Bowel cancer screening

The next step



BOWEL CANCER SCREENING

Explaining your test result

Your test result shows that further investigation should be considered. This does **not** mean you have cancer, just that traces of blood have been found in your poo.

- About 2 people out of every 100 tested will have blood in their poo and be called to see the specialist screening practitioner (SSP). Even then, 9 out of every 10 people with blood in their poo will not have bowel cancer.
- Blood in your poo could be caused by small growths called polyps or other conditions such as haemorrhoids (piles).

What happens next?

- You will have been offered an appointment (see accompanying letter) for an assessment with the SSP. This may be a telephone appointment.
- You may receive a questionnaire. Please complete this before your appointment as it will help to ensure you have all of the necessary information available.
- This assessment is to ensure you are fit enough to have a colonoscopy (see below).
- The assessment should take no more than 45 minutes.
- You do not need to change your diet or medication before your assessment, but you should bring any medications you are taking along to the assessment.
- The SSP will discuss your test result with you and explain what further tests can be done. You will have the opportunity to ask questions or raise any concerns you may have.
- Your blood pressure and a blood test may be taken.

- You will be invited to come back for further tests, usually a colonoscopy, at a date and time which suits you.
- The SSP will explain the colonoscopy procedure to you and give you written information to take away.
- If you cannot attend this assessment, it is important you contact the free helpline on 0800 015 2514 as soon as possible to arrange a more suitable date and time.

What is a colonoscopy?

- A colonoscopy uses a very small camera on the end of a thin tube to let the doctor or nurse look for any polyps or signs of cancer inside your bowel. Sometimes a small sample is taken to be examined under a microscope to look for cancer cells.
- As with most medical procedures, there is a possibility of complications. For every 10,000 colonoscopies carried out, bleeding may occur in about 67 of them, and in less than 10 cases the procedure may perforate the bowel. If this occurs, an operation is nearly always needed to repair the hole. In extremely rare cases (evidence suggests as little as 1 in 10,000 cases), a colonoscopy can result in death.
  The benefits and risks will be explained by the SSP when you come along for your assessment.

What if the colonoscopy shows that I need more treatment?

- If you need further treatment you will be sent to whichever specialist is right for you. For example, if polyps are removed at colonoscopy, you may be called back for a repeat colonoscopy in the future.
- The SSP will be able to answer any questions or discuss any concerns you may have at your assessment.

For further information visit:

nidirect.gov.uk/bowel-screening

For this leaflet in another language or format visit:

http://pha.site/bowel-cancer-screening-next-step

For those who are deaf or speech impaired, Relay UK may be used.

Please contact our helpline on

18001 0800 015 2514.

BOWEL CANCER SCREENING

HSC Public Health Agency

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12-22 Linenhall Street, Belfast BT2 8BS.
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www.publichealth.hscni.net

Find us on:

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