Issue
A 60-year-old Saluda County woman living on a widow’s pension wanted to take her doctor’s advice about getting a colonoscopy. Uninsured since being laid off from her job a few years ago, she had no way to pay for the procedure that can cost about $1,500. Unfortunately, she is not alone.

Colorectal cancer remains the second leading cause of cancer-related death in South Carolina and across the United States. However, according to the CDC, “If everyone aged 50 or older had regular screening tests, as many as 60% of deaths due to colorectal cancer could be prevented.”

Intervention
The South Carolina Department of Health and Environmental Control (DHEC) Region 3 received a $35,000 grant from the South Carolina DHEC Division of Cancer Prevention and Control to raise awareness about colon cancer and the importance of being screened. This grant involved partners including but not limited to the South Carolina Cancer Alliance, Midlands Partnership Parish Nurse Program, South Carolina Gastroenterology Association, Consultants in Gastroenterology, and the Center for Colon Cancer Research at the University of South Carolina.

The project provided free colonoscopies to uninsured and underinsured people during two Saturday screening clinics as part of a pilot screening project. Dr. March Seabrook of Consultants in Gastroenterology in West Columbia, South Carolina, agreed to provide the colonoscopies at his facility. To receive a screening, the participant had to be uninsured or underinsured and 45 years or older for African Americans or 50 years or older for all other participants. Parish nurses played a tremendous role in the project. Some of their duties included:

- Recruiting participants during a series of Cancer Education Guide presentations given in the community.
- Collecting necessary demographic information, colorectal cancer screening history, individual health history, and family health history.
- Providing participants with the necessary preparations for the colonoscopy procedure.
- Calling the participants prior to the clinic to remind them about their appointments and the proper way to prepare for the procedure.
- Helping patients arrange for transportation to and from the clinic.
- Ensuring patients received information about the pathology report and providing any needed help after the clinic.

Though Dr. Seabrook waived his professional fee for these procedures, South Carolina DHEC Region 3 used cancer grant funds to reimburse Consultants in Gastroenterology to cover the Medicare facilities fee.

Impact
As a result of the two screening events in November 2007 and March 2008:

- Thirty people received a colonoscopy at no cost to them.
- Colorectal cancer screening was provided to people who would not have received screening otherwise.
- Twenty-one adenomatous polyps were removed from 10 patients.
- Several hyperplastic polyps were removed from six patients.
- One simple polyp was removed from one patient.

In February 2008, after seeing a notice in her weekly newspaper about the free screening, the 60-year-old Saluda County woman had her first colonoscopy, and had no polyps. She happily reports, “They said, ‘Whatever you’re doing, keep it up.’”

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