to nurses to doctors agree that the most unpleasant aspect to having a colonoscopy is the bowel preparation required first. However, bowel preparations can be more than unpleasant. They can be dangerous, and even deadly.<sup>18</sup>

### **What is Bowel Preparation?**

In order for doctors to see polyps, lesions and cancerous tissue, the bowel *must* be clean and free of stool.<sup>19</sup> Cleaning stool out of your colon is called “bowel preparation.” Most doctors use powerful laxatives for bowel preparation. If your colon isn’t clean enough, the doctor will end the procedure and you will have to start all over again.

A rare but deadly complication of an unprepared bowel that still contains stool is an explosion inside the colon. Certain carbohydrates in stools (lactulose, mannitol, lactose, fructose, sorbitol) are fermented by the normal bacteria in the colon and create methane and hydrogen. They are potentially explosive if there is a heat source inside the colon, such as the instrument used to remove polyps.

According to a 2007

report, “Almost half of the patients (42.8%) with unprepared colon have potentially explosive concentrations of hydrogen and methane. Nevertheless, an explosion with these two gases can occur only if the oxygen concentration is over 5%.”<sup>20</sup>

The author of the report concludes, “Therefore, quality of bowel preparation as well as type of preparation and dietary restrictions are all essential for an uneventful therapeutic colonoscopy.”<sup>21</sup>

Sorbitol and mannitol are the biggest gas producers among these types of ingredients.<sup>22</sup> Read the labels of what you eat and drink prior to a colonoscopy and make sure you don’t ingest sorbitol and mannitol. These two sweetening ingredients are used in many diet foods and drinks.

### **The Hidden Dangers of Bowel Preparations**

#### **1. Explosions Inside the Colon—Laxatives That Contain Lactulose, Mannitol or Sorbitol**

This may sound like an urban legend, but it is a scientifically documented occurrence. Mannitol and lactulose are common laxatives. Sorbitol is a common ingredient. They produce flammable gas inside the colon. If you have too much flammable gas in your colon and the doctor removes

a polyp with an instrument that applies heat, the gas can explode, causing permanent damage or death.<sup>23</sup> Avoid laxatives that contain these ingredients.

#### **2. Kidney Damage and Death—Oral Sodium Phosphate Solution**

A recent 2007 study showed that sodium phosphate laxatives worked the best at cleaning out the bowels for colonoscopy. They also were better tolerated. Product names are: Fleet Phospho-soda, ACCU-PREP, Visicol and OsmoPrep. Many doctors prescribe them as the first choice for bowel preparation prior to a colonoscopy. However, 50% of patients report nausea, abdominal pain, dizziness and bloating. (Lichtenstein.)

*The shocking truth, though, is that these types of laxatives can damage your kidneys, and even cause death due to kidney failure.*

According to Dr. Anand Khurana, the author of a recent study who was interviewed by *The Washington Post*, “People should be very cautious in the use of these agents because of their potential of causing kidney damage.”<sup>24</sup>

Dr. Khurana and his research team found that the kidney damage showed up six months to a year after using these products. People with no previous history of kidney problems who used these



products had a 6% drop in kidney function after six months and an 8% drop after one year. Normal kidney loss of function is about 1% a year in patients over 40.<sup>25</sup>

The FDA warns that Fleet Phospho-soda, Fleet ACCU-PREP and Visicol may cause death from sudden kidney failure. The risk is greatest in people who are "aged." The FDA did not define "aged," so one can assume over 60 or 65—the age of most people who get colonoscopies. So, if you are over 60, ask your doctor about the FDA warning against these products if he or she prescribes them as bowel preparation for your colonoscopy.

The FDA also warned against using these laxatives if you have kidney disease or take the following medications: Diuretics, ACE inhibitors, angiotensin receptor blockers (ARBs), and possibly NSAIDs like Advil or ibuprofen.

### **3. Hospitalization and Death—Oral PEG-EL (polyethylene glycol electrolyte lavage)**

The second most commonly prescribed laxative for bowel preparation is PEG-EL. Product names are GoLYTELY, NuLYTELY, Colyte, TriLyte, and MoviPrep.

This laxative requires you to drink about a gallon of liquid that most people find pretty distasteful. Drinking a

gallon of sweet/salty fluid is impossible for many people. If they don't finish the dose, their bowel may not be clean enough and the colonoscopy will be halted.

More than half of all patients drinking PEG have nausea, bloating and abdominal pain. Other common side effects are vomiting, sleep problems and anal irritation. Vomiting also increases the risk of dehydration.

Even more serious, however, is that the FDA reported 100 serious adverse events within a period of five years that sent people to the hospital. Six people died. It is well known that adverse events are very underreported by doctors, so the rate of serious problems is probably much higher.<sup>26</sup>

### **New Formulas Have Fewer Side Effects**

Sodium phosphate tablets (OsmoPrep) have somewhat lower sodium levels than the liquid versions. This *may* reduce kidney damage but it has not been studied.

MoviPrep is a PEG solution that contains ascorbic acid and requires that you only drink half a gallon. It is as effective as the gallon formula and is better tolerated. There is currently no information released by the FDA on serious adverse events.

## **Better Bowel Prep Solutions Your Doctor May Not Know About**

Having the cleanest bowel possible increases the success of a colonoscopy. Doctors are able to find more polyps, cancers and small lesions in a very clean bowel. The following two bowel preparations are more effective than the most commonly used laxatives, but they are less used by doctors.

Bring this report to your doctor before a colonoscopy to discuss using the most effective bowel preparation procedure. It could save your life.

### **1. Produces Cleaner Colons and Fewer Side Effects--Colon Hydrotherapy**

Colon hydrotherapy is a procedure in which a trained technician gently flushes out the colon using warm water and a specially designed device. A study published in the 2006 *American Journal of Gastroenterology* found that this procedure worked significantly better than sodium phosphate or PEG products.<sup>27</sup>

This study found that doctors rated colon hydrotherapy much higher for producing a clean colon than the laxatives.

Doctors' ratings of three colonic areas for cleanliness:

■ Colon hydrotherapy—92%,



100% and 98%.

- Sodium phosphate ratings — 62%, 80% and 84%.
- PEG-EL solutions ratings were 49%, 63% and 56%.<sup>28</sup>

The study also compared the patients' experience. Patients rated colon hydrotherapy highest for convenience and comfort compared to the two laxatives.

When asked if they wanted a different cleansing treatment next time only 4% of colon hydrotherapy patients wanted another type of bowel preparation. In the laxative groups, 48% of sodium phosphate patients and 60% of PEG patients wanted something different.<sup>29</sup>

Because many doctors are not as familiar with this type of procedure, you may want to discuss this research with him or her when talking about having a colonoscopy. This is the very latest research and your doctor may not be aware of it.

Morton Walker, DPM, reports in his *Medical Journalist Report* that more doctors are beginning to use this procedure.<sup>30</sup>

Leonard Smith, MD, of Gainesville, Florida, a board-certified specialist in gastrointestinal surgery says that "...colon hydrotherapy is the perfect cleansing medium for preparing the patient for colonoscopy...[it] allows the patient to avoid the noxious side effects of vomiting, diarrhea, abdominal cramping

and other troubles."

Another doctor who practices in Walnut Creek, California agrees. Robert Charm, MD, states, "By all means I prefer my patients undergo colon hydrotherapy the morning of a colonoscopy. It's a safe way to clean the gut."

## 2. Some Side Effects but Safer than Sodium Phosphate or PEG-EL—Senna Tablets

Senna is a powerful stimulant laxative that comes from the senna plant. The primary side effect reported by patients is abdominal pain. Patients in a study of senna compared to PEG-EL had much less nausea and vomiting.<sup>31</sup> Senna does not have the adverse effect on kidneys that sodium phosphate laxatives have. A recent trial proved senna to be a valid alternative to standard PEG-EL for colonoscopy preparation.

In the trial, 191 patients were given either 24 tablets of 12 mg of senna, divided into two doses at 1 pm and 9 pm, or the standard gallon of PEG-EL (92 patients). The study reported that the overall quality of colon cleansing, tolerance and compliance was superior with senna.

The study stated that overall cleansing was excellent or good in 90.6% of senna patients compared to 79.7% of patients who took PEG-EL.<sup>32</sup>

Patients in the senna group had 2.6% of colonoscopies

rescheduled due to poor cleansing. The PEG-EL group had 7.3% rescheduled, nearly three times as many.

If you do not have a colon hydrotherapy technician in your area, you might suggest using senna tablets to your doctor. This natural product has some of the negative effects of all powerful laxatives, but is safer than sodium phosphate (i.e. does not cause kidney damage) and is more effective than PEG-EL. Remember, the effectiveness of bowel cleansing is the most important factor in your doctor locating possibly life-threatening polyps, lesions and cancer.

## Avoid Dehydration And Death with Fluid Replacement Program

One of the most important things you can do to reduce your chance of having mild to severe side effects from bowel preparation laxatives is drink enough fluids. If you have no choice but to take PEG-EL, sodium phosphate or even senna, then dehydration is a major risk factor. You do not have the same risk of dehydration with a hydrotherapy procedure.

Dr. G.R. Lichtenstein and his colleagues researched the importance of restoring fluid before and after colonoscopies that require powerful laxatives. In his report he stated, "Failure to maintain adequate hydration,



before, during and after bowel preparation may increase the risk of severe and potentially fatal dehydration related complications.”<sup>33</sup>

When you take laxatives, you will have severe diarrhea that cleans out your bowels. You may also vomit, especially with PEG-EL solutions. You will lose large amounts of body fluids and can become severely dehydrated—a medical emergency that can cause death.

Patients who have heart and kidney diseases are at especially high risk if their electrolytes become unbalanced due to dehydration.

Once you are dehydrated it takes time to build your body fluids back up. That’s why experts recommend drinking fluids in the five days *before* a colonoscopy.

#### Hydration Tips:<sup>34</sup>

- Follow the directions from your doctor *exactly* in regards to food and drink prior to the colonoscopy.
- Fill up two one-liter bottles with water every day for five days before the colonoscopy. Find ways to make them more interesting with a slice of lemon or lime, herb tea bags, or a sprig of mint. Drink both bottles every day. People’s memory is often faulty as to how much water they drink.
- If you have a juicer, juice a

whole, organic cucumber including skin. It contains high levels of potassium that will help keep you hydrated. Drink cucumber juice every day for five days prior to the procedure until you switch to clear liquids.

- Drink mineral water with a high mineral content.
- Drink two liters of clear liquids on the day you take a sodium phosphate solution.
- Notify your doctor if you have vomiting or cannot drink two liters of fluid on the day before the colonoscopy.
- Stop drinking liquids two hours prior to the colonoscopy.
- What about Gatorade and other sports drinks? Some studies have shown that Gatorade instead of water resulted in more successful colonoscopies for patients taking sodium phosphate laxatives.  
**Warning:** Gatorade is high in sugar and potassium. If you are diabetic or have kidney problems it could make them worse. Other sports drink products may have different amounts of sodium and potassium and may not have the same results.

#### The 3 Most Important Questions to Ask Your Doctor<sup>36</sup>

1. How long do you take to do a colonoscopy?

Specifically, how long do you take to withdraw the scope? The withdrawal phase should last *at least* six minutes.

2. Have you studied the latest techniques in identifying non-polyp flat lesions? A teaching DVD *Detection of Flat and Depressed Colorectal Neoplasms* is available. Have you seen it?<sup>37</sup>
3. What is your detection rate? Doctors should be finding more than one cancer in 25% of men and 15% of women more than 50 years old.

#### 7 Things You Can Do After a Colonoscopy to Enhance Recovery

1. Drink two liters of liquid daily.
2. Introduce solid food slowly. Low fiber. Low protein.
3. When you introduce

#### The Early Bird Gets the Best Colonoscopy

Several studies have shown that colonoscopies scheduled in the morning are much more likely to be successful—especially in women. Doctors found more polyps and cancer in the morning than the afternoon. Insist on a morning time slot—it makes a difference and may save your life.<sup>35</sup>



protein and solid foods, take a broad-spectrum digestive enzyme that helps break them down.

4. Take a probiotic that contains several strains of Bifidobacteria and Lactobacilli to help support natural flora in the colon.
5. Take L-glutamine and glucosamine to help repair the lining of the colon.
6. Avoid inflammatory foods like sodas, sweets and trans fats.
7. Avoid foods and drinks that contain sorbitol and mannitol as they are gas-producing and irritating to the colon.

## **The 2 Most Important Things You Can Do to Reduce Risk of Colon Cancer**

### **1. Avoid constipation.**

Constipation puts you at higher risk for colon cancer. In a recent study in Japan, a study of over 40,000 men and women found that constipation was associated with a higher risk of colon cancer.<sup>38</sup>

If you have trouble with constipation, consider using probiotics, digestive enzymes and a healthy diet instead of harsh laxatives to reach normal bowel function.

Are you sure you're not constipated? A shocking study published in Denmark found that both men and women in the study who had one "normal" bowel movement

a day still had constipation. Their colon had feces stuck in the upper parts of it even though they went regularly. The doctors called this "hidden constipation syndrome."

The doctors who did the study also stated that hidden constipation could increase the risk of cancer.<sup>39</sup>

### **2. Reduce inflammation.**

Ask your doctor for the highly sensitive C-Reactive Protein (hsCRP) to find out if you have chronic inflammation. If you do, consider eating a diet that *decreases* your levels of inflammation. Your doctor may have information on the Mediterranean Diet. It is delicious and healthy. Below are foods and supplements that help support a normal inflammation response.

## **The 5 Best Supplements to Take for a Healthy Colon**

### **1. Probiotics**

Probiotics are the superstars of colon health. When probiotics interact with a type of fiber called a prebiotic they produce a chemical called butyrate. Butyrate detoxifies potentially cancerous toxins and pulls them out of the colon. Normal cell health in the colon requires a healthy population of good bacteria, especially Bifidobacteria.

Antibiotics and other

factors that temporarily destroy good bacteria can put you at greater risk for colon trouble. Taking a supplement of probiotics with many strains that live in the colon, such as Bifidobacteria, help support a healthy colon.<sup>40</sup>

### **2. Vitamin D3**

The latest research indicates that raising vitamin D levels may prevent two thirds of colorectal cancer cases in the United States. Vitamin D experts recommend a daily intake of 2000 IU of vitamin D3 and, when possible, moderate sun exposure. The body makes vitamin D3 from sunshine, but most Americans don't get enough from the sun.<sup>41</sup>

### **3. Digestive enzymes**

A broad-spectrum digestive enzyme that breaks down protein, carbohydrates and fats helps support colon health. Undigested proteins in the colon can produce chemicals that damage colon cells and may increase your risk of cancer.

## **The 7 Best Foods and Drinks to Reduce Your Risk of Colon Cancer**

Eating an overall healthy diet is more important than focusing on individual foods. However, the latest scientific evidence suggests including these foods in a healthy diet may reduce your risk of colon cancer.



## 1. Onions and turmeric

Onions are very high in an anti-inflammatory compound called quercetin. Turmeric is a golden spice used in curries. It is well known as an anti-inflammatory agent equal to NSAIDs. Some studies have indicated that aspirin and NSAIDs can help reduce colon cancer due to their anti-inflammatory activity. However, the internal bleeding associated with their use does not make taking them safe. Quercetin and turmeric as food or supplements are a safer choice.<sup>42 43 44</sup>

## 2. Apples and apple juice

Apples and cloudy apple juice are rich in polyphenol antioxidants that protect against colon cancer.<sup>45</sup>

## 3. Berries

Two studies indicate that berries may help reduce the risk of colon tumors. The first study was at Ohio State University. The scientists found that rats that were exposed to cancerous substances and then were fed a black raspberry extract had 80% fewer colon tumors than rats on a regular diet. The second study added an antioxidant compound found in berries and grapes (pterostilbene) to diets of rats exposed to cancerous chemicals. The antioxidant reduced the formation of

precancerous colon growths.<sup>46</sup>

## 4. Garlic

A review of all the published evidence about garlic and colon cancer found that there is consistent scientific evidence that eating garlic reduces risk of colorectal cancer.<sup>47</sup>

## 5. Coffee

A study of more than 96,000 men and women in Japan found that women who drank three or more cups of coffee a day had half the risk of developing colon cancer than women who never drank coffee.<sup>48</sup> Scientists in another study identified an anti-cancer compound called methylpyridinium found almost exclusively in coffee that is formed during the roasting process. Espresso contains two to three times more than a medium-roasted coffee.<sup>49</sup>

## 6. Red wine

A study done by Joseph Anderson, MD, and his team at New York's Stony Brook University found that people who drink three or more glasses of red wine a week are less likely to get the abnormal polyps and growths that can lead to cancer. Other studies have shown that drinking more than 1-2 glasses a day of red wine can reverse any health benefits.

## 7. Fish high in omega-3 fatty acids like trout and salmon

Eating fish that are high in healthy fats can reduce inflammation and may reduce risk of colon cancer.<sup>50</sup>

## 8. Broccoli and broccoli sprouts

Broccoli contains a special chemical called sulforaphane that may help prevent colon cancer. Broccoli sprouts contain 50 times more sulforaphane than broccoli. The researcher stated, "The compound in broccoli may be one of the strongest anticancer fighters we have."<sup>51</sup>

## The 5 Worst Foods For Your Colon

The following foods are highly inflammatory and may increase your risk of colon cancer—and other chronic diseases. Just cutting out one of them may make a huge difference in your health. Cutting out all of them may prevent you from getting colon cancer.

1. Trans fats
2. Sodas
3. Foods high in high fructose corn syrup
4. Corn-fed fish and beef
5. Foods made with white flour and white sugar

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