

IMPAIRED RISK REFERENCES

Issue 11

Underwriting Colon Cancer

THE CASE

STUDY FOR

THIS MONTH

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Meet Ken Larson, member of the impaired risk team. Ken has been an underwriter for over 25 years in career, reinsurance, brokerage and substandard brokerage. Be sure to give Ken a call on your next tough case.



A 65 year old man is applying for \$500,000 of term life insurance. He was diagnosed with colon cancer this year. The cancer was in a polyp. The pathology report indicated it was a stage A and grade 2 cancer. Current evaluation is normal.

Cancer is the wild overgrowth of cells. It can occur in any tissue of the body. Some tissues are more susceptible to cancer than other tissues. The colon is the second most vulnerable internal organ in the body for cancer to originate. The organ most prone to cancer for males is the prostate, and for females, the breast.

Cancer cells grow quickly and can spread elsewhere from the original site where they do their major harm. They can take over other organs, harming normal cells in the process, producing a toxic effect on vital tissues, causing life threatening infections and sometimes death.

All colon cancers begin in polyps. Polyps are benign outgrowths on the colon inner surface that can become malignant as they become large. When they are about an inch wide, the chance of malignancy becomes a serious possibility. For this reason, an important part of health maintenance is screening the colon for polyps. People over age 50 are particularly prone to polyps and screening is more important.

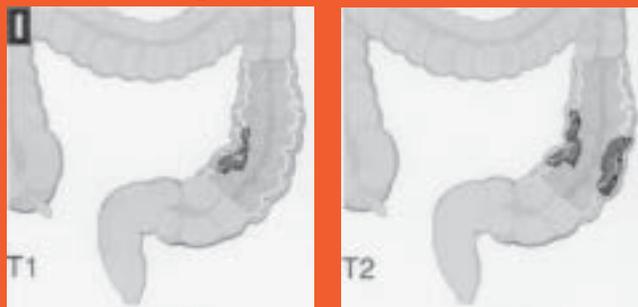
There is no known cause of colon cancer, but heredity is a strong factor in its development. There is also a dietary element that makes people more susceptible to colon cancer. Most likely the genes in the colon cells in some families become more easily damaged by dietary factors. This leads to the wild growth of cells.

The cancer pathology report provides the most crucial information to the underwriters; the *stage* and *grade* are primary indicators of the cancer prognosis. The *grade* is determined by the appearance of the cancer cells under the microscope. The higher the grade, the more bizarre the cells appear and the worse the

prognosis. The *stage* is determined by the size of the tumor. The larger the tumor, the worse the prognosis. Both stage and grade are found on the pathology report. The higher the grade and the stage, the longer the underwriting postponement. In these cases, recurrence and spread of the tumor are more likely. When an offer becomes possible, there is a higher flat extra depending on the mortality assessment.

In the case study, the most likely offer will be

Stages of Colon Cancer



Stage A

Stage B

standard. Cancer in a polyp does not spread easily and is an extremely low risk for the future mortality. In contrast, if this was a "B" stage tumor and the grade was "3" (more bizarre cells) then the tumor has a larger chance of spreading. This would require postponement of 2 years and then a temporary flat extra. There would be a higher risk of recurrence and spreading more possible. Current information is essential in underwriting a cancer history.

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