Seattle Cancer Care Alliance is a cancer treatment center that unites doctors from Fred Hutchinson Cancer Research Center, UW Medicine, and Seattle Children’s. Our goal, every day, is to turn cancer patients into cancer survivors.

Gastrointestinal (GI) Cancer Prevention Program

- **Philip has just turned 50**, so he goes for his first colonoscopy for colon cancer screening. It shows that he had dozens of polyps in his colon. They are all the pre-cancerous type. His doctor tells him it’s unusual for someone to have this many polyps, and counsels him that he has a higher chance of developing more colon polyps, and colon cancer, in the future.

- **Tanisha knew her mother had colon cancer 25 years ago**. But it wasn’t until Tanisha’s brother was diagnosed with colon cancer at age 37 that their mother told them her mother, their grandmother, had died from stomach cancer. Tanisha wonders about her own risk of cancer.

Gastrointestinal (GI) Cancer Prevention Program

If you believe you have a higher chance of developing a GI cancer (cancer of the small intestine, the pancreas, the stomach, the colon), you may want to explore the services of the GI Cancer Prevention Program at the Seattle Cancer Care Alliance. This specialized program offers a multidisciplinary, personalized approach to cancer risk assessment, prevention and screening.

You may have a higher chance of developing a GI cancer if:

- You have a strong family history (two or more close relatives on the same side of the family with cancer, at least one of which is a GI cancer, especially if cancer was diagnosed before age 50), OR
- You have had a GI cancer before you were 50 years old, OR
- You have had any colon polyps before the age of 40, OR
- You have had more than 10 colon polyps at any age, OR
- You have had two or more types of cancer (one of which is a GI cancer), OR
- You have had an abnormal result on a genetic test for a hereditary GI cancer syndrome, such as HNPCC (Lynch syndrome) or FAP (Familial Adenomatous Polyposis).
At the Gastrointestinal Cancer Prevention Program, you’ll meet with a team of GI experts, including a gastroenterologist, a genetic counselor, a nutritionist, and a gynecologic oncologist when needed. You’ll receive information about hereditary and non-hereditary GI cancer risk factors and strategies for lowering your risk.

The team will help you develop a comprehensive, personalized program to try to prevent cancer from occurring and increase the likelihood of detecting cancer early, if it should occur.

Components of this plan may include chemoprevention (taking medicine to prevent cancer), screening by exams like colonoscopy, risk-reducing surgery, changes in your diet and vitamin supplements, and new technologies or developments. If you are interested, you’ll be given contact information for any research studies for which you are eligible.

Our services include:

- A comprehensive review of your personal and family risk factors for developing a GI cancer
- A physical exam, if needed, paying special attention to features of hereditary cancer syndromes
- Review of your past medical records
- Discussion of multiple ways to lower the chance of getting a GI cancer
- Development of a cancer prevention plan that fits your needs and lifestyle
- Help with scheduling procedures or appointments that are recommended
- Review of available research studies for cancer screening or prevention that may interest you

If you would like to schedule an appointment or learn more about the GI Cancer Prevention Program, please call us at (206) 288-1024.

- Michelle had just gotten her test results. Her doctor had found another colon polyp. Michelle had a colonoscopy a few years ago, when she was 33, and a pre-cancerous colon polyp was found. Her doctor had suggested another colonoscopy three years later, and there she was. Michelle’s father had colon polyps, and her aunt had died from colon cancer. Michelle was worried about her cancer risk. During her appointment at the GI Cancer Prevention Program, Michelle learns that she could have a hereditary syndrome that predisposes her to making colon polyps. She learns she can prevent colon cancer by doing regular colonoscopies, and plans to do one every two to three years. This plan helps her face her cancer risk without dwelling on it each day.