**Soundbite script – Age isn’t just a number when it comes to cancer**

**Peggy Rogers, nurse practitioner in genetics and medical oncology, OSF HealthCare**

“For women, they are the caregivers in the family, and they tend to worry about everyone else besides themselves, and maybe put off seeking care sooner. But women also encourage their husbands to seek and visit with their provider. So that’s a positive. But in general, I would say we have to keep talking.” (:.25)

**Peggy Rogers, nurse practitioner in genetics and medical oncology, OSF HealthCare**

“I think the nuance that we found is it’s more common to find gastric cancers, which I don’t think people realize, and I don’t think people are aware of, the signs for gastric cancer can be as simple as abdominal pain and nausea or feeling full quickly, and they may need medical attention sooner.” (:.@5)

**Peggy Rogers, nurse practitioner in genetics and medical oncology, OSF HealthCare**

“We are concerned that obesity is an epidemic, and it's not just overconsumption of food and inactivity. "It’s the types of foods that people are eating, which is processed, it's quick, it's easy, but it's not the most beneficial.” (:.37)

**Peggy Rogers, nurse practitioner in genetics and medical oncology, OSF HealthCare**

“I think working towards having a visit at least once a year to establish with a provider – establish goals for their health care – is very important and sometimes family history is contributory and why people get cancers. So those are discussions that you can have with your primary care provider. Maybe they need a referral or their family member that's been affected with cancer should consider a genetic risk assessment to further look at what may be contributing to some of the cancers in the family, even at early onset.” (:.20)