



Keeping it in the family

YOUR RISK OF BOWEL CANCER INCREASES AT LEAST TWOFOLD IF YOU HAVE A FAMILY HISTORY OF THE DISEASE. SARAH MARINOS DISCOVERS WHAT YOU NEED TO KNOW TO REDUCE THE RISK.

DURING THE NEXT YEAR, ABOUT 13,000 Australians will learn that they have bowel cancer, a disease that kills 12 Australians each day. It's our second biggest cancer killer after lung cancer.

Despite these statistics, the good news about bowel cancer is that it is a potentially preventable disease and, when it is diagnosed in the early stages, recovery and survival rates are up to 90%. Knowing the factors that put you at increased risk of bowel cancer so you can take preventative steps is important, says Professor Terry Bolin of The Gut Foundation.

"Everyone should be aware of this disease and discuss it with their doctor because bowel cancer is potentially preventable and curable," he says.

WHAT IS BOWEL CANCER?

About one in 20 Australians will develop bowel cancer. The risk increases after the age of 40 and continues to rise exponentially with age.

Most bowel cancer starts as a result of benign growths – called polyps – on the lining of the bowel. Bowel polyps will not automatically become cancerous but they have the potential to do so.

"A polyp looks like a sprig of cauliflower and, over five to 15 years, it increases in size. Once it reaches one to two centimetres, the risk of it turning into cancer is increased," says Professor Bolin.

"So the idea is to find the polyp when it is not causing symptoms, remove it, and so remove the risk of it developing into bowel cancer."

Possible signs or symptoms of bowel cancer are bleeding from the back passage, blood in bowel motions, a sudden change in bowel habits such as persistent diarrhoea or constipation, pain in the lower abdomen, unexplained tiredness and a persistent feeling of fullness.

If you have any of these symptoms you should see your doctor to discount bowel cancer. You may need to undergo tests such as those outlined on page 14.

THE FAMILY FACTOR

Around one in five cases of bowel cancer are due to family history and caused by a faulty gene. If a first-degree relative, such as your father,

mother, brother, sister or child has had bowel cancer or polyps, your risk of developing the disease is approximately doubled.

The greater the number of close relatives with the disease and the younger they were when diagnosed, the greater your risk of developing bowel cancer at some point in your life.

"People with a close relative who developed bowel cancer under 55 are at a moderately increased risk," says Professor Brenda Wilson, chief executive of Cancer Council SA.

"People who have three or more close relatives on the same side of the family with the disease are potentially at high risk of developing bowel cancer."

It's important to tell your GP about cancers that have occurred in your family and how old each person was at the time of diagnosis.

Let your GP know about any new cases of cancer in your close family, too. Your GP can then determine if you're at increased risk of bowel cancer and recommend appropriate testing.

"If you have a family history your GP may recommend checks for polyps and bowel cancer earlier than for people who don't have a strong family history of the disease," says Professor Wilson.

LIFESTYLE RISK FACTORS

Other factors that may increase the risk of bowel cancer are a diet high in saturated fat – processed foods, fried foods, takeaways and high-fat

Reducing the risk

1

Stop smoking

2

Eat more high-fibre foods, such as wholegrain breads and cereals

3

Eat more fruit and vegetables – two serves of fruit and five serves of vegetables daily

4

Make sure you include plenty of calcium in your diet, such as low-fat milk, yoghurt and cheese

5

Drink alcohol only in moderation

6

Exercise for around 30 minutes a day

7

Eat less saturated fat

8

Stay within a healthy weight range

9

Know your family health history

10

Check with your GP if you are at increased risk of bowel cancer

11

Have a faecal occult blood test (FOBT) every two years after the age of 40

12

Have a colonoscopy every five to 10 years after the age of 40

Source: The Gut Foundation

CASE STUDY: PAM

SCREENING TESTS TO BEAT THE ODDS

Pam Bekkers, 59, is an office co-ordinator from the southern suburbs of Adelaide. Her mother was diagnosed with bowel cancer at 65 and again at 75 years old.

Pam's sister died of bowel cancer at the age of 41 and her brother died from the disease at 67. Her mother's five siblings also had bowel cancer.

Pam has been told she has a genetic predisposition to bowel and breast cancer.

"I realised I was at risk of bowel cancer when my mother was first diagnosed. I was about 30 and my sister had already died from the disease. Mum's doctor told her to make sure her other children were aware of the problem," says Pam.

"Since then, I've had regular colonoscopies and I do a faecal occult blood test every year. When I was told I was at increased risk of breast cancer I saw a breast surgeon, too."

Pam, a former fitness instructor, has always lived a healthy lifestyle. She walks, goes to the gym and eats plenty of fruit, vegetables and fibre. After reaching 59 without any sign of polyps or cancer, her specialist has now recommended a colonoscopy in five years' time.

Pam's two adult sons are also aware of the need for regular screening.

"It's in the back of my mind that bowel cancer might appear one day but I don't dwell on it," she says.

"At the same time, I don't ignore it. My brother, who recently died, would never have the check-ups and he obviously regretted that later.

"If you know people in your family have had bowel cancer talk to your GP and get the right advice. Stay on top of it because you don't have to die from bowel cancer."

meats, such as sausages and salami.

Not eating enough fibre or fresh fruit and vegetables can also increase your risk. Fruits and vegetables contain vitamins and phytochemicals that have antioxidant properties to help fight cancer.

The soluble fibre in foods such as apples, oats, beans and lentils, dissolves in water and helps to feed the good bacteria of the large intestine, which is believed to help reduce the risk of bowel cancer.

Smoking increases the risk of developing polyps and being physically inactive, overweight or obese can increase the risk of cancers, including bowel cancer.

SCREENING AND TESTING

Most cancers and larger polyps bleed but the amount of blood is often small and not easily visible. However, blood can be detected with a chemical test called a Faecal Occult Blood Test (FOBT) from a sample of your stool. A national screening program recommends everyone over the age of 50 have an annual FOBT.

"In the privacy of their own home, a person flushes the toilet and then uses the toilet for a bowel motion. They use a FOBT kit to then collect a sample of that bowel motion and send it for testing," explains Professor Wilson.

"If the sample finds blood, the person is asked to see their GP and will either repeat the test or have a

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colonoscopy."

The FOBT is recommended every year as not all cancers and polyps bleed every day. Professor

Bolin says a regular FOBT

can lower the bowel cancer mortality rate by about 20%. Speak to your GP, who can provide you with a FOBT kit. FOBT kits are also available from the Bowel Screening Faculty and some pharmacies.

Anyone over the age of 40 should also consider a colonoscopy every five to 10 years.

During a colonoscopy, a flexible tube containing a small camera is inserted into the back passage to look for polyps on the wall of the bowel. Patients are sedated to avoid any discomfort and any polyps are usually easily removed during the procedure. Professor Bolin says a regular colonoscopy can reduce bowel cancer mortality by about 70%.

If bowel cancer is found, the affected piece of bowel is removed during surgery and the remaining bowel is joined. Modern surgical techniques have removed the need for patients to wear a colostomy bag in most cases.

"Cancer is the most feared disease in our community - research tells us that - but although we're aware of things that can cause cancer, for some reason, we don't change our lifestyle," says Professor Wilson.

"I think people are less aware of bowel cancer and the risk factors but it's important that Australians realise it is a common cancer. Most bowel cancers are slow growing, start as polyps and, if they are removed early, then the disease is highly treatable." ●



For more information, call the Cancer Council Helpline on 13 11 20 or visit:
www.cancer.org.au
www.bowelcanceraustralia.com
www.gut.nsw.edu.au