

What happens if your bowel cancer screening test is positive?



Starting July 1, 2024, the national bowel cancer screening program will begin offering screenings to eligible Australians as young as 45, reflecting the importance of early detection in successful treatment.

I've received a positive result through the bowel screening test, what happens next?

If your screening test returned a positive result, your GP will likely refer you to a gastroenterologist or a colorectal surgeon. The gastroenterologist or surgeon will discuss what having a positive test means and, in most cases, would recommend a colonoscopy.

Along with the colonoscopy, your doctor might suggest other tests to find out the reasons behind your symptoms and positive stool test.

“What I would normally do when I see a patient with a positive result is perform some blood tests to check what your blood counts and iron levels are. If your iron levels are a bit low, a gastroscopy and a colonoscopy is recommended, with treatment options depending on what is found during these procedures” states Dr Ankur Sidhu.

What is a colonoscopy and what does it look for?

A colonoscopy is a quick and usually painless procedure that lets the doctor examine the entire inner lining of your bowel, including the colon and rectum. During the procedure, the doctor will carefully check for any abnormalities. If anything concerning is found, a colorectal surgeon may be able to remove it at the time of your colonoscopy to prevent further issues.²

“The reason to do the colonoscopy is to look for why you might be having blood in your stool or returned a positive bowel screening test. The most common conditions that give you blood are generally benign conditions, like haemorrhoids and fissures. What we are looking for are things like polyps and advanced polyps that can turn into cancer with time, or worst-case scenario, an early bowel cancer” says Dr Ankur Sidhu.

If the doctor finds bowel cancer, what are the next steps?

“If you are diagnosed with bowel cancer, we need to identify the stage of the cancer. This involves blood tests, a CT scan, and possibly an MRI scan. If the cancer is contained within the bowel and hasn’t spread, surgery is usually indicated” says Dr. Ankur Sidhu.

If diagnosed with bowel cancer, it can be overwhelming. Take your time to consider treatment options and don’t rush into decisions. Your doctor can explain the available treatments and it’s important to ask questions if unsure.

How is bowel cancer treated?

There are many different types of treatment for people suffering from bowel cancer and options will depend on where the cancer is located (i.e. in the colon or rectum). Surgery is the most common treatment option, however there are a range of treatments that may be offered in addition to surgery depending on the staging of your cancer including³:

- Chemotherapy
- Radiotherapy
- Radiofrequency Ablation
- Cryosurgery
- Targeted Therapy
- Immunotherapy

If my colorectal surgeon recommends surgery, what is involved?

“Depending on which part of the bowel the cancer is, will determine the type of treatment or operation you may need. Most of the time, the operation to treat bowel cancer is done through keyhole surgery, which is called laparoscopic surgery” explains Dr Ankur Sidhu.

Questions you may wish to ask your surgeon include⁴:

- How is this going to change my bowel habits?
- How long will I be in hospital for?
- Will I require a colostomy? If so, will my stoma be temporary or permanent?
- How long will I need to take time off work?
- What kind of complications can arise from having the operation?
- What the additional treatments can involve?

Dr Sidhu suggests that if it is an advanced cancer, you may also want to discuss what sort of treatment apart from an operation you may need. This could involve chemotherapy or radiation therapy.

What can I do to improve the likelihood of my surgery being successful?

Cancer Council recommend that prior to treatment you focus on three main areas to improve the likelihood of your treatment being successful⁵.

- Manage anaemia.
- Improve diet and nutrition.
- Give up smoking.

“There are a few things that I advise my patients to do to mitigate the risks of surgery. I strongly encourage patients to quit smoking. They should also stay active and remain positive. Make sure you eat a healthy diet as you will need good nutrition which will help you in your recovery from the operation. In addition, there are certain parameters in the blood test that we look out for. If your iron levels are low, you will need an iron infusion before the operation to make sure you are in your best health possible when I perform your surgery” states Dr Ankur Sidhu.

What should I expect on the day of surgery?

You will receive instructions relating to fasting and bowel preparation detailing what is involved from your surgeon prior to your operation and should strictly follow the advice.

“When you arrive at the hospital, you will be admitted and meet the anaesthetist and the stoma nurse if there is a plan for you to have a stoma. The operation typically lasts 2-4 hours under general anaesthesia. After the surgery, you may be monitored in the intensive care. Your hospital stay duration will vary based on the type and complexity of your surgery” states Dr. Ankur Sidhu.

During your hospital stay, you may experience some pain and discomfort, but it can be managed with pain-relieving medications. Make sure to let your healthcare team know of any pain, so they can improve your comfort. Walking and exercises may be recommended to help with recovery and manage side effects of cancer treatment⁶.

What can I expect when I am discharged from hospital after my surgery?

Bowel surgery is a major procedure that typically requires a hospital stay of 5-10 days and a recovery time of 4-6 weeks. Your diet plays a crucial role in your recovery, so it's important to eat healthily⁷. Dr. Ankur Sidhu advises patients to care for their wounds, eat a healthy diet and avoid heavy lifting for at least four weeks after surgery.

Dr. Sidhu explains some patients may have a stoma formed as part of the operation. A stoma is an opening in the abdomen that allows for bowel movements (i.e. faeces, stool, poo) to leave the body. In most cases this is temporary or in 10% of cases it is permanent.

Patients with a stoma will receive guidance on how to care for it before going home. Regular follow-ups with the surgeon and stoma nurse will ensure that your recovery is progressing well at home.

What are some signs that I should see my GP following my surgery?

Any major operation presents risks, the Cancer Council state that the main risks and complications that may occur following bowel surgery include:⁸

- Infection
- Bleeding
- Blood clots
- Damage to nearby organs
- A leak from the join between the two sections of bowel

Dr. Ankur Sidhu explains that it is important to be aware of potential complications and seek medical advice if you are concerned about any adverse symptoms following your surgery.

“Once at home, watch for wound healing issues like tenderness, discharge, or redness. Other things to look out for are blood clots. So if you have pain or tenderness in your legs or you are experiencing shortness of breath you should go straight to the emergency department” advises Dr Ankur Sidhu.

“Very rarely people can experience bleeding in the bowel. If this happens it is best to talk with your GP or surgeon. If you are concerned, then you should attend your local emergency department” suggests Dr Ankur Sidhu.

What additional advice can you provide about bowel cancer?

“I would tell people to stay vigilant and if you are worried about any bowel related symptoms, please talk about it with your local doctor. What I find is people tend to ignore a lot of their symptoms relating to the bowel until quite late. If you are experiencing changes in bowel habit, bleeding, weight loss, or other unusual symptoms, don't delay seeking help. Discuss these symptoms with your local GP, it could save your life.” advises Dr Ankur Sidhu.

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