

## Screening for bowel cancer

Screening for bowel cancer involves testing people who do not have any obvious symptoms of the disease. Screening tests can help prevent bowel cancer deaths by finding polyps and cancers early, when treatment works best.

### Faecal Occult Blood Test (FOBT)

A Faecal Occult Blood Test (FOBT) is a test which can detect small amounts of blood in bowel motions.

A FOBT is done in the privacy of your own home and involves collecting small samples of your bowel motions. The samples are then sent to a laboratory for analysis.

If an FOBT is positive (ie. blood is found), further tests, usually a colonoscopy, will be needed to find out the cause of the bleeding.

Blood in bowel motions can be caused by a number of conditions other than bowel cancer such as haemorrhoids or polyps. However, all bleeding needs to be discussed with your doctor.

## National Bowel Cancer Screening Program

The National Bowel Cancer Screening Program (NBCSP) is gradually being implemented with men and women turning 50, 55 or 65 between January 2008 and December 2010 currently being invited to participate.

The Australian Government will send a letter to eligible people at their Medicare registered address around the time of their birthday, advising them of their eligibility for the Program. An invitation letter and FOBT kit will then follow in the mail soon after.

The test can be completed at home and is then returned to a designated pathology laboratory in a reply paid envelope.

Test results will be sent directly to participants by mail and participants can also choose to have the results sent to their doctor. If the test is positive, participants are advised to see their doctor within the next two weeks for follow up and referral for further tests such as colonoscopy.

If the test is negative (ie. no blood is found), it may mean that no further investigations are needed at this time. However, as no test is 100% accurate, it is important to watch out for any symptoms of bowel cancer and if noticed, see a doctor promptly.

### What if I am ineligible for the program?

If you have a family history of bowel cancer or experience any symptoms of bowel cancer, you should see your doctor.

Are you turning 50, 55 or 65  
between 2008 and 2010?

If so, your invitation to participate in the National Bowel Cancer Screening Program will soon be sent to your current Medicare-registered address.



### For further information contact:

**Cancer Screening and Control Services**  
Department of Health and Human Services  
Level 4, 25 Argyle St, Hobart  
(03) 6216 4300  
[www.dhhs.tas.gov.au/cancerscreening](http://www.dhhs.tas.gov.au/cancerscreening)

**Cancer Council Australia**  
13 11 20  
[www.cancer.org.au](http://www.cancer.org.au)

*About the National Bowel Cancer Screening Program*

**National Bowel Cancer Screening Program**  
1800 118 868  
[www.cancerscreening.gov.au](http://www.cancerscreening.gov.au)

*For Translating and Interpreting Services  
please contact 13 14 50*



**NATIONAL  
BOWELCANCER**  
SCREENING PROGRAM

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# Bowel cancer

## The facts

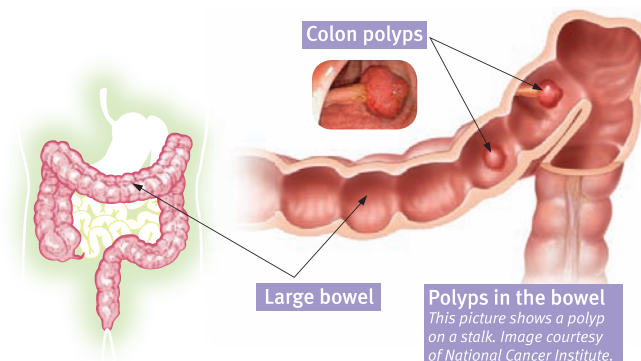
*Prevention and early detection*



## What is bowel cancer?

Bowel cancer is the most commonly diagnosed internal cancer in Australia for men and women combined. One in 20 Australians will develop the disease in their lifetime. Bowel cancer is also a leading cause of cancer related death, with 90 Australians dying from bowel cancer every week.

Bowel cancer (also known as colorectal cancer) is a cancerous growth that develops on the lining of the bowel wall. Most bowel cancers develop from polyps which are small non-cancerous growths. Polyps often look like small bumps, similar to a mushroom with a defined stalk and head. The stalk attaches the polyp to the bowel lining.



Many people have polyps, the majority of which are non-cancerous. However, if left untreated polyps can enlarge and become cancerous over time. For this reason, all polyps should be removed.

Bowel cancer can remain localised in the bowel for some time however, if untreated, it can spread to other parts of the body. Bowel cancer detected early can be successfully treated.

## Bowel cancer risk factors

Everyone is at risk of bowel cancer. The risk is greater however if you:

- Are aged 50 years and over
- Have a family history of bowel cancer or polyps\*
- Have a previous history of polyps or adenomas (precancerous polyps)
- Have had an inflammatory bowel disease such as Crohn's disease or chronic ulcerative colitis
- Have an unhealthy lifestyle – a lack of physical activity and a poor diet
- Are obese or overweight
- Smoke and/or have a high level of alcohol consumption
- Have Type II diabetes

If you are at an increased risk of developing bowel cancer, it does not necessarily mean you will develop the disease. However, it is recommended that you discuss your individual risk with your doctor.

**Remember – most people who develop bowel cancer have had no family members with the disease.**

**\*Please note:**

*All family history should be discussed with your doctor. You are considered to have a moderately increased risk of bowel cancer if:*  
a) one first degree relative (eg. parent, sibling or child) was diagnosed with bowel cancer before the age of 55, OR  
b) two or more relatives on the same side of the family have had bowel cancer.

## Symptoms

**Are you sitting on symptoms for bowel cancer?**



Bowel cancer can develop without any obvious symptoms. However, symptoms of bowel cancer can include:

- Bleeding from the bowel (bright or dark red blood combined or separate from the bowel motion)
- Changes in your normal bowel habits (ie. diarrhoea, constipation or changes in the regularity, firmness or bowel motion size) that lasts for two weeks or more
- Feeling of incomplete emptying of the bowel
- Unexplained weight loss or lack of appetite
- Persistent cramping or abdominal pain
- Signs of anaemia such as general weakness, tiredness and breathlessness

These symptoms **do not** necessarily mean you have bowel cancer. However, if you develop any of these symptoms, it is important to see your doctor without delay.

## Cut your bowel cancer risk

**Did you know that around 75% of bowel cancer cases can be prevented?**

We cannot eliminate our risk of bowel cancer but we can help reduce our risk.

- **Maintain a healthy body weight**



- **Eat Well Be Active**



**Go for 2&5**  
(2 serves of fruit and 5 serves of vegetables each day)



- Eat a varied diet which is high in fibre and low in fat

- **Find your 30 minutes** of physical activity each day



- **Quit** smoking or remain a non-smoker – phone QUITLINE 13 QUIT (13 7848)

- **Drink wise** – avoid or limit alcohol



- **Participate in the National Bowel Cancer Screening Program**