



Colorectal Cancer

The Most Important Questions
and Answers

Information from the Swiss Cancer League



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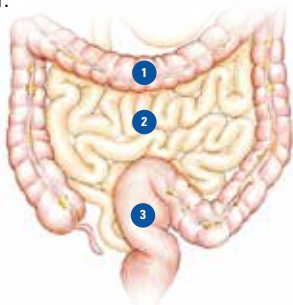
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THE INTESTINES

The intestines are the body's organs for digestion and nutrient uptake. They help to regulate the body's metabolism and water balance. The intestines are also part of the immune system.

The intestines consist of the small intestine and the large intestine (colon). The large bowel (rectum) is a part of the large intestine. The small intestine is between 3 and 5 meters long. The large intestine is about 1.5 meters long.

Cancer occurs much more frequently in the large intestine (colon) than in the small intestine. This brochure focuses on colorectal cancer.



- 1 Large intestine (colon)
- 2 Small intestine
- 3 Rectum

COLORECTAL CANCER

How often does colorectal cancer occur?

Colorectal cancer is the third most common type of cancer in Switzerland. Every year, approximately 4,300 people are diagnosed with colorectal cancer. About 1,700 people die each year as a consequence of this illness.

What causes colorectal cancer?

Most colorectal cancer develops from benign growths on the mucous membrane known as polyps. It usually takes up to ten years for colorectal cancer to develop from a polyp.

Who gets colorectal cancer?

Most people who develop colorectal cancer are over 50 years old. Moreover, there are certain circumstances that lead to an increased risk of colorectal cancer:

- Colorectal cancer or colorectal polyps in parents or siblings
- Earlier onset of colorectal polyps

- Chronic inflammatory intestinal diseases (such as Crohn's disease and ulcerative colitis)

People to whom one or more of these risks apply, can already be susceptible to colorectal cancer at a younger age. Therefore, they should discuss with their primary care physician at what age a screening for themselves would be beneficial.

How do I detect that I might have colorectal cancer?

Colorectal cancer develops slowly. Therefore, it can take years before symptoms manifest themselves. Such symptoms can be:

- Blood in the stool
- Compelling urge to defecate, without subsequent discharge
- Changes in bowel movement habits
- Newly occurring, persistent abdominal pain
- Unexplained weight loss

These health issues may also be due to other causes besides cancer. However, you should consult with your physician if you have any of the above mentioned symptoms.



EARLY DETECTION

What is the need for early detection of colorectal cancer?

Colorectal cancer can be detected with screening before symptoms occur. Colorectal cancer is curable in most cases, if it is detected early. Therefore, early detection is important.

How can colorectal cancer be discovered early?

The main tests for early detection are the faecal occult blood test (FOBT) and the colonoscopy.

What is a FOBT?

This test examines the presence of blood in the stool, which is not always visible to the naked eye (faecal occult blood). The blood can be from a polyp or a tumour in the intestines. The FOBT is a test that can be carried out easily and with minimum effort.

What does it mean if no blood in the stool is found?

In this case, colorectal cancer cannot be excluded with one hundred percent certainty, because polyps or tumours do not bleed continuously. However, in order to increase the chances of colorectal cancer detection, the test is carried out on several stool samples. This test should be repeated every two years.

What does it mean if blood in the stool is found?

It does not necessarily mean that you have colorectal cancer. Blood in the stool can also have other causes. This should definitely be clarified by a physician. A colonoscopy is performed, in order to determine from where the bleeding originates.

What is a colonoscopy?

In a colonoscopy, the interior of the intestines is viewed through a small camera. As a result, polyps can already be very safely discovered and also immediately removed.

What happens during a colonoscopy?

The colon must be free from faecal residue for the examination so that the physician can see well and fully assess the inside of the colon. Therefore, a strong laxative must be taken on both the day before as well as on the day of the examination. During the examination, a flexible tube (endoscope) is inserted through the anus into the colon. A camera is located at the tip of the endoscope. The images from the colon are transferred directly to a monitor.

What happens if polyps are found?

Polyps can be immediately removed during the examination. They are then already examined under a microscope to find out whether they contain any cancer cells. If no cancer cells are found, you should have another colonoscopy performed after a few years, following consultation with your physician. However, if there is already cancer present in the polyps, your physician shall discuss with you on how to proceed.

Is a colonoscopy painful or dangerous?

A colonoscopy is usually painless. The endoscope's advancement could be uncomfortable. Therefore, usually a drug is administered to you so that you can sleep for a short period.

The risk of complications from a colonoscopy is small (less than 1 in 1,000 colonoscopies). When polyps are removed, there could be injury to the colon or some bleeding, although this is seldom the case.

Who should be screened?

People aged 50 and over should have an examination for early detection of colorectal cancer. People who are at an increased risk for colorectal cancer (see page 4) should discuss with their physician at which age an investigation is advisable for themselves.

Where can I be examined for early detection of colorectal cancer?

The FOBT can be done by your primary care physician or pharmacist.

Consult your primary care physician about having a colonoscopy. He shall refer you to specialists (gastroenterologists) who shall conduct the examination.

Which examination method is the most suitable one for me?

Both methods have advantages and disadvantages. Your physician or pharmacist can advise you on which method is best for you. If you are at an increased risk for colorectal cancer (see page 4), you should have an examination by colonoscopy.

Does basic health insurance cover the examinations?

Yes. Basic health insurance covers the costs of colorectal cancer screening for people between 50 and 69 years old, as follows:

- **The FOBT; every two years.**

If blood is found in the stool, basic health insurance also covers the costs of the subsequent colonoscopy. If the test is done at the pharmacy, the costs shall only be covered by health insurance if the test has been ordered by a physician through prescription.

- **Colonoscopy; every ten years.**

In Swiss cantons that have *screening programmes*¹, the “faecal occult blood test” (FOBT) and colonoscopy are exempted from the *Franchise*.

In Swiss cantons that do not have *screening programmes*, the “faecal occult blood test” (FOBT) and colonoscopy are not exempted from the *Franchise* and the *Deductible*. That means, you have to participate in the costs.

Is the early detection of colorectal cancer offered in a *Screening Programme*?

Some Swiss cantons offer *screening programmes* for early detection of colorectal cancer.

If this is the case in your own canton of residence, you shall be informed by the cantonal health authority. You can also ask about this at your cantonal Cancer League.

PREVENTION

How can I prevent colorectal cancer from happening to me?

Unfortunately, there is no protection against colorectal cancer. However, there are ways to reduce the risk of colorectal cancer:

- Maintain your weight within the normal range
- Make sure you get enough exercise
- Eat as little red meat and processed meat as possible. Eat adequate amounts of food that are high in dietary fibres (such as whole grains, vegetables and fruits)
- Drink little or no alcohol
- Do not smoke

WHAT CAN I DO?

Information and Advice

Consult with your physician if you are at an increased risk of colorectal cancer:

- Colorectal cancer or colorectal polyps in parents or siblings
- Earlier onset of colorectal polyps
- Chronic inflammatory intestinal diseases (such as Crohn's disease or ulcerative colitis)

Early Detection

The risk of colorectal cancer increases from the age of 50. Therefore, a screening examination is recommended for everyone over 50 years old. Talk to your physician or pharmacist about the possibilities of early detection and ask about the various examination methods available.

Recognize Symptoms

Go to your physician if you notice changes in your bowel habits or see blood in your stool. Detected early, colorectal cancer is usually curable.

Healthy Living

You can reduce the risk of colorectal cancer with a healthy lifestyle. This includes plenty of exercise and a balanced diet. Even small changes in your lifestyle contribute to better health.

You'll find valuable tips and further information in the Swiss Cancer League's brochures on balanced diet and health issues available in German, French and Italian and further languages.

DEFINITION OF TERMS

Franchise and Deductible (Excess Clause)

People in Switzerland have to contribute to the costs of physicians, hospital and medication with a fixed participation per calendar year. As soon as your invoices for medical services during the calendar year have exceeded the Franchise, then the basic insurance covers the remaining costs. However, you must pay ten percent of these remaining costs yourself. Your participation is known as the Deductible (Excess Clause).

The Franchise for adults is based on a minimum of CHF 300 per calendar year, but can also be chosen at a higher amount. The Deductible is a maximum of CHF 700 per calendar year.

Screening Programme

Within a screening programme, a certain group of people is regularly invited to carry out an investigation for the early detection of cancer. Such a programme must meet clearly defined quality criteria. If a screening examination is carried out as part of a programme, it is exempted from the Franchise and is paid for by the basic insurance, with the exception of the Deductible.

FURTHER INFORMATION

Additional information on this and related topics is available in various language versions. Visit our website for details:
www.krebsliga.ch/broschueren

THE CANCER LEAGUE IN YOUR REGION

Krebsliga Aargau

Tel. 062 834 75 75

www.krebsliga-aargau.ch

Krebsliga Graubünden

Tel. 081 300 50 90

www.krebsliga-gr.ch

Krebsliga beider Basel

Tel. 061 319 99 88

www.klbb.ch

Ligue jurassienne contre le cancer

tél. 032 422 20 30

www.liguecancer-ju.ch

Bernische Krebsliga

Ligue bernoise contre le cancer

Tel. 031 313 24 24

www.bernischekrebsliga.ch

Ligue neuchâteloise contre le cancer

tél. 032 886 85 90

www.liguecancer-ne.ch

Ligue fribourgeoise contre le cancer

Krebsliga Freiburg

tél. 026 426 02 90

www.liguecancer-fr.ch

Krebsliga Ostschweiz SG, AR, AI, GL

Tel. 071 242 70 00

www.krebsliga-ostschweiz.ch

Ligue genevoise contre le cancer

tél. 022 322 13 33

www.lgc.ch

Krebsliga Schaffhausen

Tel. 052 741 45 45

www.krebsliga-sh.ch

Krebsliga Solothurn

Tel. 032 628 68 10
www.krebsliga-so.ch

Thurgauische Krebsliga

Tel. 071 626 70 00
www.tgkl.ch

Lega ticinese

contro il cancro

Tel. 091 820 64 20
www.legacancro-ti.ch

Ligue vaudoise

contre le cancer

tél. 021 623 11 11
www.lvc.ch

Ligue valaisanne

contre le cancer

tél. 027 322 99 74
www.lvcc.ch

Krebsliga Wallis

Tel. 027 604 35 41
www.krebsliga-wallis.ch

Krebsliga Zentralschweiz

LU, OW, NW, SZ, UR

Tel. 041 210 25 50
www.krebsliga.info

Krebsliga Zug

Tel. 041 720 20 45
www.krebsliga-zug.ch

Krebsliga Zürich

Tel. 044 388 55 00
www.krebsligazuerich.ch

Krebshilfe Liechtenstein

Tel. 00423 233 18 45
www.krebshilfe.li

USEFUL ADDRESSES

Cancer Helpline Tel. 0800 11 88 11, Monday to Friday,
9:00 hours – 19:00 hours

Calls are free

helpline@krebssliga.ch

Cancer Forum www.krebsforum.ch, The Swiss
Cancer League's Internet Forum

**Stop Smoking
Helpline** Tel. 0848 000 181, max. 8 centimes
per minute (landline)

Monday to Friday, 11:00 hours – 19:00
hours

Organisation Magendarmliga Schweiz

Post Box 2705

3001 Bern

Tel. 031 301 25 21

www.gastromed.ch

All information and consultations are available in German, French and Italian. Consultations on the Cancer Helpline and the Stop Smoking Helpline are also available in English.

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