

Bowel Cancer Awareness Campaign

Early Detection is Vital



Bowel Cancer

Australia has one of the highest bowel cancer incidence rates in the world. Each week about 90 Australians die from bowel cancer.¹

Bowel cancer is the second most common cancer for both men and women and is the second most common cause of cancer death in NSW.² The NSW Cancer Plan 2007 -2010 indicates that over 1600 people die of bowel cancer every year and only 65% will live more than 5 years beyond their diagnosis.³

If bowel cancers are found early, there is a good chance of cure and therefore survival but its early symptoms are often overlooked and many patients are diagnosed after the cancer has started to spread. The Cancer Institute NSW says if bowel cancer is detected early there is a 90% chance that patients will still be alive five years after diagnosis.⁴ In Australia, fewer than 40% of bowel cancers are detected early.⁵

Diet, lack of physical activity, age and family history are the most important risk factors for bowel cancer.⁶

Awareness of bowel cancer was not prominent among the forms of cancer mentioned when survey participants were asked to name the three most common forms of cancer in women and men. Embarrassment and being an unpleasant topic to talk about are common barriers to addressing signs and symptoms of bowel cancer.⁷

The symptoms of bowel cancer can be similar to symptoms of other conditions or diseases and may include the following:

- Change in bowel habits – recent and persistent changes in someone who previously had been regular. Symptoms may include constipation, diarrhoea or passing mucous material
- Blood or black material in the bowel motion or any sign of bleeding from the rectum
- Abdominal pain, bloating, discomfort, fullness or cramps
- Unexplained tiredness

It is important that an individual sees their doctor if any of the above symptoms is noticed. It may not be bowel cancer, but if cancer is present the chances of survival are much greater if it is discovered sooner rather than later. **Early detection is vital.**

¹ <http://www.cancerscreening.gov.au/internet/screening/publishing.nsf/Content/bw-facts>, accessed on 20 April 2007.

² *NSW Cancer Plan 2007-2010*. Cancer Institute NSW, Sydney, 2006.

³ Tracey EA, Chen S, Baker D, Bishop J, Jelfs P. *Cancer in New South Wales: Incidence and Mortality 2004*. Sydney: Cancer Institute NSW, November 2006.

⁴ *NSW Cancer Plan 2007-2010*, 2006.

⁵ <http://www.cancerscreening.gov.au/internet/screening/publishing.nsf/Content/bowel-11p>, accessed on 20 April 2007.

⁶ Tracey et al.

⁷ *Bowel Cancer Awareness Campaign – Baseline survey*, The Social Research Centre, July 2006.

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Bowel cancer was the second most common cancer for both sexes combined and the second most common cause of cancer death in NSW during 2004. This fact, combined with the findings of a bowel cancer awareness survey conducted by the Cancer Institute NSW during 2006, highlighted the need to increase the awareness of the incidence of bowel cancer, the symptoms and the importance of early detection.

The campaign has been designed to address those issues. The television commercial shows the difference in outcomes when symptoms of bowel cancer are recognised and treated early and when they are ignored. The commercial uses a serious tone to spread the awareness message by alerting the viewer to the incidence of bowel cancer and possible symptoms. The embarrassment associated with bowel cancer symptoms is acknowledged and the viewers are encouraged to overcome the embarrassment and consult their doctor sooner rather than later.

The television commercial will be on air from 22 April and run until mid June 2007. Radio and press will commence late May and will build on the message of identifying symptoms and the importance of early detection. The campaign encourages people to talk to their doctor if they recognise any symptoms and visit www.bowelcancersw.org.au for more information.

The primary target audience for the Bowel Cancer Awareness Campaign is NSW residents over 50 years. While this awareness campaign directly addresses public misconceptions about bowel cancer, it will also indirectly support participation in the National Bowel Cancer Screening Program.

FREQUENTLY ASK QUESTIONS

1) *What is bowel cancer?*

Bowel cancer includes cancers of the colon and rectum, sometimes referred to as large bowel cancer or colorectal cancer.

Most bowel cancers start from a polyp, a small raised area that looks like a mushroom. Polyps are usually harmless (benign) but some can become cancerous (malignant) and spread. If polyps are removed, the risk of bowel cancer is reduced.

Bowel cancer can spread (metastasise) outside the bowel if it is not treated.

2) *What causes bowel cancer?*

The risk of bowel cancer increases with age, particularly for people over 50 years, and in people with a personal or family history of bowel cancer, polyps or inflammatory bowel disease.

Obesity and diets high in animal fats, red or processed meats can also increase your risk. Tobacco consumption or heavy alcohol consumption may also increase risk. Physical activity and diets rich in fruit, vegetables, cereals and whole grains are protective factors.⁸

3) *What are the symptoms of bowel cancer?*

Bowel cancer can develop with few, if any, early warning symptoms and can be similar to symptoms of other conditions or diseases and may include the following:

- Change in bowel habits – recent and persistent changes in someone who previously had been regular. Symptoms may include constipation, diarrhoea or passing mucous material
- Blood or black material in the bowel motion or any sign of bleeding from the rectum
- Abdominal pain, bloating, discomfort, fullness or cramps
- Unexplained tiredness.

It is important that an individual sees their doctor if any of the above symptoms is noticed. It may not be bowel cancer, but if cancer is present the chances of survival are much greater if it is discovered sooner rather than later. **Early detection is vital.**

4) *What are the risk factors associated with bowel cancer?*

Those people most at risk:

- 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;
- Have previously had special types of polyps, called adenomas, in the bowel.

The risk is also increased in obese people, and those with a diet high in animal fats, red or processed meats. Tobacco consumption or heavy alcohol consumption may also increase the risk.⁹

⁸ Tracey et al.

⁹ Tracey et al.

5) What action should people who have risk factors take?

People at risk of bowel cancer should talk to their doctor about the most appropriate screening options.

6) What is a Faecal Occult Blood Test (FOBT)?

An FOBT is a non-invasive test that can be completed by individuals in the privacy of their own homes. The test detects tiny amounts of blood, often released from bowel cancers or their precursors (polyps or adenomas) into the bowel motion.

People who have symptoms should see their doctor, even if no blood is detected in their FOBT.

7) Are there other methods of detecting bowel cancer?

The FOBT is currently the most well researched screening test for bowel cancer. Other methods, such as colonoscopy, of detecting bowel cancer are also available. People who have symptoms of bowel cancer should speak with their doctor about the most appropriate test.

8) How much does the FOBT cost?

There is no cost involved in completing the FOBT through the Australian Government's National Bowel Cancer Screening Program.

FOBT kits may also be purchased outside the program. Costs and test procedures vary. People should ask their doctor about which FOBT kit may be best for them.

9) Why do eligible people who don't have any symptoms need to participate in screening?

Screening involves testing for bowel cancer in people who do not have any obvious symptoms of the disease. The aim is to find cancer or pre-cancerous polyps early when it is easier to treat.

Regular screening is important because bowel cancer can develop without any early warning symptoms. Bowel cancer can be treated successfully if detected in its early stages.

If all men and women over 50 had a FOBT every two years it could reduce the risk of death from bowel cancer by up to one third.

10) What is the National Bowel Cancer Screening Program?

The National Bowel Cancer Screening Program has been initiated by the Australian Government to help detect bowel cancer early and reduce the number of Australians who die from the disease. The Program commenced in NSW in August 2006 and is available to NSW residents turning 55 or 65 years of age between May 2006 and 30 June 2008.

People eligible to participate in the program will receive an invitation through the mail to complete a simple test called a faecal occult blood test (FOBT) in the privacy of their own home and mail it to a laboratory for analysis. Invitations should generally be received within 2-3 months of the eligible person's birthday.

11) What happens if the result is positive?

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.

12) What can be done to reduce the risk of getting bowel cancer?

Around 30 to 40 percent of all cancer cases could be prevented by making healthier choices. These include stop smoking, limit alcohol, have a normal weight and eat a diet rich in vegetables, whole grains, fish and fruit.

The Cancer Prevention Plan was published by the Cancer Institute NSW to assist in making healthier choices. Visit www.cancerinstitute.org.au/publications to view a copy of the plan.

More information about bowel cancer can be found at

National Cancer Institute www.cancer.gov/cancertopics/screening/colon-and-rectal

National Bowel Cancer Screening Program
www.cancerscreening.gov.au/internet/screening/publishing.nsf/Content/bw-facts