

LKS Faculty of Medicine Department of Family Medicine & Primary Care 香港大學家庭醫學及基層醫療學系

# Doctor, by the way, I have more bowel opening these days... Does it matter?

Dr TSE Tsui Yee Emily (Department of Family Medicine & Primary Care, The University of Hong Kong)

#### Introduction

Family physicians face a lot of bowel habit complaints everyday. Amongst the elderly, constipation is the leading problem. However, when an elderly patient mentions the contrary, 'I am having more bowel movement recently', would that set your

## Discussion

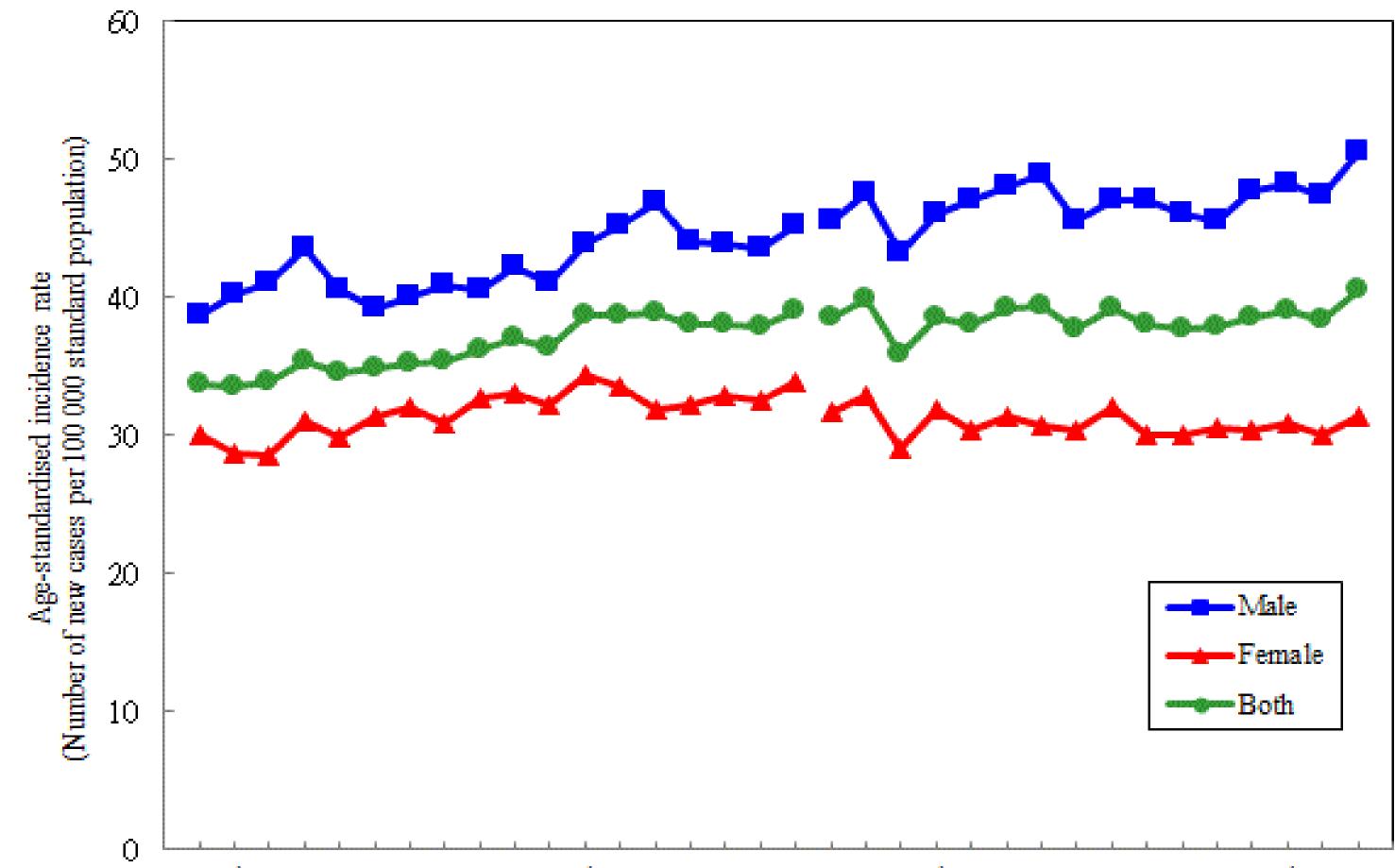
Colorectal cancer is the commonest cancer in Hong Kong.<sup>1</sup> According to the Hong Kong Cancer Registry, colorectal cancer accounted for 17.0% of all new cancer cases in 2017.<sup>2</sup> The male to female ratio was about 1.4 to 1. The age-standardized incidence rate for both sexes was on an upward trend between 1983 and 2016. See the graph below:<sup>1</sup>

#### alarm bells ringing?

### Methods

A 79-year old woman attended her regular follow up in a general outpatient clinic (GOPC) for hypertension, gastroesophageal reflux disease and obesity in March 2019. Her chronic diseases were stable. Towards the end of the consultation, she casually mentioned to the doctor, 'I have increased in bowel opening in the past few months. Does it matter?' Upon further history taking, she had a few bowel movements in the morning in the past few months with tenesmus. There was however, no perrectal bleeding. Her appetite was normal and her weight had been static. There was no family history of colorectal cancer. General and abdominal physical examinations were unremarkable. Alarmingly, with digital examination, irregular per-rectal an circumferential nodularity was detected at the rectum. Contact bleeding was elicited.

Age-standardised incidence rate\* of colorectal cancer by sex, 1983-2016



The patient was urgently referred to the colorectal specialist. Initial investigation showed her Haemoglobin was normal. Carcinoembryonic Ag (CEA) was elevated to 7.8 ng/ml (Ref: <3.0). An early colonoscopy showed a circumferential tumor at 1cm from anal verge extending 1.5cm into the rectum. Biopsy confirmed adenocarcinoma of the rectum. CT thorax, abdomen and pelvis showed no distant metastasis. MRI pelvis showed levator ani muscle involvement posteriorly and abutting posterior wall of lower vagina anteriorly. Neoadjuvant CTRT (low chemo) followed by abdominoperineal dose resection plus at least posterior vaginectomy was suggested to prevent severe local symptoms in future and with a hope of cure.

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Notes:

• Age-standardised incidence rates are compiled based on the world standard population specified in GPE Discussion Paper Series: No.31, EIP/GPE/EBD, World Health Organization, 2001.

Year

- Data in the above charts from 1996 onwards are compiled based on the population estimates under the "resident population" approach instead of the "extended de facto" approach.
- Classification of diseases and causes of death is based on the International Statistical Classification of Diseases and Related Health Problems (ICD) 10th Revision from 2001 onwards. Figures from 2001 onwards may not be comparable with figures for previous years which were compiled based on the ICD 9th Revision.
- Colorectal cancer corresponds to codes 153-154 in ICD-9 and C18-C21 in ICD-10.

Sources:

- Census and Statistics Department
- Department of Health
- Hong Kong Cancer Registry, Hospital Authority

The awareness of colorectal cancer amongst the general-public in Hong Kong has been rising since the Government's launching of the Colorectal Cancer Screening Program in 2016. However, many elderly patients are still unaware of the significance of bowel habit changes and they may not put it at a high priority of their consultation agenda especially when they have lots of co-morbidities. Family physicians, as their life-partners of health, play a crucial role in safe-guarding their health and be vigilant of the disease.

## Results

The patient and her family accepted the suggestions and proceeded as per advised.

## Conclusions

Family physicians should be alerted to the possibility of colorectal cancer even when seemingly trivial bowel concerns are raised by patients.

#### **References:**

1. Centre for Health Protection, Department of Health, Hong Kong Special Administrative Region Government. Colorectal Cancer [Internet]. Hong Kong: Centre for Health Protection, Department of Health, Hong Kong Special Administrative Region Government; Last update: 8 Apr 2019 [cited 16 Nov 2019]. Available from: <a href="https://www.chp.gov.hk/en/healthtopics/content/25/51.html">https://www.chp.gov.hk/en/healthtopics/content/25/51.html</a>

2. Hong Kong Cancer Registry, Hospital Authority. Top 10 Cancers [Internet]. Hong Kong: Hospital Authority; 2019 [cited 16 Nov 2019]. Available from: http://www3.ha.org.hk/cancereg/topten.html