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**NEW COLONOSCOPY TECHNOLOGY COULD SAVE LIVES
THROUGH EARLY DETECTION**
Quincy Medical Center is the only local hospital in the area to utilize innovative device

Quincy, MA (March, 2011) – March is Colorectal Cancer Awareness Month and it's the perfect time to inform the public of a clinical trial under way at Quincy Medical Center (QMC) that may improve current screening techniques for this preventable disease. Daniel Mishkin, MD, a gastroenterologist on staff at QMC, is currently conducting a clinical research study using a medical device that can be used along with a standard colonoscope to improve a physician's ability to find abnormalities in the colon.

Colorectal cancer is one of the most commonly diagnosed cancers in the United States and it is the second leading cause of cancer-related deaths in the United States, with approximately 152,000 new cases and over 50,000 deaths annually. It is also potentially one of the easiest cancers to prevent, because most cancers in the colon arise from a type of polyp called an adenoma.

"If these pre-cancerous adenomas can be detected and removed, they never get to progress into cancers," explains Dr. Mishkin. "Yet, while it is widely agreed that colorectal cancer screening saves lives, there are limitations to our current screening methods, and this is what we wish to improve."

Colonoscopy is currently regarded to be the "gold standard" for detecting colorectal adenomas and cancers, and is the only method that allows both diagnosis and removal of abnormalities during a single procedure. However, research shows that 12-24% of adenomas and a significant number of cancers can be missed during routine colonoscopy, especially when they are located behind the folds and turns that naturally occur in the walls of the colon.^{1,2,3}

¹ Rex DK, Cutler CS, Mark DG, et al. Colonoscopic miss rates of adenomas determined by back-to-back colonoscopies. *Gastroenterology* 1997;112:24-8.

² Van Rijn JC, Reitsma JB, Dekker E, et al. Polyp Miss Rate Determined by Tandem Colonoscopy: A Systemic Review. *Am J Gastroenterol* 2006;101:343-50.

Dr. Mishkin is testing a new technology at Quincy Medical Center that could improve current screening results. An innovative device, the Third Eye[®] Retroscope[®] provides a retrograde view or “rear view” that enables a doctor to see behind folds in the colon wall, where cancers may be hiding. This FDA-cleared technology is a miniature video endoscope that is smaller in diameter than a ballpoint pen refill. It is contained within a standard colonoscope, acting much like a rear view mirror and providing improved visualization for the physician. After it is passed through the instrument channel of the colonoscope, the tip of the Third Eye Retroscope turns around so that its camera provides a reverse view that appears on a screen side-by-side with the traditional forward-looking view of the colonoscope. Several previous research studies have shown that “Third Eye colonoscopy” can detect up to 23-25% additional adenomas compared to standard colonoscopy in patients who have average risk for colorectal cancer.^{4,5,6}

“I have been using the Third Eye Retroscope for some time now and have been very impressed with what I have seen,” says Dr. Mishkin. “Three recent studies have shown a significant increase in the detection of pre-cancerous adenomas. My study in a community hospital setting is designed to further clarify the additional benefit of this equipment and to determine if there is a clinical advantage. It could potentially redefine what the gold standard procedure is for colorectal cancer screening.”

Dr. Mishkin’s study is the first to use this technology to look only at patients who have above-average risk for developing adenomas and cancer due to one of three factors:

- History of polyps found during a previous colonoscopy
- History of recent symptoms that could indicate a problem in the colon
- Family history of colorectal cancer

Dr. Mishkin is enrolling 150 patients who are already planning to have a colonoscopy either at Quincy Medical Center or at the Atrius Health Endoscopy Center in Weymouth. Because funding is provided through a research grant, there will be no additional cost to patients who participate in the study beyond the usual fee for a standard colonoscopy.

“This study is designed to evaluate Third Eye colonoscopy in the “real world” settings of a leading community hospital and an ambulatory endoscopy center – typical of the locations where most colonoscopies are performed in the U.S. – rather than in a university medical center,” says Jack Higgins, MD, Chief Medical Officer of Avantis Medical Systems, which developed the device. “Also, in contrast to the largest and most recent study of the Third Eye in which patients

³ Pickhardt PJ, Nugent PA, Schindler WR, et al. Location of adenomas missed by optical colonoscopy. *Ann Intern Med* 2004;141:352-9.

⁴ Wayne JD, Heigh RI, Rex DK, et al. A Retrograde-Viewing Device Improves Detection of Adenomas in the Colon: A Prospective Efficacy Evaluation. *Gastrointest Endosc* 2010;71:551-6.

⁵ DeMarco DC, Odstrcil E, Lara LF, et al. Impact of Experience with a Retrograde-Viewing Device on Adenoma Detection Rates and Withdrawal Times during Colonoscopy: the Third Eye Retroscope Study Group. *Gastrointest Endosc* 2010;71:542-50.

⁶ Leufkens AM, DeMarco DC, Siersema PD, et al. Effect of a Retrograde-Viewing Device on Adenoma Detection Rate during Colonoscopy: The “TERRACE” Study. *Gastrointest Endosc* 2011;73:480-9.

underwent two complete procedures, one *with* and one *without* the Third Eye, Dr. Mishkin will perform a single Third Eye colonoscopy procedure exactly as he and other physicians do it in their normal practice.”

Dr. Mishkin practices with Granite Medical Group in Quincy and is nationally known for his involvement in research of new technologies in the field of Gastroenterology. A prolific author and nationally known lecturer, he recently edited his own GI textbook and has been sought as a clinical consultant for NASA.

About Quincy Medical Center

Quincy Medical Center is a 196-bed acute care community-teaching hospital, providing the highest quality, most personalized and comprehensive medical and surgical services to patients throughout the South Shore. A private, nonprofit hospital, QMC has played a vital role in the community since 1890, serving the needs of its diverse patient population without exception. Quincy Medical Center is uniquely positioned for the health care system of the future, as it is a high value provider with outcomes at or better than most national quality benchmarks and it delivers this care in a cost efficient manner as one of the lowest cost providers in the region. QMC has a clinical affiliation with Tufts Medical Center.