

You're never too young.

Bowel cancer strikes at any age.

Facts,
support
& stories



Bowel Cancer
NEW ZEALAND



Anaru
diagnosed at 38.

"It is a big thing for a Māori male to go
to the doc about something so personal."

Support for younger patients

A bowel cancer diagnosis is frightening at any age, and when you're young, it can be even more of a shock.

We understand what you're going through, and we're here to help.

Bowel Cancer New Zealand is a patient-focussed organisation. We're committed to reducing the impact of bowel cancer on our community, and we provide essential support services to help you get through.

www.bowelcancernz.org.nz



Bowel cancer
is curable in
more than
75% of cases
if caught early.

Here's how we can help



Nurse Helpline

You're not alone. Our registered nurse is available to answer any questions you might have about your diagnosis, and to help you navigate your treatment path. We're here for you. Simply email

here4you@bowelcancernz.org.nz



Facebook patient support page

Our Facebook group is a welcoming and supportive forum where you can discuss bowel cancer and your journey with people going through similar experiences. It is a closed group, so that only members of the group can see your posts and answers.

Sign up by searching for 'Bowel Cancer New Zealand Patient & Family Support Group' on Facebook.



Online Support

Our website has plenty of resources covering all aspects of bowel cancer. Key features include sections on treatment options, risk factors and prevention, and a service directory, which has a list of services that you may find useful for yourself or for those supporting a loved one with bowel cancer.

Healthy eating guide

Packed with practical advice on nutrition, food choices and meal planning during treatment and in recovery, our healthy eating guide is a great resource to help optimise your recovery and health. Recent research suggests diet and lifestyle factors after diagnosis can also affect your risk of colorectal cancer returning.

Download the guide from our website.

Never too young stories

Every year, more than 300 people under 50 are diagnosed with bowel cancer. We're working hard to raise awareness that bowel cancer doesn't only happen to older people. All diagnosed in their 20s and 30s, a number of people have shared their stories to help raise awareness that you're never too young to have bowel cancer, to encourage faster diagnosis, and to provide support to others.

Visit our website to read about the people in our Never Too Young awareness campaign.

www.bowelcancernz.org.nz

Bowel cancer in younger people – what we know

Symptoms

Know the symptoms to look out for, but remember that in its early stages, bowel cancer often has no symptoms.

- Bleeding from the bottom (rectal bleeding)
- A persistent change in bowel habit for several weeks
- Fatigue and tiredness
- Any lumps or mass in the stomach
- Unexplained weight loss

Often symptoms may come and go – unfortunately, this can provide false reassurance. No one knows your body better than you, so listen to it and if something isn't right make an appointment to speak with your GP straight away.

Diagnosis

Often, we hear that younger people have been talking about their symptoms for a long time before reaching a diagnosis. However old you are, you should never be told by your GP that you are too young to have bowel cancer.

Unfortunately, bowel cancer rates are on the rise in people under 50. In New Zealand, around 10% of new diagnoses are in younger people.

Do not accept 'you're too young to have bowel cancer' as an explanation for your symptoms. Ask your GP to be referred for further investigations, and if your concerns aren't being taken seriously seek a second opinion.

Genetic factors

Approximately 70% of people with bowel cancer have no family history of the disease.

However, a family history or hereditary factors are identified in approximately 30% of patients.

In general, the more members of a family affected by bowel cancer, and the younger they were when diagnosed, the greater the possibility of a hereditary link.

There are several genetic conditions with a known link to bowel cancer, including:

- Lynch syndrome (hereditary non-polyposis colorectal cancer)
- Familial adenomatous polyposis (FAP)
- MYH-Associated Polyposis (MAP)

Other members of your family may also have a moderately increased bowel cancer risk, and genetic counselling may also be of value. Speak with your GP for individual advice and referrals if required.

Lifestyle

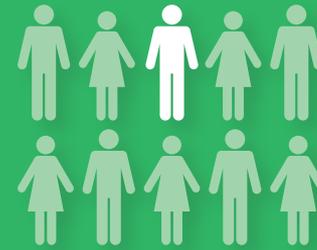
While no cancer is completely preventable, you can lower your risk of bowel cancer, and of recurrence, by eating a healthy diet and exercising regularly. Simple changes you can make include not smoking, reducing alcohol intake, eating wholegrains and naturally high-fibre foods, avoiding processed meats and limiting red meat consumption.



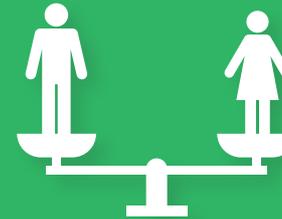
The Facts



✘ A common misconception: bowel cancer is 'an old person's disease'.



1 in 10
New Zealanders diagnosed with bowel cancer are under 50.



Bowel cancer doesn't discriminate, it affects both men and women equally.



Bowel cancer in those under 50 is increasing rapidly in most western countries.



Bowel cancer is on the rise in younger adults.



My name is Sarah

My story: I'd had symptoms for two years before I was diagnosed at 38. I'd put my tiredness, unpredictable bowel habit and frequent diarrhoea down to food allergies or an irritable bowel. I noticed blood intermittently for three weeks before going to the doctor, when I was finally diagnosed with Stage 3 Upper Rectal Cancer.

I had chemoradiotherapy and excisional surgery followed by FOLFOX chemotherapy, and I lost my fertility. I had to have a hysterectomy and I went into early menopause.

It was a tough time, but now I'm out the other side and fit and healthy, and the great news is my partner and I have welcomed our special little man, Manaia, into our lives.



My name is Anna

My story: Apparently I didn't fit the profile of a bowel cancer patient, aged only 32 and with no family history. But, for more than two years I'd had all the symptoms; including very bad stomach cramps, blood in my stools, low iron, loss of appetite, fatigue.

I was given many rounds of iron tablets that had little impact and there was a lot of discussion with my GP about IBS and the FODMAP diet. I was lucky enough to have private medical insurance and so referred myself for a colonoscopy on the advice of a friend.

After my diagnosis of stage 3 bowel cancer, I had a total colectomy and ileorectal anastomosis, and eight rounds of capecitabine chemotherapy. I've just had my five year all clear, which called for a real celebration!



My name is Jonny

My story: I had stomach cramps that fluctuated in intensity over a period. After three months, I went to the doctor. Blood tests revealed I was anaemic, and after more tests I was booked in for a colonoscopy and gastroscopy.

After a few weeks I'd still not been allocated the procedures when I had severe stomach cramps, so I was pushed through as urgent. I had my colonoscopy and gastroscopy the next week, which revealed a 6cm cancerous tumour in my transverse colon.

Prior to diagnosis I have always been fit and healthy. I eat well, I exercise, look after myself, I've had no other diseases. Results revealed no genetic evidence for the cancer being hereditary, no indication of it being diet related. Just bad luck. I've tried to be open and positive about all this as I don't see any

“Catching it early is paramount and often means it’s more treatable or manageable.”

reason not to be. I think realistically everyone's going to have some experience with cancer at some point in their life; if not personally then someone they know.

The main thing is to encourage people to not sleep on any symptoms. Go see a doctor, get it checked out.



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