

## WHAT ARE THE SYMPTOMS OF BOWEL CANCER?

The symptoms of bowel cancer can include any of the following:

- Blood in your bowel motion or bleeding from the back passage
- A lasting change (more than a month) in your normal bowel motion, such as diarrhoea or constipation
- Feeling that you have not emptied your bowel fully after a motion
- Pain or discomfort in your abdomen (tummy) or back passage
- Trapped wind or fullness in your tummy
- Weight loss for no reason
- Ongoing general tiredness or weakness

It is important to remember that all these symptoms can also be due to complaints other than bowel cancer. However, if you have any of these symptoms it is important that you have them checked by your GP.

## CAN I BE SCREENED FOR BOWEL CANCER?

Testing for bowel cancer when you have no symptoms is called screening. Screening involves a test that checks for hidden blood in your bowel motions. BowelScreen is the national bowel cancer screening programme it is a government-funded service delivered by the National Cancer Screening Service (NCSS). Men and women aged between 60 and 69 will be asked to take part in the screening programme and are sent a home test kit called FIT (Faecal Immunochemical Test) in the post. For further information Freephone Information Line: 1800 45 45 55. Website [www.bowelscreen.ie](http://www.bowelscreen.ie)

## HOW IS BOWEL CANCER FOUND?

It is important to visit your GP if you are worried about any symptoms. You may need some of the following tests:

- Your doctor may examine your back passage. This test may be slightly uncomfortable but it is not painful
- A stool (faeces) sample may also be examined to check for hidden blood

Further tests to look inside your bowel may be arranged if necessary e.g. a colonoscopy.

## WHAT IF IT IS CANCER?

If tests show that you have bowel cancer your doctor will plan your treatment depending on a number of factors including:

- The type of cancer cells found
- Results of your tests
- Your general health

The main treatments for bowel cancer are:

- Surgery: removal of part or all of the bowel
- Chemotherapy: the use of drugs that kill cancer cells
- Radiotherapy: the use of high energy x-rays to kill cancer cells
- Biological therapy: this therapy uses the body's immune system to kill cancer cells

It is important to remember that your bowel cancer can be treated and cured successfully if it is caught early.

what you should know

## FURTHER INFORMATION

Anyone who is concerned about bowel cancer or about cancer in general can speak with a specialist nurse in confidence by calling the National Cancer Helpline on Freephone 1800 200 700. The Helpline is open Monday–Thursday 9am–7pm, Fridays 9am–5pm.

Those who wish to speak to a specialist nurse can also contact us through our:

- **Walk-in service** – visit us in person at the Irish Cancer Society offices at 43/45 Northumberland Road, Dublin 4
- **Email service** – email us at [helpline@irishcancer.ie](mailto:helpline@irishcancer.ie)
- **CancerChat** – chat live on the web with a specialist cancer nurse at [www.cancer.ie](http://www.cancer.ie)
- **Message Board** – visit our online bulletin board at [www.cancer.ie](http://www.cancer.ie)
- **Daffodil Centres** are located in a number of Irish hospitals and are staffed by a specialist nurse and trained volunteers.

## BOWEL CANCER SUPPORT GROUP

The Irish Cancer Society offers support to people with bowel cancer. This group will enable a person newly diagnosed or living with bowel cancer to meet with and chat to an Irish Cancer Society trained volunteer who is living with bowel cancer (peer support). If you wish to speak to a volunteer, contact the National Cancer Helpline on Freephone 1800 200 700. Details of cancer support centres around the country are also available.

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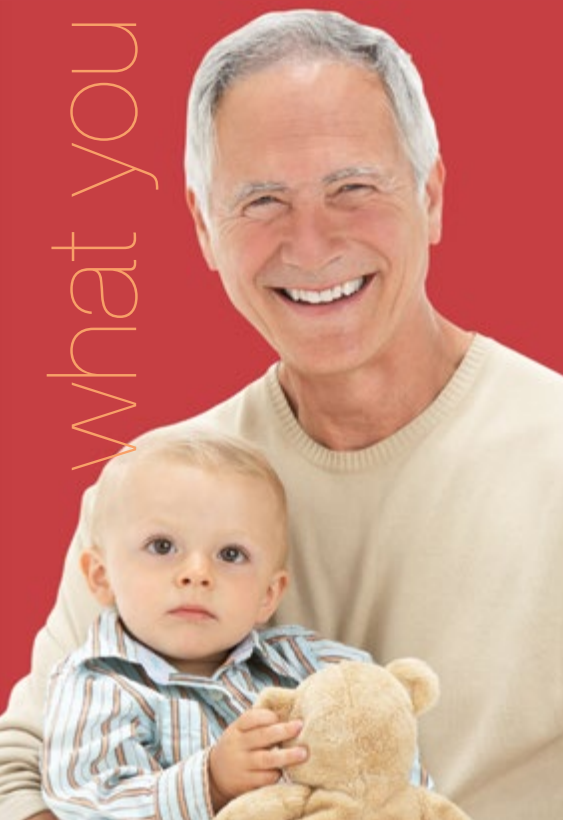
# Bowel Cancer



## SOME FACTS ABOUT BOWEL CANCER

In Ireland, bowel cancer is the second most common cancer after skin cancer. It can occur in men and women.

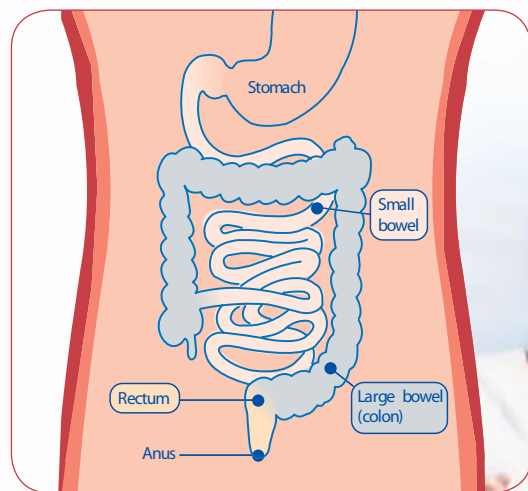
If bowel cancer is found early, it can be successfully treated, so therefore early detection is your best protection.



## WHAT IS THE BOWEL?

The bowel is part of your digestive system. It is made up of two parts, the small and large bowel. The large bowel is made up of the colon and the rectum. The lower part of the large bowel is called the rectum. Cancer of the small bowel is very rare so the term bowel cancer nearly always means cancer of the large bowel.

Food that we eat passes from the stomach, into the small bowel and finally into the large bowel. Nutrients are absorbed from the food and waste is held in the rectum until it is passed from the body in a bowel motion.



## HOW CAN I REDUCE MY RISK?

There are steps you can take to reduce your risk of bowel cancer:

- Have a healthy diet. Limit the amount of red and processed meat that you eat
- Avoid being overweight or obese and maintain a healthy body weight
- Increase the amount of fibre you eat, including at least 5 portions of fruit and vegetables each day
- Be physically active for at least 30 minutes every day
- Don't smoke
- Limit the amount of alcohol you drink
- Be aware of your family history. If a member of your family has or had bowel cancer speak to your doctor about the risk and the need for screening.

## WHAT CAUSES BOWEL CANCER?

The exact cause of bowel cancer is unknown. It usually occurs in those over 60 years of age. However younger people may also develop bowel cancer. Your risk of getting bowel cancer is higher if:

- You eat a diet high in fats and low in fruit, vegetables and fibre
- You are obese or overweight
- You have had a previous bowel cancer
- A member of your immediate family (mother, father, brother or sister) or relatives (aunt or uncle) has had bowel cancer
- You or someone in your family has or had polyps. A polyp is an abnormal growth of tissue in the lining of the bowel. Polyps are usually benign (not cancer), but if left untreated, can lead to cancer
- You or someone in your family has a bowel condition called familial adenomatous polyposis (FAP) or hereditary nonpolyposis colorectal cancer (HNPCC)
- You have a history of bowel conditions like ulcerative colitis or Crohn's disease