COLORECTAL CANCER (ALSO KNOWN AS BOWEL CANCER)

Queensland

Latest figures from the Queensland Cancer Registry show that:

- In 2014 there were 3092 people diagnosed with colorectal cancer (1717 men and 1375 women).
- In 2014, 1022 people died from colorectal cancer (567 men and 455 women).
- The risk of being diagnosed with colorectal cancer by age 85 years is one in 12 (one in 10 for men and one in 14 for women).
- Colorectal cancer was the third highest cause of cancer deaths in men (behind lung and prostate), and the third highest in women (behind lung and breast).
- The approximate lifetime risk of dying from colorectal cancer by the age of 85 is one in 35 (one in 29 for men and one in 43 for women) in Queensland.
- On average, people diagnosed with colorectal cancer were 69 per cent as likely to live for another five years compared to the general population.
- In 2014, 76 per cent of colorectal cancer deaths occurred after the age of 64.

Trends in Queensland

- Incidence rates are decreasing for both males and females. Male colorectal cancer incidence rates increased by 1.2 per cent each year during 1982 to 1999, but have decreased by 1.2 per cent each year since then until 2014. Female incidence rates were relatively stable from 1982 to 1989 followed by a 2.6 percent increase from 1990 to 1993. The rates however decreased by 0.2-1.9 per cent each year since 1994 until 2014 for females.
- Mortality rates are falling - the rate among males was relatively stable from 1982 to 1993 but has decreased by 2.0 per cent each year since 1994 until 2014, and the rate among females has decreased by 1.4 per cent each year between 1982 and 2014.

Australia

- Colorectal cancer is the second most common cancer diagnosed among men (after prostate) and women (after breast).
- Colorectal cancer is the third most common cancer deaths among Australian men after lung and prostate cancer and third among Australian women after lung and breast cancer.
- In 2013, 14,960 Australians were diagnosed with colorectal cancer (8213 men and 6748 women).

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4071 people died from the disease in 2014, including 2236 men and 1835 women.

One in 13 Australians will be diagnosed with colorectal cancer before the age of 85, with the disease affecting one in 11 men and one in 16 women.

Colorectal cancer accounts for 12 per cent of all cancers diagnosed in Australia, and 9.2 per cent of all cancer deaths.

Symptoms

Early detection is vital as it provides a better chance of cure. People should consult their general practitioner if they experience any of the following symptoms:

- Blood mixed with mucus, either combined or separate from the bowel motion.
- Changes in normal bowel habits.
- Unexplained weight loss.
- Unexplained anaemia.
- Persistent cramping or abdominal pain.
- General weakness, tiredness and breathlessness.

Prevention

Food, nutrition and physical activity all have a role to play in the prevention of colorectal cancer. People should attempt to:

- Maintain a healthy body weight.
- Eat a varied and nutritious diet including plenty of fruit and vegetables.
- Limit consumption of red meat to 65-100g, 3-4 times a week.
- Limit or avoid processed meats such as sausages, frankfurts, salami, bacon and ham, which are high in fat and salt.
- Limit consumption of burnt or charred meat.
- Maintain at least a moderate level of physical activity (for example, walking for 30 minutes on most days of the week).
- Refrain from smoking.
- Reduce alcohol consumption.

Risk factors

- Age – the older you are, the greater your chance of developing bowel cancer. (Sporadic polyps are very often found in the colons of people over the age of 45).
- Family history of cancer in close relatives (parents, siblings or children).
- Previous diagnosis of bowel cancer.
- People with a long history (10 years or more) of extensive ulcerative colitis.

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6 Queensland Cancer Fund 2006, Understanding Cancer of the Colon and Rectum [brochure], Queensland Cancer Fund.
Testing

- A Faecal Occult Blood Test (FOBT) is a simple test that looks for tiny amounts of blood in the bowel motion. It involves taking a stool sample, smearing it onto a slide or card and sending it to the laboratory for testing.
- It is recommended people aged over 50 years, without symptoms and without a family history of bowel cancer have an FOBT every two years.
- If blood is found in an FOBT, further testing such as a colonoscopy is needed to determine the cause of the bleeding.

National Bowel Cancer Screening Program

- The National Bowel Cancer Screening Program was announced in the 2005-06 Federal Budget, with an aim to reduce bowel cancer morbidity and mortality through population screening using the Faecal Occult Blood Test (FOBT).
- The National Bowel Cancer Screening Program now invites Australians aged 50 – 74 years to screen for bowel cancer using a free, simple test at home. The program aims to reduce deaths from bowel cancer through early detection.7
- By 2020, all eligible aged between 50 and 74 years of age (around four million Australians) will be invited to screen each year. This could save up to 500 lives annually, and significantly reduce the burden of bowel cancer on Australians and their families.

Research8

A research study conducted by the Viertel Centre for Research in Cancer Control investigating the patterns of diagnoses and treatment, as well as predictors of quality of life up to five years post-diagnosis for colorectal cancer survivors found:
- Only 2 per cent of colorectal cancer patients were diagnosed by Faecal Occult Blood Test with 90 per cent diagnosed with symptoms. (NB This was prior to the introduction of the National Bowel Cancer Screening Program).
- The majority of people (90 per cent) experienced symptoms prior to being diagnosed with colorectal cancer.
- Patients who did not have private health insurance had a longer time to diagnosis, largely due to the waiting times associated with colonoscopy in the public system.
- Quality of life was higher in people who regularly exercised, and was highest amongst survivors who increased their physical activity over the period of the study.
- Quality of life decreased as the amount of time spent watching television increased.

7 Australian Government, Department of Health: National Bowel Cancer Screening Program

All Queenslanders, all cancers
Information and Support

Cancer Council 13 11 20

Being diagnosed with cancer or supporting a family member or friend can leave you with many questions. By calling 13 11 20 you can speak with a Cancer Support Coordinator, who can provide you with cancer information, emotional and practical support.

Cancer Connect

Sometimes it helps to talk to someone who has been there and knows what you are going through. Cancer Connect is free and confidential peer support that connects you, your carer, or loved ones over the telephone with a trained volunteer who has had a similar cancer experience. This support is available at diagnosis, during and after treatment.

Cancer Counselling Service

Cancer can at times leave you feeling stressed and overwhelmed. Talking things through with a counsellor can make a difference.

Our Cancer Counselling Service is for all Queenslanders distressed by cancer at any stage including people diagnosed with cancer, their family and friends. This appointment based service is staffed by nurse counsellors and registered psychologists, all with training and experience in helping people affected by cancer

For further information and support, please call Cancer Council 13 11 20,

Disclaimer: The information in this publication should not be used as a substitute for advice from a properly qualified medical professional who can advise you about your own individual medical needs. It is not intended to constitute medical advice and is provided for general information purposes only. Information on cancer, including the diagnosis, treatment and prevention of cancer, is constantly being updated and revised by medical professionals and the research community.

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