

Bowel Cancer

is preventable if detected early

Prevention is the key

What is my risk of bowel cancer?

Bowel cancer is the most common internal cancer in the country and the second leading cause of death after lung cancer. Almost all bowel cancers begin from a small benign polyp which slowly enlarges and then has the potential to become a cancer. Polyps are growths which occur in the lining of the bowel. Most polyps will cause no symptoms, but because any bowel polyp has the potential to become a cancer, all polyps should be removed.

There are 40 patients diagnosed everyday with bowel cancer, of which 12 will die because the cancer is diagnosed too late.

This emphasises the need for early diagnosis and prevention.

The Gut Foundation recommends bowel cancer testing to start from 40 because 1 in 10 bowel cancers are in individuals under the age of 50.

People at HIGH RISK of bowel cancer

Your risk of developing bowel cancer is increased if:

- You have one or more family members who have had bowel cancer or polyps.
- You have had bowel cancer or polyps
- You have had extensive Ulcerative Colitis

If you are in any of these groups it is important you discuss with your doctor a program of surveillance.

There are no known risk factors apart from age

Among those who develop bowel cancer, 4 out of 5 have no known risk factors. Bowel cancer testing aims to identify people who have polyps or early cancer but no risk factors or symptoms.

What tests are there available for bowel cancer prevention?

There are two tests available, Faecal Occult Blood Testing (FOBT) and Colonoscopy.

FOBT

Polyps bleed occasionally and this hidden blood can be picked up in a FOBT (faecal occult blood test). The FOBT kit consists of two small tubes containing a small sampling wand. The wand is scraped over the surface of the stool, or inserted into the stool a few times then placed back into the small tube, then put in the envelope and posted to the pathology company or dropped off at the GP or pathology office. The wand takes tiny samples of the stool; the pathology company will process the samples and see if there is any hidden blood in the stool.

A positive FOBT result does not mean a diagnosis of bowel cancer, it just means some hidden blood has been detected and it needs investigating by a colonoscopy.

A positive FOBT test must be followed by a colonoscopy. An FOBT kit is very cheap, and it can be done at home. The Gut Foundation recommends the FOBT kit is done once a year.

Colonoscopy

Colonoscopy is a tiny camera that examines the entire surface of the bowel; samples of areas can be taken, and if polyps are present gastroenterologists can usually remove them then and there.

Individuals at high risk of bowel cancer should be monitored via colonoscopy and have a colonoscopy every 5 to 10 years depending on their gastroenterologist's advice.

Remember

- Early diagnosis and removal of polyps by colonoscopy is important
- Check if you are in a high risk group
- Do not ignore a change in bowel habit or rectal bleeding



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