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## Physician Spotlight



### William J. Harb, MD

#### *Harb Takes Inherited Colorectal Cancer Personally and Works to Beat It*

tis, as well as common anorectal problems such as hemorrhoids, anal fissures and anal fistulas. To treat colon cancer and premalignant lesions of the colon such as polyps, Harb employs a minimally invasive procedure for colon resection.

An active member of the American Society of Colon and Rectal Surgeons, Harb has served on

several of the organization's committees. Currently, he's a member of the Socioeconomic Committee, which keeps tabs and makes recommendations on issues such as procedural codes, billing and charges for the specialty.

Harb is also a member of a narrowly focused organization called the Collaborative Group of the Americas on Inherited Colon Cancer, established to improve understanding of the basic science of inherited colon cancer and the clinical management of the disease among affected families. One of the organization's strengths is as a resource for institutions and individuals interested in starting a registry of families with inherited colon cancer syndromes. The collaborative was founded in 1995 for physicians, researchers and even individuals in fields such as epidemiology, statistics, social work and counseling who are based in North and South America.

Harb also works to spread the word about the dangers of colorectal cancers and the importance of patient screening. About 140,000 new cases of colorectal cancer are diagnosed each year in the United States and another 56,000 people die annually of the disease. Yet colorectal cancer can be prevented and cured if detected and treated early.

"I think awareness could be increased, but a lot of it is some reluctance on the part of patients in screening for colorectal cancer," Harb acknowledged. "We do a great job with breast cancer, and

upwards of 80 percent of women are getting their mammograms to detect breast cancer, but it's only about 50 percent for colon and rectal cancer so we've obviously got a lot of room for improvement."

He said a colonoscopy is the most common screening test, recommended at age 50 for almost everyone. For people with a family history, the recommended age is 40 or 10 years before the age of diagnosis of the youngest relative stricken with the disease.

Harb said the most rewarding facet of his job is caring for his cancer patients, "seeing them through their battle with cancer, and then they come back and they're hopefully doing well." He admitted that a challenge of his profession is helping reluctant patients broach the subject of colon, rectal and anal maladies. "Obviously, it's not something that everybody talks about at cocktail parties," he quipped. "You just try to relax them and let them know that they're not the first person you've seen with this kind of problem."

In addition to Harb's family history, his love of the day-to-day interaction with patients also led to his choice of a specialty. He received his medical degree from the University of Tennessee Health Science Center in Memphis and completed his general surgery residency there in 2004. Then he spent a year at M.D. Anderson Cancer Center in Houston in training for head and neck cancer. "There, I realized it would have been difficult to take care of head and neck cancer in a private-practice setting," he said. Thus, he then completed a year-long colon and rectal surgery fellowship in Pittsburgh.

A Knoxville native, Harb then set about returning home to Tennessee and landed in Nashville, where several relatives live in the area. Describing himself as "still single," he's a hunter and history buff. Yet his favorite leisure pursuit is scuba diving. "I flee to the Caribbean at the first chance available," he said.

BY SHARON H. FITZGERALD

**W**illiam J. Harb, MD, was 12 years old when his paternal grandfather died of colon cancer, and the death directly influenced the direction of the boy's life. Today, Harb is a board-certified general surgeon who specializes in the surgical management of diseases of the colon and rectum.

"Actually, four of my family members have had colon cancer," Harb said, adding that it wasn't until he was in medical school that he realized the prevalence of the disease among his family members. Both the father and brother of Harb's mother died of colon cancer, and Harb's paternal grandmother suffered from colon cancer and beat the disease, thanks to surgery.

"I've made genetic testing for colon cancer one of my clinical interests. I do a lot of genetic testing for colon cancer for not only people who develop colon cancer at a young age but for people with strong family histories," Harb said. "We tend to collaborate with some physicians around the country with some of our data."

One of four physicians with Cumberland Surgical Associates in Nashville, Harb has privileges with Baptist Hospital. In addition to treating cancer, he also treats inflammatory bowel disease including Crohn's disease, ulcerative colitis and diverticuli-

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