



Preventing Colorectal Cancer



The Importance of Offering Propofol during a Colonoscopy Procedure

Preventing Colorectal Cancer, a not-for-profit organization, encourages the public to take action and be screened for colorectal cancer. This issue brief is one in a series of publications to help educate the public in best practices for a colorectal cancer colonoscopy screening. It is important the Gold Standard be utilized to improve colon cancer detection rates and clinical outcomes. Studies show that more precancerous polyps are detected and removed during screening colonoscopies when propofol is administered by an Anesthesiologist or a Certified Registered Nurse Anesthetists (CRNA).

The Issue

In the United States, colorectal cancer is the second leading cause of cancer related deaths and yet, it is one of the cancers that through screening and healthy choices is preventable and treatable. In 1998, the Preventing Colorectal Cancer (PCC) was formed to ensure that health plans and payers were properly reimbursing for colon cancers. To enhance public awareness, President Clinton in 2000, dedicated March as National Colon Cancer Awareness Month. In 2014, the National Colorectal Cancer Roundtable began an initiative to reduce the incidence of colorectal cancer by increasing screening rates to 80% by 2018.¹

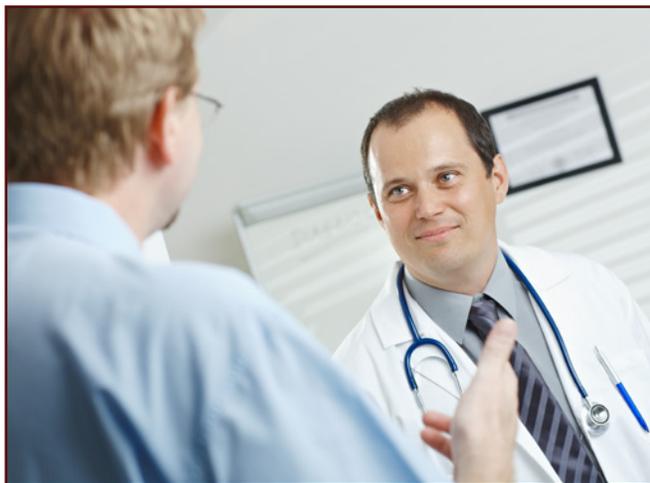
These and other campaigns such as the Centers for Disease Control and Prevention's Screen for Life: National Colorectal Cancer Action Campaign and community organized events like Chris4Life's "Scope It Out" have greatly increased the public's consciousness. But more work needs to be done.

Ensuring that payers properly reimburse for colonoscopies and informing the public about the

benefits of screening is only part of the struggle; the other part is moving people to take action. One of the hurdles is reducing the fear factor by addressing and overcoming the discomfort associated with the screening procedure. The PCC Board of Directors endorses the policy all patients undergoing a colonoscopy should have access to propofol through their insurance coverage under the supervision of a qualified professional as described in this Issue Brief.

Background

Several colorectal cancer screening test options are available, but the recognized Gold Standard is a colonoscopy with propofol. Use of propofol provides a painless approach to a colonoscopy, reduces the anxiety surrounding the procedure and leads to an increased rate of screening and an increase in the early detection of pre-cancerous polyps. Clinical outcomes will improve and eventually decrease health care costs by reducing the incidence of colon cancer.² Simply put, this is the most effective solution available.



Propofol was first approved by the U.S. FDA in October 1989 for induction and maintenance of anesthesia. As an injectable emulsion, it is administered intravenously by a trained professional. “It is very fast-acting and works by slowing brain wave activities,” says John F. Dombrowski, MD, an anesthesiologist/pain specialist at the Washington Pain Center in Washington, D.C.³ It is used in procedural sedation; for example; in endoscopic procedures like a colonoscopy and to sedate adult patients who are receiving mechanical ventilation.⁴

The Opportunity

Dr. Nancy Staats, Director of the Department of Anesthesiology, Advanced Endoscopy and Surgery Center, Eatontown, NJ, states, “Propofol is optimal for both the patient and the endoscopist in that it provides optimal conditions for endoscope advancement and viewing by the endoscopist, while providing superior comfort and recovery for the patient. It also has a lower risk for side effects, such as nausea.”⁵

Following manufacturer recommendations and for the safety of patients, propofol should only be administered by a licensed anesthesiologist or CNRA. These professionals are trained in the administration of general anesthesia, airway management and life support techniques.

When anesthesiologists or CRNAs administer propofol for monitored anesthesia care during a colonoscopy, patients have a faster recovery profile

than when sedated with synthetic opioids. In some cases, patients may become more heavily sedated with propofol, so as a safety procedure it is imperative that an anesthesiologist or CRNA be monitoring the patient.

A colorectal colonoscopy screening can be performed in a variety of locations. Office Based Surgery, Ambulatory Surgery Centers or Hospital Outpatient Departments are the standard options and determining the optimal setting for the patient is discussed in Preventing Colorectal Cancer’s *Issue Brief 11: Making an Informed Choice: Colonoscopy Locations Explained*.⁶

Insurance Reimbursement

The cost of having a colonoscopy screening with propofol has often been cited as a deterrent for people seeking this type of screening. In January 2015, the U.S. Centers for Medicare & Medicaid Services (CMS) released new policy and payment changes “CMS is including separately provided anesthesia as part of the screening service so that the coinsurance and deductible do not apply to anesthesia for a screening colonoscopy, reducing beneficiaries’ cost-sharing obligations under Part B.”⁷ In addition many health plans also will cover the charge for services rendered by an anesthesiologist or CRNA.

Some health plans have a Monitored Anesthesia Care (MAC) policy. This policy defines the medical necessity situations that would require administration of monitored anesthesia during procedures and hence determine reimbursement. This policy is commonly worded as follows: Use of monitored anesthesia care is considered not medically necessary for gastrointestinal endoscopic, bronchoscopic, or interventional pain procedures in patients at average risk related to use of anesthesia and sedation.

This policy only addresses anesthesia services for diagnostic or therapeutic procedures involving gastrointestinal (GI) endoscopy, bronchoscopy, and interventional pain procedures performed in the outpatient setting. It is always best to check with the health plan to determine coverage. In July 2012, PCC published an issue brief addressing why health insurers should cover propofol during a colonoscopy procedure.⁸

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Conclusion

The Gold Standard, a colorectal colonoscopy screening with propofol, will remove much of the anxiety associated with a colonoscopy screening. The patient's safety and comfort is achieved and research has shown the detection of polyps is increased.⁹ It's time to take action and be one of the good statistics in achieving an 80 percent screening rate by 2018.

ENDNOTES

- ¹ Simon, S. Saving 80% by 2018 screening Goal could Prevent 200,000 Colon Cancer Deaths in Less Than 2 Decades. (2015, March 12). Retrieved March 24, 2016 from <http://www.cancer.org/cancer/news/news/impact-of-achieving-80-by-2018-screening-goal>
- ² Preventing Colorectal Cancer, Issue Brief #2: *Preventing Colon Cancer: The Benefit of Propofol*. (2012, May) <http://www.preventingcolorectalcaner.org/IssueBrief/PCCIssueBrief2/PccIssueBrief2.html>
- ³ McMillen, M. Answers to questions about propofol use and abuse. Retrieved March 24, 2016 from <http://www.webmd.com/pain-management/features/propofol-faq?page=1>
- ⁴ Propofol. Wikipedia: The Free Encyclopedia. (2018, March 18). Retrieved March 24, 2016 from <https://en.wikipedia.org/wiki/Propofol>
- ⁵ Frangou, C. Propofol Sedation for Colonoscopy: A Consensus? (2088, September 23). Retrieved March 24, 2016 from <http://www.gastroendonews.com/Expert-Roundtable/Article/09-08/Propofol-Sedation-for-Colonoscopy-A-Consensus-/11510>
- ⁶ Preventing Colorectal Cancer, Issue Brief #11: *Making an Informed Choice: Colonoscopy Locations Explained*. (2015, November) <http://preventingcolorectalcaner.org/IssueBrief/PCCIssueBrief11/Pcc-Issue-Brief-11.html>
- ⁷ Centers for Medicare and Medicaid Services. Policy and payment changes to the Medicare Physician Fee Schedule for 2015. (2014, October 31). Retrieved March 24, 2016 from <https://www.cms.gov/newsroom/mediareleasedatabase/fact-sheets/2014-Fact-sheets-items/2014-10-31-7.html>
- ⁸ Preventing Colorectal Cancer, Issue Brief 3: *Health Insurers Should Cover Propofol Sedation During Colonoscopy Procedures*, (2012, July) <http://www.preventingcolorectalcaner.org/IssueBrief/PCCIssueBrief3/PCCIssueBrief3.htm>
- ⁹ Hoda, K. M., Holub, J. L., & Eisen, G. M. (2009). More Large Polyps are seen on Screening Colonoscopy with Deep Sedation Compared with Moderate Conscious Sedation, *Gastrointestinal endoscopy*. 69(5), AB119-120. Retrieved March 24, 2016 from <http://www.giejournal.org/article/S0016-5107%2809%2900611-7/abstract>



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Headquartered in Annapolis, MD, PCC is a not-for-profit 501(c)6 advocacy organization with the primary mission to educate both public and private stakeholders about the opportunities to reduce the incidence of colorectal cancer through promoting effective screening, prevention and care options for patients. Membership is open to all individuals and groups. For more information, visit www.preventingcolorectalcaner.org.

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