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EDITORIAL

A Test in Time

Published: February 24, 2012

Researchers had previously shown that colonoscopies, which look for and remove tumors and suspicious precancerous lumps in the intestines, could reduce the incidence of colorectal cancer. But they didn't know for certain that the procedure would save lives. Now [they have evidence that it does](#). A [study published in the latest issue](#) of The New England Journal of Medicine that tracked 2,600 patients for as long as two decades found that the test cut the death rate in half, a very substantial reduction.

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[Report Affirms Lifesaving Role of Colonoscopy](#) (February 23, 2012)

That should reassure millions of Americans who have undergone colonoscopies that the test was worth the unpleasant preparations. And it ought to goad millions who are still ducking the tests to get over their squeamishness.

There are several ways to detect colorectal cancers and precancerous growths that are recommended by doctors and expert groups. Some patients send stool samples to a laboratory to look for tell-tale traces of blood, preferably on an annual basis. Others get sigmoidoscopies, which examine the lower part of the colon, or more often colonoscopies, which examine the whole colon and are thought to be more reliable.

If nothing is found by the colonoscopy, the patient need not return for 10 years. People with polyps snipped out are advised to get retested in three years.

Unfortunately, too few people get any of the recommended screenings. The Government Accountability Office found that only a quarter of all Medicare beneficiaries ages 65 to 75 had undergone any of the recommended screenings from 2005 to 2009. And the Centers for Disease Control and Prevention and the National Cancer Institute found that only 58.6 percent of men and women between the ages of 50 and 74 got screened in 2010, far short of the national goal of 70.5 percent.

There is little that can be done to make colonoscopies more pleasant. To the extent that cost is a barrier for some people (the procedure can cost hundreds or thousands of dollars), the new health care reforms will greatly expand the number of people who can get colonoscopies and other proven preventive services without paying anything out of pocket. That is more good news.

A version of this editorial appeared in print on February 25, 2012, on page A18 of the New York edition with the

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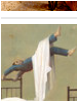





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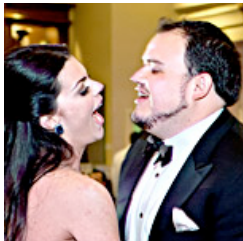
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