# Cancer

#### 3.13 Bowels

#### **RFQs**

- Have you noticed any change in your bowel habit?
- · How has your weight been?
- · Has there been any blood in your stool?
- Is there a family history of this sort of thing (of any bowel problem)?

## Safety nets:

You don't have any worrying features in your story. If your stools are persistently looser beyond 4-6 weeks, or have persistent bleeding, we really should investigate further. If you are losing weight, (without trying,) I would be concerned.

### Provide

a) The patient has a (pre-test) low risk of bowel cancer:

For now we should do a blood count and check that you aren't anaemic. Call for the results in a week, and talk to me if the blood count is not normal. You mentioned that you are not keen on having any camera tests of your bowel or stomach, that seems reasonable if you are not anaemic.

b) A new presentation of symptoms that might be irritable bowel syndrome but the patient is 50: I agree, your symptoms do sound a little like irritable bowel symptoms. Usually, I would suggest that we do a colonoscopy, (a look inside your lower bowel with a camera,) and a blood test to make sure that there is nothing more serious going on (since you are over 50). How does that sound? (and a Ca125 for women >50.)

### c) Full blood count shows Iron deficiency anaemia:

Your blood count shows that you are anaemic. The most likely reason for that is that you are losing small amounts of blood into your gut. I would recommend that we arrange to look inside your stomach and your bowel to look for a cause.....The majority of these bleeds are not caused by cancer. But, it is important to rule cancer out or to diagnose cancer early. Would it be OK if I refer you, down the rapid access route, to get a couple of camera tests done......Yes, I would suggest you take your partner to the appointment, so that they can help you to remember details, or ask any important questions.