

COLORECTAL SURGERY

At risk of colon cancer?

It is one of the most preventable and curable cancers, yet it presents few symptoms in its early stages.



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Colon cancer is the most common cancer in males and the second most common cancer in females in Singapore. It is like a stealthy assassin, insidiously gaining a foothold inside the bowels and taking over healthy cells until it is too late.

Every year, some 1,200 new cases of colon cancer are diagnosed. While the good news is that the cancer has good rates of cure in its early stages, many are picked up only in the later stages of the disease. Survival rates dip from 98% in Stage A and 80% in Stage B to 40-70% in Stage C and less than 5% in Stage D.

This underscores the critical importance of knowing your risk factors and regularly screening to pick up the disease when the chance of cure is highest. Calculating the risk is not an exact science, but several factors are associated with a higher risk of developing colorectal polyps or colorectal cancer:

- Age (risk increases markedly after 50)
- Medical history of colorectal polyps and/or inflammatory bowel disease
- Family or personal history of adenomatous polyps, or an inherited syndrome such as familial adenomatous polyposis (FAP) in which a genetic mutation causes thousands of colonic polyps to grow, spread and invade other organs; some of these will turn cancerous
- First-degree relatives (parents, siblings, or children) with colon cancer

Know your signs

Colon cancer occurs when normal cells in the large intestine grow uncontrollably

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As many as 1 in 5 colorectal cancer sufferers have family members who have been affected. If the relative was diagnosed at age 45 or younger, or if more than one first-degree relative are affected, the risk is higher.

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and interfere with the colon's normal functioning, and spread to nearby organs. The cancer usually begins as pre-cancerous polyps which, if detected early, can be removed during colonoscopy, the cancer prevented and the colon preserved. But at this stage, there are usually no physical symptoms.

When the polyps turn cancerous and grow, there may be more overt signs, such as changes in bowel habits, blood in the stools, weight loss and abdominal discomfort. It is important to know that early cancers may also have no symptoms.

Screen time

Screening for colon cancer is vital and should be done regularly from age 50. If you have a family history, talk to your doctor about beginning before age 50. Early detection means a higher chance of cure, and these are some of the different tests for colon cancer:

Colonoscopy This test allows the doctor to look at the entire length of the colon and rectum using a colonoscope – a thin and very long, flexible, lit tube with a small video camera on the end. Special instruments can be passed through it to take samples or remove polyps.



Double-contrast barium enema This test uses barium sulfate, a chalky liquid, to line the colon and rectum before an X-ray is taken. If abnormalities show, a colonoscopy will be done to do a closer examination.

CT colonography (virtual colonoscopy) This test uses computed tomography (CT) to scan and capture detailed 2D and 3D X-ray images of the inside of the colon and rectum. Like barium enema, if any problems are detected, a colonoscopy would be needed to remove any polyps or do biopsies. [🔗](#)