UnityPoint Health – Methodist

UnityPoint Health – Methodist, a 330 bed hospital, was founded in 1900 and is located in Downtown Peoria. Methodist’s commitment to quality has resulted in numerous awards and national recognition, including being named one of “America’s Best Hospitals” for 2009-2010 by U.S. News & World Report, and being the first downstate hospital to receive Magnet designation for excellence in nursing services—the highest honor in patient care. An in-depth look at quality and patient satisfaction data is available at unitypoint.org/peoria.

A full range of diagnostic and therapeutic services are available including:
• Positron Emission Tomography (PET)
• Wide-bore and traditional MRI
• 3-D Conformal Radiotherapy (3-D CRT)
• Bone Marrow transplant
• Interventional Radiology services specific to cancer treatment.
• Advanced TomoTherapy® radiation and
• TrueBeam Treatments are both offered by our Radiation Oncology Department.

In 2012, the Commission on Cancer of the American College of Surgeons granted three-year approval with commendation to the Methodist cancer program. Methodist has also been designated a Breast Imaging Center of Excellence by the American College of Radiology. The Methodist Breast Health Center offers 3D mammography, bilateral breast MRI, ultrasound imaging, and needle core biopsy. The Breast Health Navigator ensures coordinated care and the Comprehensive Breast Day approach brings a team of specialists together to expedite patient care. The autologous bone marrow transplant program is the only one in downstate Illinois. Our inpatient oncology department provides specialized care for patients receiving cancer treatments including surgery, chemotherapy, radiation therapy, and bone marrow transplant.

The Cancer Program provides a number of education and support services including psychosocial support, palliative care, and hospice care. Our Hult Center for Healthy Living serves the community by providing cancer services and programs.

Amenities at Methodist include 100% private rooms in the acute care units and free parking. The Methodist Inn – a free “hotel within a hospital” is available for out-of-town loved ones or for patients who would like a place to stay the night before an early-morning procedure.
Clinical Trials Offer State of the Art Care

UnityPoint Health – Methodist is committed to delivering leading-edge cancer care to patients through ongoing involvement in national clinical trials. Since August 2014, Methodist Medical participates in the newly developed NCI Community Oncology Research Program or NCORP.

This program offers state-of-the-art therapies in cancer prevention and treatment to patients in the Peoria area and its surrounding communities. The availability of these trials to patients and their physicians improves the quality of care for all patients, whether they participate in the studies or not.

The Cancer Committee

THE CANCER COMMITTEE is a multidisciplinary committee comprised of members from the medical staff and ancillary departments who are involved in the care and treatment of cancer patients. This committee has oversight of quality initiatives and standards compliance.

WEEKLY TUMOR CONFERENCES are held to allow physicians and ancillary staff to join together to discuss patient cases and to review diagnostic workups and to assist in determining the best treatment plans for patients utilizing best practice guidelines.

OUR CANCER REGISTRY is the data system for the collection, management and analysis of patient data of those who have been diagnosed with cancer. The Registry reports all required information to the Illinois State Cancer Registry and the National Cancer Data Base for the American College of Surgeons, Commission on Cancer.
Study of Quality: Colon, Rectum and Rectosigmoid Cancer

By Steven S. Tsoraides, MD, MPH, FACS
Medical Director, UnityPoint Peoria Comprehensive Colorectal Center

Colorectal cancer is the fourth most commonly occurring cancer in the United States of America. Nearly five percent of Americans will develop colorectal cancer in their lifetime. The American Cancer Society estimated 102,480 new colon cases and 40,340 new rectal cancer cases for the year 2013. At any time, over one million Americans are currently living with colorectal cancer. Colorectal cancer is the second leading cause of cancer deaths in the United States, with over 56,000 people expected to die from this disease each year. However, it is a preventable and very curable disease if caught early.

Because there are often no symptoms when it is first developing, colorectal cancer can only be caught early through regular screening. Most colon cancers start as non-cancerous growths called polyps. If we are able to find these polyps while they are still non-cancerous, we remove them and the cancer may be prevented. Major surgery can usually be avoided, as well. If you wait for bleeding or symptoms to be seen, it is often too late to prevent cancer. The benefits of early detection and treatment are dramatic.

The possibility of curing patients after symptoms develop is only 50%, but if the colorectal cancer is found and treated at an early stage before symptoms develop, the opportunity to cure it is 80% or better.

In keeping with the highest of care standards, UnityPoint Methodist performs multiple internal quality studies. We found that 91% of colon cancers in our system are diagnosed in patients age 50 or over, meaning that most can be caught by appropriate screening. Unfortunately, though, less than 20% of colon cancers diagnosed at UnityPoint Methodist are diagnosed at Stage 1, while almost 50% are already at Stage 3 or 4 by the time of diagnosis. For these advanced stages, survival at 5 years is only 34.7% and 5.2%, respectively. For rectal cancer, only 15% are Stage 1 at diagnosis, while over 50% are Stage 3 or 4. Getting your colon cancer screening at the appropriate time, therefore, is one of the most effective ways to prevent colon cancer. Furthermore, catching disease early offers a better chance at cure.

Screening

Many organizations have published guidelines for colorectal cancer screening. The American Society of Colon and Rectal Surgeons (ASCRS), which is dedicated to advancing the treatment of patients with diseases affecting the colon, rectum and anus, supports the following colorectal cancer screening guidelines:

**AVGARE RISK** For people getting colorectal cancer, one of the following starting at age 50.

- **Digital rectal examination and fecal occult blood test**, which screens for hidden blood in the stool, are recommended annually beginning at age 50.
- **Flexible sigmoidoscopy** (a test that allows the physician to look directly at the lining of the lower colon and rectum) is recommended every 5 years at age 50 or older in addition to the above, or...
- **A colonoscopy** (a test that allows the physician to look directly at the lining of the entire colon and rectum) every 10 years instead.
- **Barium enema** (x-ray of the colon) every 5 to 10 years is an acceptable alternative, although less commonly recommended. (Newer options like CT Colonography are now more popular)

**INCREASED RISK**

People at increased risk for colorectal cancer include those with a personal or family history of colorectal polyps or cancer, those with a personal history of breast, uterine or ovarian cancer, and those with chronic ulcerative colitis or Crohn’s disease.

Increased risk patient may need earlier and more frequent screening depending upon the recommendation of their healthcare provider.
Newer techniques such as CT Colonography are also available at UnityPoint. This easier approach serves as adequate screening for patients every 5 years starting at age 50. This technique avoids some of the concerns people may have with colonoscopy and can be done without the need for sedating medicines. Whatever method you chose, UnityPoint has the right team and resources in place to keep you healthy!

**Prevention**

In addition to timely and regular screening for colorectal cancer, people may be able to lower their risk of getting the disease by:

- **Eat plenty of fiber** – between 20 to 35 grams of fiber each day from fruits, vegetables, whole grain bread and cereals, nuts and beans.

- **Eat a low-fat diet** that minimizes animal fats.

- **Eat foods with folate** such as leafy green vegetables.

- **Don’t drink excessive alcohol or smoke**. If you use alcohol, drink only in moderation. Alcohol and tobacco in combination are linked to colorectal cancer and other gastrointestinal cancers. If you use tobacco, quit. If you don’t use tobacco, don’t start.

- **Exercise for at least 20 minutes** three to four days each week. Moderate exercise such as walking, gardening, or climbing steps may help reduce your risk.

Of course, not all cancers will be prevented. When you or a loved one is struck with this terrible disease, UnityPoint is here to help provide the best treatment available. Acknowledging the special needs of our cancer patients, UnityPoint Methodist has developed a Comprehensive Colorectal Cancer Center aimed at helping navigate patients through the stressful process of receiving cancer care. Our nurse navigator has taken a lead in reaching out to patients and relieving some of their worries.
Colorectal Specialists

Our team also consists of many medical specialists including general and colorectal surgeons. Colorectal surgeons are experts in the surgical and nonsurgical treatment of colon and rectal problems and play an instrumental role in the effective screening, prevention and treatment of colorectal cancer, along with gastroenterologist, oncologists, and radiologists. Studies have shown that patients treated by colorectal surgeons are more likely to survive colorectal cancer because of their advanced training and the large number of colon and rectal disease surgeries they perform. UnityPoint is proud to offer the services of 3 board certified colorectal surgeons. Our surgeons work closely with gastroenterologists, medical oncologists, radiation oncologists, radiologists, and pathologists to ensure that patients receive the best care possible.

Treatment

We also offer the latest in cutting edge cancer care treatment options. Our Radiation Oncology team is a regional leader in these approaches. Our surgeons are highly skilled in traditional, laparoscopic, and robotic surgery techniques aimed at giving every patient the best chance at beating their disease. Our medical oncologists are national leaders in research and bringing the best and latest treatments to patient’s right here in central Illinois. Our team of gastroenterologists operate in a state-of-the-art endoscopy center, providing maximum comfort and care to patients. Furthermore, our dedicated team of radiologists utilize the highest levels of technology in helping diagnosis and stage patients with colorectal cancer.

Although there is much work yet to be done in providing a cure for every patient with colorectal cancer, one thing is certain, UnityPoint will be here to help patients along the way to ensure that the Point of our care is You.

For more information on colorectal cancer screening, prevention and treatment, contact our Comprehensive Colorectal Cancer Center at (309) 672-4934.
## 2013 Top Ten Primary Sites

**UNITYPOINT HEALTH - METHODIST**

**2013 NUMBER OF PATIENTS**

<table>
<thead>
<tr>
<th>Primary Site</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast</td>
<td>172</td>
</tr>
<tr>
<td>Lung</td>
<td>156</td>
</tr>
<tr>
<td>Colon</td>
<td>57</td>
</tr>
<tr>
<td>Kidney/Renal Pelvis</td>
<td>38</td>
</tr>
<tr>
<td>Melanoma</td>
<td>38</td>
</tr>
<tr>
<td>Thyroid</td>
<td>36</td>
</tr>
<tr>
<td>Rectum, Rectosigmoid, Anus</td>
<td>29</td>
</tr>
<tr>
<td>Corpus Uteri</td>
<td>29</td>
</tr>
<tr>
<td>Bladder</td>
<td>28</td>
</tr>
<tr>
<td>Pancreas</td>
<td>27</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>610</strong></td>
</tr>
</tbody>
</table>

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**2013 Age at Diagnosis Comparison of Total Patients by Age Group with NDCB patients**

### Colon Cancer

![Colon Cancer Chart](chart_colon.png)

*Figure 1 displays patient age at diagnosis for 2013 colon cancer patients. Also displays the comparison data between 2011 NCDB patient data and 2013 Methodist patients.*

### Rectosigmoid and Rectum Cancer

![Rectosigmoid and Rectum Cancer Chart](chart_rectosigmoid.png)

*Figure 2 displays patient age at diagnosis for 2013 rectosigmoid and rectum cancer patients. Also displays the comparison data between 2011 NCDB patient data and 2013 Methodist patients.*

Source: NCDB, Commission on Cancer, ACoS, 2014

Percentages will not always add up to 100% because of methodology of rounding.
Figure 3 displays a comparison of stage at diagnosis between NCDB 2011 and Methodist 2013 data. In the 2011 and 2013 cases were staged according to the 7th edition of AJCC staging.

**2013 Survival Report**

**2003-2006 COLON CANCER**

### Observed Survival by Stage 2003-2006

**Colon Cancer AJCC Stage Group**

<table>
<thead>
<tr>
<th>YEARS</th>
<th>0</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>Total # Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage 0</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>93.10%</td>
<td>85.90%</td>
<td>78.70%</td>
<td>64.40%</td>
</tr>
<tr>
<td>Stage I</td>
<td>100%</td>
<td>96.10%</td>
<td>82.30%</td>
<td>88.40%</td>
<td>78.60%</td>
<td>78.60%</td>
<td>53</td>
</tr>
<tr>
<td>Stage II</td>
<td>100%</td>
<td>85.10%</td>
<td>79.60%</td>
<td>75.90%</td>
<td>66.60%</td>
<td>59.10%</td>
<td>54</td>
</tr>
<tr>
<td>Stage III</td>
<td>100%</td>
<td>63.00%</td>
<td>52.10%</td>
<td>41.30%</td>
<td>39.10%</td>
<td>34.70%</td>
<td>46</td>
</tr>
<tr>
<td>Stage IV</td>
<td>100%</td>
<td>42.10%</td>
<td>23.60%</td>
<td>21.00%</td>
<td>10.50%</td>
<td>5.20%</td>
<td>38</td>
</tr>
<tr>
<td><strong>Overall</strong></td>
<td><strong>100%</strong></td>
<td><strong>73.60%</strong></td>
<td><strong>64.40%</strong></td>
<td><strong>59.10%</strong></td>
<td><strong>52.00%</strong></td>
<td><strong>47.00%</strong></td>
<td><strong>206</strong></td>
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Figure 5 displays the observed survival by AJCC Stage Grouping for Colon cancer from 2003-2006.

### Observed Survival by Stage 2003-2006

**Rectosigmoid and Rectum Cancer AJCC Stage Group**

<table>
<thead>
<tr>
<th>YEARS</th>
<th>0</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>Total # Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage 0</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>4</td>
</tr>
<tr>
<td>Stage I</td>
<td>100%</td>
<td>95.60%</td>
<td>91.30%</td>
<td>91.30%</td>
<td>82.60%</td>
<td>73.90%</td>
<td>23</td>
</tr>
<tr>
<td>Stage II</td>
<td>100%</td>
<td>100%</td>
<td>91.60%</td>
<td>91.60%</td>
<td>82.50%</td>
<td>73.30%</td>
<td>12</td>
</tr>
<tr>
<td>Stage III</td>
<td>100%</td>
<td>92.80%</td>
<td>85.70%</td>
<td>78.20%</td>
<td>74.50%</td>
<td>63.30%</td>
<td>28</td>
</tr>
<tr>
<td>Stage IV</td>
<td>100%</td>
<td>63.10%</td>
<td>36.80%</td>
<td>26.30%</td>
<td>10.50%</td>
<td>10.50%</td>
<td>19</td>
</tr>
<tr>
<td><strong>Overall</strong></td>
<td><strong>100%</strong></td>
<td><strong>87.50%</strong></td>
<td><strong>78.20%</strong></td>
<td><strong>73.90%</strong></td>
<td><strong>65.30%</strong></td>
<td><strong>57.80%</strong></td>
<td><strong>86</strong></td>
</tr>
</tbody>
</table>

Figure 6 displays the observed survival by AJCC Stage Grouping for Rectosigmoid and Rectum cancer.

## Cancer Referral Sources

<table>
<thead>
<tr>
<th>unityPoint Methodist Resources</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autologous Peripheral Stem Cell Transplants</td>
<td>(309) 672-4611</td>
</tr>
</tbody>
</table>
|Breast Health Navigator | Breast Health Center  
112 Crescent Avenue  
Peoria, IL 61606  
(309) 672-5781 |
|Hospice Services | 120 NE Glen Oak Ave.  
Suite 200  
Peoria, IL 61636  
(309) 672-5746 |
|Hult Center for Healthy Living | 5215 N. Knoxville Ave.  
Peoria, IL 61614  
(309) 693-8139 |
|Oncology Nurse Navigator | (309) 672-4934 |
|PET/CT Imaging Center | Methodist Diagnostic Center  
112 Crescent Ave. (Lower Level)  
Peoria, IL 61606  
(309) 672-4190 |
|Physician Referral Center | (309) 674-2273 |
|Radiation Oncology Services | 221 NE Glen Oak Ave.  
Peoria, IL 61636  
(309) 672-5700 |

### Community Resources

- **American Cancer Society**: (800) 227-2345
- **Kids Konnected**: (309) 589-1800
- **Reach to Recovery**: (309) 688-3488

For more information about the programs and services UnityPoint Health - Methodist Cancer Care provides, visit unitypoint.org/cancer