
11: EARLY DETECTION

Screening for bowel cancer can reduce the risk of death from bowel cancer in people over the age of 50.

11.1 SCREENING TESTS FOR BOWEL CANCER

See your doctor and have regular bowel check-ups if you are over 50 years of age or have:

- any of the warning signs for bowel cancer (listed on **p63**)
- a lot of bowel cancer in the family, or
- a condition known as FAP or HNPCC. (See **p65** 'Bowel cancer in families' for details).

Your doctor should begin your bowel check-up by taking a thorough history focusing on your risk factors. In particular he/she may ask about:

- your symptoms
- your family history of bowel cancer
- your history of benign bowel conditions (eg polyps and adenomas)
- your history of bowel cancer
- any other conditions of the bowel you may have had, eg inflammatory bowel disease.

Your doctor will then perform a physical examination, feeling for any areas in your abdomen that may be enlarged, followed by a rectal examination where the doctor feels inside your rectum with a gloved finger to find any abnormal lumps or swelling (see **p19** 'Rectal examination' for more information).

If further screening for bowel cancer is required, there are two possible tests which you may have, a faecal occult blood test (FOBT) or a sigmoidoscopy. In some cases you may have both. These tests are described in more detail below.

Faecal occult blood test (FOBT)

The faecal occult blood test (FOBT) is a test used to screen people for bowel cancer.

Recommendation:

It is recommended that people over the age of 50 have an FOBT every two years (or every year if possible).

What does the test involve?

The FOBT involves collecting three small samples of faeces (bowel motions) collected on different occasions, smearing them on a slide and sending them to a laboratory to be checked. You do the test in your own home, and return the samples to your doctor or laboratory for analysis.

The test can detect microscopic amounts of blood in faeces. If there is blood present, this may have come from a cancer in the bowel. Your doctor will advise you if you need to follow any special dietary restrictions during the testing period.

What if I have a positive screening test?

An FOBT can detect up to 80 to 90 per cent of bowel cancers if the recommended dietary restrictions are followed accurately. A positive screening test using FOBT means that blood has been detected in a sample, and bowel cancer *may* be present.

Everyone who has a positive test should have further tests to find out whether or not they have bowel cancer. Most will not have cancer, but a few will, and early diagnosis will greatly improve their chance of cure. Remember, there is a 90 per cent chance of cure if the cancer is found at an early stage.

Where can I get my test?

You can ask your doctor about having an FOBT, or call the Cancer Information Service on 13 11 20 for more information.

Recommendation:

Provided there has been a full discussion of the risks involved, it is recommended that people over the age of 50 who are concerned about their risk of developing bowel cancer, and who do not have a family history of bowel cancer, have an FOBT.

Sigmoidoscopy

This is another test which can be used to screen for bowel cancer. Sigmoidoscopy involves a doctor examining your rectum and lower colon through a flexible or rigid tube which is inserted into your anus. For more information on sigmoidoscopy refer to **p19** 'Sigmoidoscopy'. The benefits of screening by sigmoidoscopy are not as well established as with FOBT, but it is likely to be highly protective.

It is advisable for people over the age of 50 to have screening by flexible sigmoidoscopy every five years. However, it is important that if you develop symptoms in between screening tests, or if any other risk factors become evident (such as a close member of the family developing bowel cancer), you should see your doctor.

Recommendation:

In addition to having FOBT screening, people over the age of 50 years are advised to have flexible sigmoidoscopy every five years.

11.2 WARNING SIGNS

There are several warning signs you can watch for which may indicate the presence of bowel cancer.

It is important to note that these signs can be caused by a number of medical conditions, not just bowel cancer . If you have a persistent change of this sort, you should see your doctor.

The most common symptom of bowel cancer is bleeding from the anus (or back passage).

Other symptoms include:

- persistent change in your normal bowel pattern, such as diarrhoea or constipation
- feeling that your bowel does not empty completely
- recurring pains or cramps in your abdomen or rectum
- loss of weight without any obvious reason
- general weakness, tiredness and breathlessness. These may be due to anaemia caused by a lack of iron, and this type of anaemia can be a result of bowel cancer.

Everyone over the age of 40 should watch out for warning signs of bowel cancer. See your doctor promptly if you notice any of the above symptoms. For more information about these symptoms, see **p9** 'How might bowel cancer affect me?'.

Recommendation:

All people with suspicious bowel symptoms or rectal bleeding should be investigated, especially if other risk factors (such as older age or family history) are present, or in any person over the age of 40.

People under the age of 40 should be investigated if there is a positive family history, if there is not an identified cause of symptoms, or if symptoms are persistent.

**Guidelines for the prevention,
early detection and management of
colorectal cancer: *A guide for patients,
their families and friends***

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