

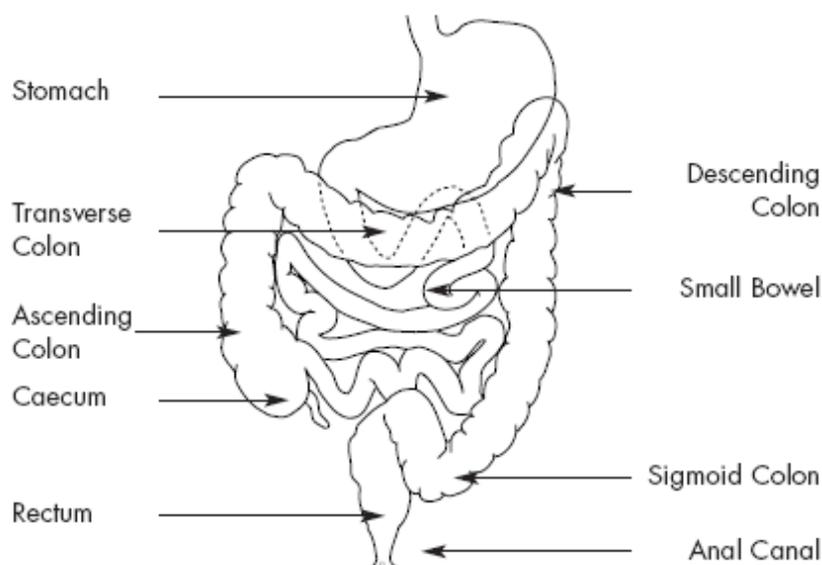
General Surgery

What is bowel cancer?

The digestive system

To help you understand why your bowel reacts the way it does, it is important you know about normal gut and digestion.

The digestive tract consists of a long continuous muscular tube composed of mucous tissue that is similar to the tissue inside your mouth. It extends from the mouth to the back passage (anus) and has special functions at various points along its route. The digestive system is divided into the mouth, oesophagus, stomach, small intestine and large intestine (see diagram). It changes shape and structure along the tract depending on its function.



The job of the gut is to digest food into simple components so that the body is provided with a continual supply of nutrients, salts and water. To do this it performs the function of digestion, absorption of food and fluids



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and elimination of residue and waste products.

In the mouth, chewing food helps initially to break food up and mix it with saliva, which helps to moisten food and to break down starch. Once swallowed, food stays in the stomach for anything between three to five hours. In the stomach the process of digestion is started by the food being broken down by a number of chemicals produced in the gastric juices and by the rhythmic movement of the stomach itself.

The broken down food then passes into the ileum (small bowel). Most of our digestion and absorption of the nutrients in food occurs in this part of the digestive tract. Food moves slowly through the 18 – 20 feet of small bowel, firstly being mixed with bile from the gall bladder and secretions from the pancreas. The contractions of the bowel then bring the food into contact with its surface so that as many of the nutrients as possible can be absorbed.

Once this is complete, the food is then moved on again into the wider colon (large bowel). The large bowel has no role in digestion itself. It secretes mucus to lubricate the bowel, but its main job is to absorb water and salt from the digested food as it moves through the large bowel. About 500mls (approximately one pint) enters the bowel per day but 400mls of it is reabsorbed. It is this recycling system which stops us from becoming dehydrated. What is left behind is indigestible and unabsorbed food residue (faeces) and consists mainly of fibre, mucous and left over secretions such as bile. The faeces then pass into the rectum, where sphincter muscles contract to expel it from the body through the anus.

What is cancer?

Your body is made up of tiny structures called cells and cancer is a disease of these cells. Cells divide and reproduce forming tissues and organs of the body. Often cells in different parts of the body look and act differently, but all tend to repair and reproduce themselves in the same way. Normally, this takes place in a structured and orderly fashion. Sometimes, this process goes wrong, cell division and repair is uncontrolled and a lump forms. When this lump develops within a group of cells it is called a tumour.

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A tumour may be benign (non-cancerous) or malignant (cancerous), this is usually determined by taking a small sample of the tumour (a biopsy).

In a benign tumour the abnormal cells develop within a single organ and do not spread when the tumour becomes large and presses on other organs.

A malignant tumour can spread beyond the original site, to invade and possibly destroy surrounding tissues. Left untreated, abnormal cells can spread to other organs in the body via the blood stream or drainage system (lymphatic).

The cells continue to divide and form a new tumour in the new site, which is called a secondary or a metastasis.

The above is a generalisation about cancer, as cancer is not a single disease with a single cause and a single type of treatment. There are over 200 types of cancer, each requiring different treatments.

Cancer of the large bowel

Cancer of the large bowel starts on the inside lining of the large bowel. It is, unfortunately, a common cancer and we see about 230 new cases in Coventry and Rugby every year.

Little is known about the cause of bowel cancer, although we are aware of some risk factors:

- Diet – high in fat and low in fibre
- High alcohol consumption
- Some inflammatory bowel disease
- A family history of bowel cancer – if two or more members of your immediate family have had bowel cancer or one member of your family was diagnosed under the age of 45

Please speak to your colorectal clinical nurse specialist (CNS) about family history if you are concerned.

How does bowel cancer develop?

It develops from a polyp in the bowel. A polyp is a 'warty' type growth which forms in the lining of the bowel when cells start to multiply. The majority of polyps remain benign growths causing no symptoms; however,

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if left untreated they may turn into a cancerous tumour. This is why removal of polyps can prevent cancer.

Treatment for bowel cancer

An operation to remove the piece of bowel affected is the main treatment for bowel cancer. The piece of bowel that is removed will be examined under the microscope and graded and staged. Grading and staging relates to the appearance of the cell and the size of the tumour.

Treatments such as chemotherapy and radiotherapy are also used, as well as surgery.

Your consultant surgeon responsible for your care will discuss your case with other cancer specialists and a plan of the best treatment for you will be arranged.

All planned treatments will be discussed with you and it is important that you understand what is going to happen. Please contact your colorectal clinical nurse specialist if you have questions regarding your treatment.

All treatments are carried out at University Hospitals Coventry and Warwickshire NHS Trust.

Your feelings and emotions

Living with a serious disease, such as cancer, is challenging. Apart from having to cope with the physical and medical challenges, people with cancer face many worries, feelings and concerns that can make life difficult. Some people find they need help coping with the emotional as well as the practical aspects of their disease. In fact, attention to the emotional burden of having cancer is often a part of a patient's treatment plan. The support of the health care team, support groups and patient-to-patient network can help people feel less alone and upset, and improve the quality of their lives.

Useful contact numbers can be obtained from your colorectal clinical nurse specialist.

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Who are the Colorectal Clinical Nurse Specialists (CNS)?

These are specialist highly trained nurses who care for people like you having a similar operation. They work with other nursing staff and surgeons to give you specialist support and care before your operation, after your operation and when you return home.

As they are specialists, they will have already helped other people going through the same operation as you.

You will be allocated a colorectal CNS who will also be your key worker.

For further information:

Colorectal Clinical Nurse Specialists

Abby Barnwell, Sarah Taylor 024 7696 5617

Helen Taylor 024 7696 5616

Katrina Turner, Sarah Thompson 024 7696 5825

Claire Jackson, Debbie Mulhern,
Caroline Ling 024 7696 5753

Local Services

Age UK Coventry		024 7623 1999
Age UK Warwickshire		01926 458100
Bowel Screening Unit		01788 545166/667737
Cancer Information Centre	Main Entrance UHCW	024 7696 6052
Health Information Centre	Main Entrance UHCW	024 7696 6051
Coventry Macmillan Care Team	Hospital Community	024 7696 5498 024 7623 7001
Rugby Macmillan Care Team.	Community	01788 555119
GUT (Cancer Support Group for Coventry & Warwickshire)		024 7696 6475
Hospital Chaplaincy	Hospital	024 7696 7515
Bowel Clinical Trials Nurse	Hospital	024 7696 7151

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Specialist Genetic Nurse	Hospital	024 7696 4000 (switchboard)
Surgical Counselling Service	Hospital	024 7696 6188
Oncology Counselling Service	Hospital	024 7696 7290
Complimentary Therapies	Hospital	024 7696 7290
Psychosexual Therapy	Hospital	024 7696 7290
Citizens Advice Bureau	Coventry Rugby	024 7625 2050 (appointment only) 0844 855 2322
Coventry Carers Centre	Support for carers	024 7663 2972
Guideposts Trust	Support for carers	024 7638 5888

Also available at University Hospital:

Physiotherapy, Occupational Therapy, Dietitian Service, Social Services

National Contact Numbers

Association of Coloproctology for Great Britain and Ireland	http://www.acpghi.org.uk/
Beating Bowel Cancer	020 8892 5256 0845 0719 301 (Helpline) www.beatingbowelcancer.org
Benefit Enquiry Line	Freephone 0800 882200
National Cancer Institute (American)	www.cancer.gov
Bowel Cancer UK	020 7381 9711
Colostomy Association	0800 328 4257 www.colostomyassociation.org.uk/
CORE (The Digestive Disorders Foundation)	020 7486 0341 www.corecharity.org.uk
The Ileostomy & Internal Pouch Support Group (IA)	0800 018 4724 www.the-ia.org.uk
Macmillan Cancer Support	0808 808 0000 www.macmillan.org.uk
Marie Curie Cancer Care	0800 716 146 www.mariecurie.org.uk

Patient Information

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 5617 and we will do our best to meet your needs.

The Trust operates a smoke free policy.

Document History	
Department:	Colorectal
Contact:	25617
Updated:	September 2020
Review:	September 2022
Version:	4
Reference:	HIC/LFT/1493/12