什么是结肠直肠癌?

结肠直肠癌是结肠(大肠主要组成部分)和直肠(连接结肠和 肛门的肠道)部位的癌症。

结肠直肠癌源于结肠和直肠内膜细胞, 经常由结肠直肠内的 息肉演变而成。息肉是一种良性增生, 但随着时间的推移, 息 肉有可能演变成癌症。一旦发现息肉, 应尽快切除。

有什么征兆和症状?

虽然结肠直肠癌在早期阶段通常没有任何征兆, 但须注意的迹 象包括:

■ 便后仍有便意

■ 便血

- 排便习惯改变,包括腹泻或便秘
- 腹部持续疼痛或不适 ■腹部有异常肿块

你有发病因素吗?

可能的发病因素:

- **年龄** 50岁及以上人士。
- 家族病史 家族成员有结肠直肠癌或息肉的病史。
- **饮食** ─ 低纤维和高脂肪饮食的人较可能会患上结肠直肠 癌。一些食物与高发病率有关,例如加工肉类、红肉类、高 温烹煮的肉类、动物脂肪及酒精。研究表明,多摄取高纤 维的食物可减少发病风险。
- ▶ 炎症性肠炎 患有溃疡性结肠炎和克隆氏病的人更可能 患上结肠直肠癌。
- 惯坐生活方式及肥胖 这两个因素会增加结肠直肠癌的

如何预防结肠直肠癌?

建立健康的生活方式: ■ 饮食适量, 避免过饱

- ■不要抽烟
- 限制酒精摄入量
- 多摄取高纤维的食物(水果和蔬菜)
- 减少摄取加工肉类和红肉(特别是经过高温烹煮的)与动物 脂肪
- 毎星期运动2至3次
- 保持健康体重

如何诊断结肠直肠癌?

定期接受检验能提早发现息肉或结肠直肠癌。常用的筛查 方法有以下几种:

粪便免疫化学检验(FIT) 粪便免疫化学检验是一项简单的 试验,能够从人类的粪便中测查出血的迹象。粪便中的血 液可能并不呈现红色, 只有通过检验才能测出。排便带血 的原因有很多,包括痔疮、胃溃疡以及由结肠内膜良性增 生所导致的结肠息肉。结肠息肉属于癌前病变, 可能导致 出血。演变成结肠直肠癌的息肉也可能导致出血。

新加坡防癌协会全年向年满五十岁的新 加坡公民和永久居民分发粪便免疫化学 配套, 无需付费。建议每年做一次粪便免疫化学检验。

- **结肠内窥镜检验法** 结肠内窥镜检验使用较长的发亮软管 能完整地检验大肠。此检验大约需要20分钟,通常在门诊 由专科医生操作。
- 可屈性乙状结肠内窥镜检验法 这是指将发亮的短软管插入 直肠,慢慢地导入乙状结肠,检验大肠较下端的内膜组织。

新加坡结肠直肠癌各分期的五年生存率比较

分期	结肠癌 男性	乙状结肠 女性	i及直肠癌 男性	女性
1	79%	86%	84%	85%
II	74%	79%	68%	81%
III	63%	64%	55%	62%
IV	7%	12%	10%	9%

(来源:新加坡癌症注册局50周年专刊1968-2017)

每个检验方法的推荐次数

50岁及以上人士的推荐检验次数:

粪便免疫化学检验(FIT)	每年一次
乙状结肠内窥镜	每5年一次
结肠内窥镜	每10年一次

您的粪便免疫化学检验配套有什么?

每份配套内包含一对检验试管、个人资料表格、步骤说明书 和回邮信封。您可在家按照步骤说明书收集粪便样本后,把 试剂盒寄回新加坡防癌协会进行化验。如在您的粪便样本 中发现潜血, 本会职员将联络您, 以便进一步找出潜血的原 因。如有需要, 医生可能建议其他的检验和筛查方法。

谁能领取新加坡防癌协会的粪便免疫化学检验 (FIT), 应该多久做一次检查?

- 50岁及以上的新加坡公民与永久居民
- 过去12个月内未进行FIT检验或过去10年未接受大肠镜查 的人士

建议以上人士每年进行一次检验。

如何治疗结肠直肠癌?

■ 手术

手术是治疗结肠直肠癌最主要的方法。手术可切除癌肿及 其附近的肠段或淋巴结,随后将残余的两处肠道末端连接 起来。一部分病患在手术后需要携带结肠造口袋,但并非 所有病患需要。随着手术技术的改进,结肠造口术的需求 日益减少。腹腔镜或洞眼手术等的新技术, 可以避免手术后 留下长长的疤痕,同时有效地缩短康复时间和降低感染的

放射治疗

用于在手术后清除残留在癌肿附近的癌细胞。手术前放射 治疗联合化学治疗,可使肿瘤体积缩小以便手术切除。

■化疗

化学治疗适用于晚期的结肠直肠癌, 此时单独靠手术治疗 已不够。化学治疗不仅用于结肠直肠癌已经扩散或转移到 身体其他部位(如淋巴、肝、肺)的情况,也可用干手术后,以 预防癌症的复发。化学治疗本身并无法根治结肠直肠癌。

结肠直肠癌互助小组

本互助小组旨在帮助结肠直肠癌病患在治疗后及早康复,并 协助他们适应新的生活。会员可分享患病经历和相关信息 也可互相交流如何照料造口等常见的问题。

此外,每月一次会举办有关医学治疗,营养等的健康讲座。如 果想了解更多详情,请致电1800-727-3333或电邮至 supportgroup@singaporecancersociety.org.sg

Singapore Cancer Society Screening Services 新加坡防癌协会癌症筛查服务

Mammogram for Breast Cancer 乳房×光片, 筛查乳腺癌



Human Papillomavirus (HPV) Test for Cervical Cancer 人乳头瘤病毒(HPV)检测, 筛查子宫颈癌



Pap Test for Cervical Cancer 子宫颈抹片检查, 筛查子宫颈癌



Faecal Immunochemical Test (FIT) for Colorectal Cancer 粪便免疫化学检验(FIT), 筛查结肠直肠癌





Scan OR code for FIT kit collection points

Singapore Cancer Society Clinic @ Bishan

9 Bishan Place, Junction 8 Office Tower #06-05, Singapore 579837

www.singaporecancersociety.org.sg

communityhealth@singaporecancersociety.org.sg

(f) sgcancersociety

SCS Cancer Rehabilitation Centre @ JEM Office Tower SCS Satellite Office @ National University Cancer Institute, Singapore SCS Satellite Office @ National Cancer Centre Singapore





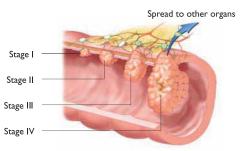
What you need to know about preventing, detecting and treating Colorectal Cancer

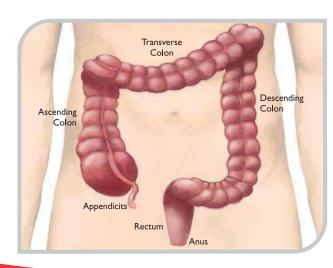


What is Colorectal Cancer?

Colorectal Cancer is the cancer of the colon (the main part of the large intestine) and rectum (the passageway connecting the colon to the anus).

Colorectal Cancer is formed from cells lining the colon and rectum, often resulting in the growth of colorectal polyps. Polyps are benign growths in the colon and rectum which may develop into cancer over a period of time. If polyps are detected, they should be removed.





What are the Signs and Symptoms?

Although Colorectal Cancer often has no symptoms at an early stage, warning signs that you should look out for include:

- Blood in your stool
- Change in bowel habits, including diarrhoea or constipation
- Feeling full or bloated
- Incomplete emptying of the bowel
- Persistent abdominal pain or discomfort
- Presence of a lump in the abdomen

Are You at Risk?

Possible risk factors are:

- Age Higher incidence for people of age 50 and above.
- Family history Personal or family history of colorectal cancer or polyps in the colon increases the risk
- **Diet** People on a low fibre and high fat diet are at a higher risk for colorectal cancer. Certain foods are linked to an increased risk of developing colorectal cancer, e.g, processed meat, red meat, meat cooked at high temperatures, animal fat, tobacco and high alcohol consumption. There is convincing evidence that regular fibre intake reduces the risk.
- Inflammatory bowel disease People suffering from ulcerative colitis and Crohn's disease have a higher chance of developing colorectal cancer.
- **Sedentary lifestyle and obesity** These two related factors increase the risk of colorectal cancer.

How to Prevent?

Make healthy changes to your lifestyle:

- Avoid overeating
- No smoking
- Limit alcohol intake
- Increase fibre intake in your diet
- Reduce intake of processed meat and red meat (especially those cooked at high temperatures) and animal fat intake
- Exercise 2 3 times weekly
- Maintain a healthy body weight

How is Colorectal Cancer Diagnosed?

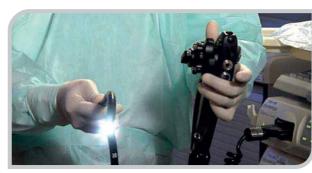
Regular screening can detect polyps or colorectal cancer at an early developing stage. Several screening methods can be used.

Faecal Immunochemical Test (FIT) It is a simple test to detect microscopic blood in the stool which cannot be seen by the naked eye. Blood that is hidden in the stool may not appear red and only the FIT can accurately detect for signs of blood. There are many conditions that cause blood in the stool and this includes conditions like piles,

peptic ulcer and colonic polyps which is a benign growth that develops on the lining of the colon. Polyps are a pre-cancerous condition and may cause bleeding. Polyps that develop into colorectal cancer will also cause bleeding.

Singapore Cancer Society distributes the FIT kit to *Singaporean or Permanent Resident who is aged 50 or above at no cost all year round. You are encouraged to be screened through the FIT on a yearly basis. *Terms and conditions applies

Colonoscopy A colonoscopy screening uses a long, flexible lighted tube that is inserted into the anus to examine the entire large intestine. This screening method takes about 20 minutes and is done by a specialist in the clinic.



■ Flexible Sigmoidoscopy This procedure examines the internal lining of the lower end of your large intestine. A short, flexible, lighted tube is inserted into your rectum and slowly guided into your sigmoid colon.

Colorectal Cancer 5-year Survival Rates by Stage in Singapore

Stage	Colon		Rectosigmoid & rectum	
	Male	Female	Male	Female
I	79%	86%	84%	85%
II	74%	79%	68%	81%
III	63%	64%	55%	62%
IV	7%	12%	10%	9%

(Source: Singapore Cancer Registry 50th Anniversary Monograph 1968 - 2017)

What is the recommended screening frequency for each test?

Screening frequency recommended for people who are 50 years old and above:			
Faecal Immunochemical Test (FIT)	Yearly		
Sigmoidoscopy	Every 5 years		
Colonoscopy	Every 10 years		

What is in your FIT package?

You will receive a package containing 2 test kits, 2 FIT reply slips, an instruction pamphlet and pre-paid envelopes. The instruction pamphlet that comes with the kit will explain how to take your stool samples at home. Upon doing so, the kits will need to be sent back to Singapore Cancer Society through post (using the pre-paid envelopes) to process the results. If the result is positive, you will be informed of further follow-ups with a hospital to determine the exact cause of blood in the stool. The doctor may recommend additional screenings and tests if necessary.

Who may obtain the FIT kits from Singapore Cancer Society and how often should this test be done?

- Singaporean or Permanent Resident, aged 50 or above
- Have not done a FIT in the last 12 months or Colonoscopy in the last 10 years

The above-mentioned are encouraged to be screened on a yearly basis.

How Is Colorectal Cancer Treated?

- Surgery Surgery is used to treat colon cancer. Areas in the intestines and lymph glands affected by cancer are removed. The two ends of the colon are then sewn back together. Some patients will require a stoma bag and for others it may not be required. With improvement in surgical techniques, the need for a colostomy is increasingly reduced. A newer surgical method like laparoscopic or keyhole surgery helps a patient avoid long scars, reduces recovery time and minimises infection after surgery.
- Radiotherapy This is used after the surgical removal of cancer to kill any residual cancer cells around the original tumour site. When combined with chemotherapy, it can also be used to shrink a large tumour before a surgery is employed to completely remove the cancer.
- Chemotherapy Chemotherapy is administered to patients with an advanced colorectal cancer condition. Surgery alone may not be enough. Chemotherapy will be used when the cancer is found to have spread to the other parts of the body (eg, to the lymph glands or other organs like the liver or lung). It is also used after surgery to prevent recurrence of the cancer. By itself, it cannot cure colorectal cancer.

SemiColon Support Group (Colorectal Cancer)

The support group aims to rehabilitate colorectal cancer patients and enable them to adjust to a new quality of life. Members meet to share their personal experiences, exchange information and gain insights into how their peers cope with their stoma and the common problems encountered. In addition, talks on health-related topics like medical treatments and nutrition are held once a month.

For more information, please call 1800-727-3333 or email us at supportgroup@singaporecancersociety.org.sg



Singapore Cancer Registry 50th Anniversary Monograph (1968-2017) indicates that colorectal cancer is No I cancer for men and No 2 cancer for women in Singapore. The majority of Colorectal Cancer occur in people older than 50. However it can also occur in young adults and teenagers.



A Colonoscopy screening will be able to detect and remove polyps if they are found in the colon.

This is necessary as the removal of polyps will greatly reduce the risk of colorectal cancer developing.

Early detection saves lives. Collect the FIT kit at no charge from Singapore Cancer Society and get screened for Colorectal Cancer if you are aged 50 and above.

