Understanding Colorectal Cancer, and its Treatment: Insights from Dr. Richard Birkett

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Boston, Massachusetts Sep 5, 2024 (Issuewire.com) - Dr. Richard Birkett, a leading Colon and Rectal Surgeon based in Greater Boston, offers invaluable insights into colorectal cancer, a condition that originates in the colon or rectum and can have significant implications for patients. With extensive expertise in minimally invasive robotic and laparoscopic surgery, Dr. Birkett is dedicated to enhancing patient outcomes and educating the public about this serious disease.

What Is Colorectal Cancer?

Colorectal cancer begins in the colon or rectum, often referred to as colon cancer or rectal cancer depending on its starting point. These two types of cancer are frequently grouped together due to their many similarities. Understanding the anatomy and function of the colon and rectum is crucial for recognizing how this cancer develops.

The colon and rectum form part of the large intestine, a critical component of the digestive system. The colon, a muscular tube approximately 5 feet long, is divided into four sections: the ascending, transverse, descending, and sigmoid colon. The rectum, connected to the sigmoid colon, leads to the anus, where waste matter is expelled from the body.

How Colorectal Cancer Develops

Colorectal cancer typically starts as polyps—small growths on the inner lining of the colon or rectum. While most polyps are benign, certain types, such as adenomatous polyps, can become cancerous over time. Factors like the size, number, and histology of polyps can influence the likelihood of cancer development.

Dr. Birkett explains that when cancerous cells form in a polyp, they can invade the layers of the colon or rectum wall and potentially spread to other parts of the body through blood or lymph vessels. The extent of cancer's spread determines its stage, which is crucial for treatment planning.

Types of Colorectal Cancer

The majority of colorectal cancers are adenocarcinomas, which originate from mucus-producing cells in the colon and rectum. While these are the most common, other less prevalent types include carcinoid tumors, gastrointestinal stromal tumors (GISTs), lymphomas, and sarcomas. Each type has distinct characteristics and may require different treatment approaches.

To diagnose colon cancer, various tests and procedures are utilized, including:

- **Colonoscopy**: This procedure involves using a long, flexible tube equipped with a video camera and monitor to examine the interior of the colon and rectum. During a colonoscopy, a doctor can also pass surgical instruments through the tube to remove polyps or take tissue samples for further analysis.
- **Tissue Sample (Biopsy)**: A biopsy involves removing a tissue sample for laboratory testing,

often performed during a colonoscopy. In some cases, surgery may be required to obtain the sample. Laboratory tests determine whether the cells are cancerous and assess the cancer's growth rate, helping the healthcare team develop an appropriate treatment plan.
- **Blood Tests**: Although blood tests are not used to diagnose colon cancer, they can provide insight into overall health, such as kidney and liver function or the presence of anemia, which might suggest colon cancer-induced bleeding. Additionally, some colon cancers produce a protein called carcinoembryonic antigen (CEA). Monitoring CEA levels through blood tests can help track the cancer's response to treatment and detect recurrence.

Colon Cancer Stages

After diagnosing colon cancer, further tests may be needed to determine the cancer's stage, which is crucial for treatment planning. Staging tests may include imaging scans of the abdomen, pelvis, and chest to locate and assess the size of the tumor. Often, the precise stage of the cancer is confirmed only after surgery.

Colon cancer stages range from 0 to 4, with lower numbers indicating that the cancer is confined to the colon lining. Stage 4 denotes advanced cancer, where the disease has spread to other parts of the body, a condition known as metastatic cancer.

Treatment

Colon cancer treatment typically involves surgery to remove the tumor. Other treatment options may include radiation therapy and chemotherapy, depending on the cancer's location, stage, overall health, and personal preferences.

Treatment for Early-Stage Colon Cancer: Treatment for early-stage colon cancer might involve less invasive procedures, such as:

- **Polypectomy**: Removal of polyps during a colonoscopy.
- **Endoscopic Mucosal Resection**: Removal of larger polyps and a small portion of the colon lining during a colonoscopy.

Surgery for Advanced Colon Cancer:

- **Partial Colectomy**: Involves removing the cancerous part of the colon, along with some surrounding healthy tissue. The healthy parts of the colon or rectum are often reconnected.
- **Ostomy**: If reconnection isn't possible, an ostomy may be created, allowing waste to exit the body through an opening in the abdominal wall.
- **Lymph Node Removal**: Nearby lymph nodes are typically removed and tested for cancer during colon cancer surgery.

Surgery for Advanced Cancer: When cancer cannot be removed entirely, surgery may be performed to alleviate symptoms such as blockages, bleeding, or pain. If the cancer has only spread to the liver or lungs, localized treatments or surgery, possibly combined with chemotherapy, may offer a chance for long-term cancer control.

Chemotherapy: This treatment uses potent medications to destroy cancer cells. It may be administered after surgery to target remaining cancer cells, before surgery to shrink the tumor, or in advanced cases to alleviate symptoms.

Radiation Therapy: Utilizing high-energy beams, radiation therapy can shrink tumors before surgery, relieve symptoms when surgery isn't an option, or be used alongside chemotherapy.

Targeted Therapy: These treatments attack specific molecules within cancer cells, often in combination with chemotherapy, and are usually reserved for advanced cases.

Immunotherapy: This treatment boosts the immune system's ability to identify and destroy cancer cells and is typically used for advanced colon cancer.

Palliative Care: A specialized approach that focuses on relieving pain and other symptoms associated with serious illness, palliative care enhances the quality of life during cancer treatment. It can be integrated with other treatments to help patients feel better and potentially live longer.

Dr. Richard Birkett: A Leader in Colorectal Surgery

Dr. Birkett's practice focuses on treating a range of colorectal conditions, including cancer, diverticulitis, GI immunologic diseases, and benign GI tract conditions. His commitment to utilizing advanced surgical techniques, such as robotic and laparoscopic surgery, ensures that patients receive the highest standard of care with minimized recovery times.

Beyond his clinical work, Dr. Birkett is an active contributor to medical literature, with numerous peer-reviewed manuscripts and book chapters to his name. As the site director for surgical residents, he is deeply involved in the education and mentorship of the next generation of surgeons.

About Dr. Richard Birkett

Dr. Richard Birkett holds dual qualifications as an MD and an MBA, providing him with a unique perspective on the intersection of healthcare, medical device innovation, and business strategy. His expertise extends to developing Sustainability/ESG programs within the healthcare industry.

An avid athlete, Dr. Birkett has completed multiple Ironman races and marathons, often running for charitable causes. His upcoming participation in the NYC Marathon for Camp Shriver underscores his commitment to giving back to the community through his athletic endeavors.

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