

## Barrett's Esophagus

The esophagus is a muscular tube connecting the mouth and pharynx to the stomach. Barrett's esophagus is an esophageal disorder which may predispose to esophageal cancer. $25 \%$ to $86 \%$ of adenocarcinoma of the esophagus arises in a Barrett's esophagus. Esophageal cancer, while treatable, is rarely curable with a five year survival rate of $5 \%$ to $20 \%$. It is possible that common factors are involved in the causation of both lesions. When Barrett's esophagus is found, periodic endoscopic surveillance is recommended so biopsy can identify dysplasia or precancerous lesion.

Barrett's is found by biopsy on endoscopic evaluation of patients with symptoms of heartburn or patients with other upper gastrointestinal symptoms.

Treatment is directed at gastroesophageal reflux disease (stomach acid washes into the lower esophagus) if present and may require an operation to prevent reflux. If Barrett's esophagus was an incidental finding and there is no dysplasia, endoscopy and biopsy are recommended every other year. If dysplasia is present, resection of part of the esophagus is done. Low grade dysplasia is treated with intensive anti-reflux therapy. Patients with high grade dysplasia or insitu cancer require removal of the esophagus.

If there is no dysplasia, the prognosis for Barrett's esophagus is unknown. The risk of adenocarcinoma if dysplasia is present varies from $10 \%$ to $50 \%$ depending on the study done.

## Underwriting consideration:

Barrett's esophagus
Present without dysplasia
Present with history of dysplasia History of Barrett's, resolution documented by endoscopy

Table B
Decline
Non-rated

To get an idea of how a client with Barrett's Esophagus would be viewed in the underwriting process, feel free to use the Ask "Rx" pert underwriter on the next page for an informal quote.

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# Barrett's Esophagus - Ask "Rx" pert underwriter <br> (ask our experts) 

Producer $\qquad$ Phone $\qquad$ FAX $\qquad$
Client $\qquad$ Age/DOB $\qquad$ Sex $\qquad$
If your client has a history of Barrett's Esophagus, please answer the following:
(1) Please list date of diagnosis: $\qquad$
(2) Has your client had any of the following treatments? (if yes, please note dates)
$\square$ follow-up endoscopy(ies) $\qquad$ (date(s)

- surgery $\qquad$ (date)
(3) Are any of the following present (please provide pathology report)?
$\square$ dysplasia - low grade
$\square$ dysplasia - high grade
(4) Is your client on any medications?
$\square$ yes, please give details $\qquad$
$\square$ no
(5) Has your client smoked cigarettes in the last 12 months?
$\square$ yes, please give details $\qquad$
$\square$ no
(6) Does your client have any other major health problems (ex: heart disease, etc.)?
yes, please give details $\qquad$
$\square$ no
After reading the Rx for Success on Barrett's Esophagus, please feel free to use this Ask "Rx" pert underwriter for an informal quote.

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