

What is colorectal cancer?

The colon is where the body stores waste material. The rectum is found at the end of the colon, right next to the anus. The colon and rectum are both parts of the digestive system, which together form the large intestine. After partly digested food enters the colon from the small intestine, the colon removes water and nutrients from the food and stores the rest as waste. The waste passes from the colon into the rectum and then out of the body through the anus.

Tumours in this type of cancer arise from the inner wall of the large intestine. While benign tumours are termed polyps, malignant tumours of the large intestine are called cancers. Cancer that begins in colon cells is called colon cancer, while cancer that starts in the rectum is called rectal cancer. Cancer affecting either of these organs is also known as colorectal cancer.

What are its symptoms?

The most common symptoms of colorectal cancer include constant fatigue, weakness, shortness of breath, nausea and vomiting, a change in bowel habits, narrow stools, diarrhoea, constipation, a feeling that the bowel does not completely empty itself, bright red or dark blood in stool, weight loss without reason, and general abdominal discomfort such as frequent gas pains, bloating, feeling full, or cramps.

While at most times these symptoms are not due to cancer, if you are experiencing any of these symptoms you should schedule an appointment

with see your doctor to diagnose the problem and have it treated as early as possible.

What are the risk factors associated with colorectal cancer?

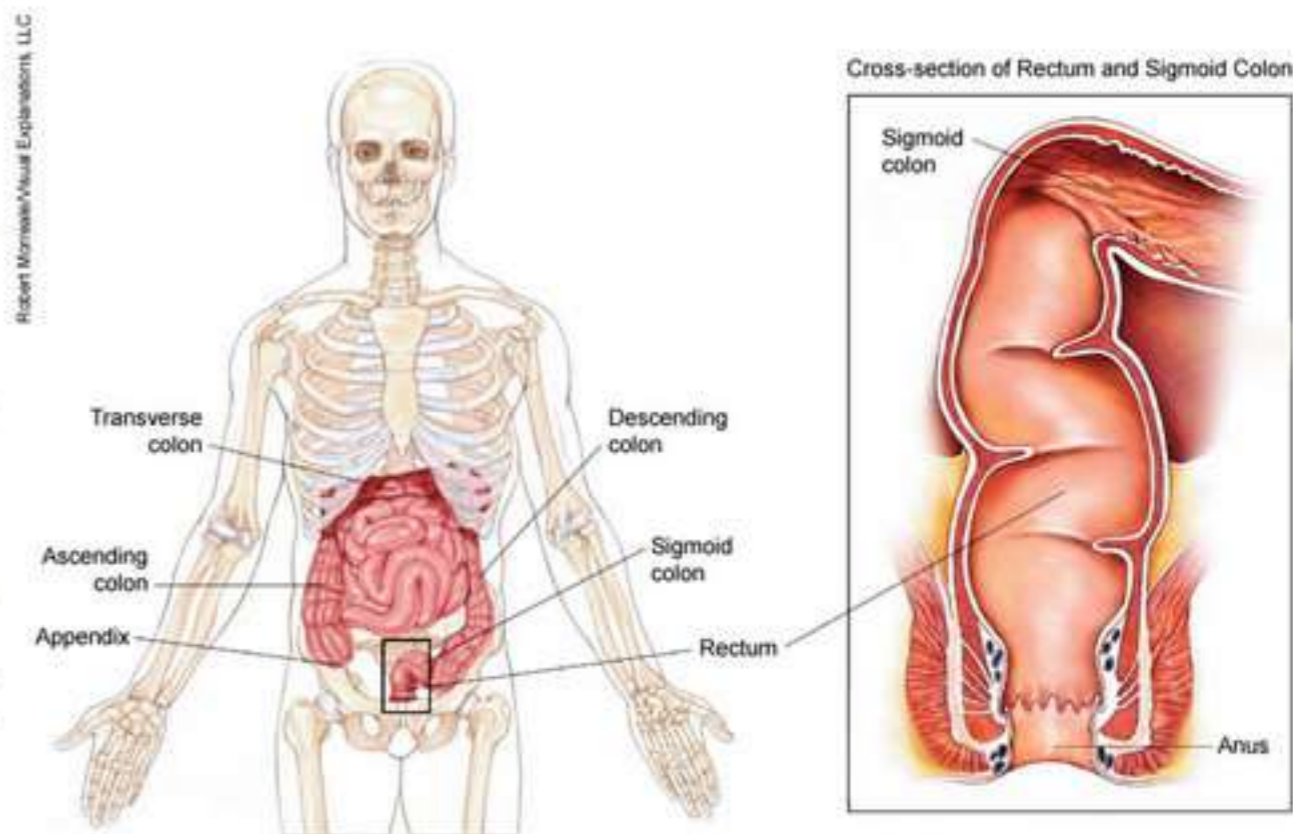
Studies have shown the following risk factors to increase the incidence greatly.

- 1 Age** – Colorectal cancer mostly occurs in people over the age of 50.
- 2 Colorectal polyps** – The presence of polyps on the inner walls of colon or rectum increases the chance of developing cancer.
- 3 Family history** – If you have someone in your family who has had the disease, you are more likely to develop it.
- 4 Genetic alterations** – Changes in certain genes such as HNPCC and APC increase the risk of colorectal cancer.
- 5 Personal history** – If you have had colorectal cancer before, you may develop colorectal cancer a second time. Women with

ovarian, breast and uterine cancer are at higher risk.

- 6 Crohn's disease** – If you have Crohn's disease, which causes inflammation of the colon, you are at higher risk of developing colorectal cancer.
- 7 Diet** – Studies have suggested that diets high in fat and low in calcium, folate, and fibre may increase the risk of colorectal cancer.
- 8 Smoking** – If you smoke, you are at a higher risk of developing this type of cancer.

If you believe that you are at risk of developing colorectal cancer, you should address this



concern with your doctor, who may be able to suggest ways to reduce the risk and can plan an appropriate schedule for check-ups.

What tests will I have to take to detect colorectal cancer?

If your doctor suspects your symptoms to be associated with colorectal cancer, you may have to have a colonoscopy in which a long, flexible tube is inserted into the rectum to look for polyps or cancer inside the entire colon. If polyps are found, they are usually removed with the use of a colonoscope and checked to see whether they are cancerous or not. Many of these polyps are not cancerous and their removal prevents them from developing into cancer. If it is determined that the polyps are cancerous, small tissue samples or biopsies are examined under a microscope by a pathologist to confirm the diagnosis.

Additionally, you may be asked to take blood tests, a chest x-ray, and an endorectal ultrasound.

What is the treatment for this type of cancer?

There are many types of treatment options for colorectal cancer:

Surgery is the most common option, where the tumour itself, a small amount of surrounding healthy bowel and adjacent lymph nodes are removed and the healthy parts of the bowel are reconnected. In cancer of the rectum, the rectum is removed permanently and your surgeon creates an opening on the abdomen wall through

which solid waste leaves your body. Most patients return to a normal lifestyle after this procedure after specially-trained nurses help them adjust to the change in their body.

Chemotherapy, using anti-cancer drugs to eliminate cancer cells, is another option. Radiation therapy, which uses high-energy radiation rays to destroy cancer cells, is also used.

What can I do to prevent colorectal cancer?

Make sure you get yearly examination from your physician. Have a colonoscopy performed at 50 years or earlier if you have had a family history of the disease. Implement a healthy diet, low in fats and processed foods and rich in fibre. Exercise and maintain a healthy weight. Again, do not forget to talk to your physician if you experience any of the risk factors associated with this type of cancer.

POSTOPERATIVE

INFORMATION ON COLORECTAL CANCER

