Statement of Shirley Heiligman

Senator Breaux, Senator Grassley and others on the committee, thank you for my opportunity to speak before you on March 6.

My name is Shirley Heiligman. I am married with two sons and two grandsons, and am a life-long resident of New York City. I worked as a travel consultant for thirty years. After retiring, I became a volunteer advocate for foster children in the Manhattan Family Court. Today, I am here as a member of the Colon Cancer Alliance, a national organization dedicated to support and advocacy for those touched by colorectal cancer.

My journey with colorectal cancer began in the late 1980's. My sister was diagnosed with colorectal cancer in 1988. After surgery and a short treatment course, she recovered and is doing well today.

In 1993, my doctor recommended that I be screened for colorectal cancer. He performed a sigmoidoscopy, in which a slender flexible lighted tube was used to inspect the lower third of my colon. The test was negative, and my doctor pronounced me to be in excellent health. In hindsight, a test which examines the entire colon, such as a colonoscopy or double-contrast barium enema, might have found my cancer earlier.

In October 1998, my doctor recommended that I have a routine screening colonoscopy which was luckily covered by Medicare. A colonoscopy uses a flexible lighted probe which can examine the entire colon and remove small polyps. I felt great and had no symptoms of illness, but the colonoscopy detected a tumor. Further diagnostic tests and surgery in November 1998 showed that the tumor had metasticized and spread to my lymph system.

There are two approved chemotherapy drugs for treatment of colorectal cancer -- 5-fluorouracil and Camptosar. My cancer was non-responsive to both drugs so I began to look for other treatment options. Fortunately I live near Memorial Sloan-Kettering Cancer Center, an institution known for its excellent research. I have enrolled in an experimental protocol at Sloan-Kettering; the protocol is presently showing good results. I have minimal side effects from the treatment; this has allowed me to maintain an adequate quality of life.

I have also begun to work with the Colon Cancer Alliance, a national patient advocacy and patient support organization. I am committed to raising awareness about this very preventable disease.

I was fortunate that my colonoscopy occurred in 1998. Prior to 1998, screening for colorectal cancer was not covered by Medicare. I find it very alarming that insurance companies are not routinely required to cover screening for colorectal cancer. It is my understanding that the risk of colorectal cancer increases after age 50 and for those with a family history of the disease. It seems to me that insurance coverage of colorectal cancer screening should be required for everyone at higher risk.

I believe that the best way to increase screening rates for senior citizens is to educate their doctors. Colorectal cancer screening should be a <u>routine</u> annual procedure, recommended uniformly by <u>all</u> physicians.

I also believe that general awareness and education efforts are very important. Senior citizens need to learn that these tests will detect colorectal cancer before their lives are threatened. Senior citizens need to feel comfortable asking their doctors about screening and talking about some of the common symptoms of colorectal cancer such as blood in stools, or a change in bowel habits.

The Senate has helped with awareness efforts. On behalf of the Colon Cancer Alliance, I applaud the Senate for passing Colorectal Cancer Awareness Month legislation in November 1999. The Colon Cancer Alliance is happy to be working with 34 other organizations in the country to make March 2000 -- the first National Colorectal Cancer Awareness Month -- a success across the country. Our members are working hard to get the word out about awareness and screening.

I would also like to thank Miss Couric for her efforts in raising awareness and increasing the research dollars available for colorectal cancer, two critically important goals. I have no doubt that her efforts and commitment will save many lives.

In closing, as a life-long New Yorker, I would like to tell you about my personal favorite awareness effort. You may have noticed my blue ribbon. Blue symbolizes colorectal cancer survivorship, in the same way that Miss Couric's organization has made a silver star the symbol of colorectal cancer awareness. On March 15 and 16, the Empire State Building will be bathed in blue light, on behalf of colorectal cancer survivors and in memory of those who have lost their battle.

Thank you again for inviting me to speak.