

Health & Fitness Tips

Bowel Cancer - Fighting Big Killers

by Rebecca Codey - RAAFsafe - Autumn 2008

About 90 Australians die each week from bowel cancer — and its incidence is on the rise.

According to the Australian Institute of Health and Welfare (AIHW) Report, bowel cancer is now the second most common cause of cancer-related death, after lung cancer. Current trends suggest the disease, also known as colorectal cancer, will affect about one in 17 men and one in 26 women before the age of 75; among the highest rates of bowel cancer in the world. (Australian Government Department of Health and Ageing)

Author of the AIHW report, Ilona Brockway says the upward trend in bowel-cancer rates may be due to the increased ability to screen for the disease.

“But also lifestyle behaviours like alcohol intake and obesity play a part in that,” she says. “The other thing to remember is that the rates increase with age so as our population ages we pick up more of this disease.”

Even if the increase in bowel cancer rates can be attributed in part to increased screening and an ageing population, this year more than 12,800 Australians will be told they have bowel cancer; and around 4750 will die (Bowel Cancer & Digestive Research Institute Australia).

The statistics are shocking — there is no doubt about it. But, there is hope. Department of Health and Ageing information says that although no cancer is completely preventable, it is believed that eating a healthy diet and exercising regularly could prevent 66 to 75 per cent of bowel cancer cases.

The Cancer Council NSW reiterates this. “Some people who develop bowel cancer inherit damaged genes from their parents but, for most people, age and eating habits contribute to developing bowel cancer,” the website states. “Physical activity and a diet high in vegetables and fibre can help protect against bowel cancer. A high meat intake and alcohol increases the risk.”

Bowel cancer is also one of the most curable cancers if detected early. Unfortunately there may be few, if any, early warning symptoms, according to the Bowel Cancer & Digestive Research Institute Australia. Therefore, it's vital for people to listen to their bodies, to heed any signs that something may be amiss.

Defence screens all ADF members over the age of 50 with a simple Faecal Occult Blood Test (FOBT), as outlined in [Health Directive 242 — Australian Defence Force Health Promotion Program](#).

The Government offers eligible Australians the chance to undergo free bowel cancer screening through its National Bowel Cancer Screening Program. The program offers screening to people turning 55 or 65 years of age between 1 May 2006 and 30 June 2008. At this stage the program will be run until the end of June, with its extension reliant on budget funding.

Eligible people are posted an invitation to complete a FOBT in the privacy of their own home and mail it to a laboratory for analysis. There is no cost involved in completing the FOBT. These screening tests have been shown in overseas clinical trials and in the Bowel Cancer Screening Pilot Program to be simple to use and highly effective. Participants with a positive FOBT result will be advised to discuss the result with their doctor, who will generally refer them for further investigations, usually a colonoscopy.

For more information phone the National Bowel Cancer Screening Program Information Line on 1800 118 868 or visit: <http://www.cancerscreening.gov.au/internet/screening/publishing.nsf/Content/bowel-1lp>

Information in this feature is intended as a guide only. Anyone concerned about their health should seek professional medical advice.



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Australian Government Department of Health and Ageing

Colorectal Cancer - Facts in black & white

About the bowel

The bowel is part of the food digestive system. It connects the stomach to the anus, where waste materials (called a bowel motion or faeces) are passed out of the body. The function of the bowel is to finish digesting food by absorbing water and nutrients.

The bowel has three parts:

- the small bowel, which mainly absorbs nutrients from broken-down food;

- the colon, which mainly absorbs water; and

- the rectum, which stores waste material until it is passed from the body through the anus.

The colon and rectum together are known as the large bowel. Bowel cancer usually affects the large bowel; this is why the disease is also known as colorectal cancer. Cancer of the small bowel is rare.

What is bowel cancer?

Bowel cancer is a malignant growth that develops most commonly inside the large bowel. Most bowel cancers develop from polyps — tiny growths inside the colon or rectum — which look like small spots on the bowel lining or like cherries on stalks. Not all polyps become cancerous and if polyps are removed, the risk of bowel cancer is reduced.

How bowel cancer develops

The development of bowel cancer generally takes many years. It begins on the inside wall of the bowel and can grow there for several years before spreading to other parts of the body. Often very small amounts of blood, not visible to the naked eye, are leaked from these cancers long before any symptoms develop. This blood is then passed into the faeces.

Symptoms

Bowel cancer can develop with few, if any, early warning symptoms. Symptoms of bowel cancer can include: bleeding from the rectum or any sign of blood after a bowel motion; a recent and persistent change in bowel habit, for example looser bowel motions, severe constipation and/or needing to go to the toilet more than usual; unexplained tiredness (a symptom of anaemia); and abdominal pain.

People who have symptoms should see their doctor, even if no blood is detected in their Faecal Occult Blood Test (FOBT), as soon as possible.

If a person has rectal bleeding, do they have bowel cancer?

The presence of rectal bleeding does not necessarily mean a person has bowel cancer as there are many causes of rectal bleeding. However, symptoms of bowel cancer, including rectal bleeding should be discussed with a doctor as soon as possible so that the cause of bleeding can be found.

Can bowel cancer be cured?

Bowel cancer can be treated successfully if detected in its early stages; however, fewer than 40 per cent of bowel cancers are detected early. International randomised control trials have demonstrated that population screening for bowel cancer, using FOBTs, can reduce deaths from bowel cancer by 15–40 per cent.

Can bowel cancer be prevented?

While no cancer is completely preventable, it is believed that eating a healthy diet and exercising regularly could prevent 66 to 75 per cent of bowel-cancer cases. It is never too late to make changes to diet and lifestyle.

Who is at risk?

Both men and women are at risk of developing bowel cancer.

The risk is greater for people who:

- are aged 50 years and over — risk increases with age;
- have a significant family history of bowel cancer or polyps;
- have had an inflammatory bowel disease such as Crohn's disease or ulcerative colitis; or
- have previously had special types of polyps, called adenomas, in the bowel.

People at above average risk of bowel cancer should talk to their doctor about relevant screening options.

Family history

A person is considered to have a significant family history of bowel cancer if a close relative (parent, brother, sister or child) developed bowel cancer at a young age (under 55 years) or if more than one relative on the same side of your family has had bowel cancer.

More than 75 per cent of people who develop bowel cancer do not have a family history of the disease.

Those who think they have a family history of bowel cancer should talk to their doctor about their risk of getting the disease.

Source: [Department of Health and Ageing](#)

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