



You're lookin' good on the outside
But what about the inside?



**NATIONAL
BOWELCANCER**
SCREENING PROGRAM



Government of Western Australia
Department of Health

Screening for bowel cancer



For the user of this flipchart

WA Department of Health has produced this flipchart to support education on bowel cancer and bowel cancer screening to Aboriginal and Torres Strait Islander men and women.

The flipchart covers areas such as:

Section One:

- relates to bowel cancer and screening using the faecal occult blood test
- explains how to reduce the risk of bowel cancer

Section Two:

- explains the follow-up after a positive screening test
- describes a colonoscopy

The flipchart can be used as a specific educational tool for the National Bowel Cancer Screening Program or to provide general information about bowel cancer or bowel cancer screening.

The flipchart can be used in small group situations or for one-on-one information sharing.

Users of this flipchart are encouraged to modify the wording provided to suit their particular community. Users of the flipchart may prefer to use only the section of the flipchart appropriate to their client's needs.

Acknowledgements

This flipchart has been adapted from the original work titled 'You're looking good on the outside, but what about the inside? Screening for bowel cancer' developed by Queensland Bowel Cancer Screening Program, Queensland Health, in 2008.

The original adapted WA version was developed in 2009 and updated in 2018. Acknowledgement is extended to the members of the Aboriginal Flipchart Working Group for their advice and support in the consultation, review and development process.

Special thanks are reserved for our artist, Valerie Ah Chee and illustrator, Julie Haysom. It was a pleasure to work with you both and to see your talents represented so well in this resource.

This resource is dedicated to the memory of Olivia Grida.



Artwork

The artwork developed in this resource is entitled 'Making Time' and was created by Valerie Ah Chee. The artwork represents our busy lives and how we can forget to look after our inner health. The centre circle represents our insides and the six sections

around the centre circle with 12 circles and one coloured in represents the 1 in 12 people who will develop bowel cancer by the age of 85. The men and women are on the paths to good health – these paths are direct and clear, allowing us to focus on our health. The remaining parts of the picture are our busy lives and how our health should always be central.

About the artists

'Making Time' – Valerie Ah Chee

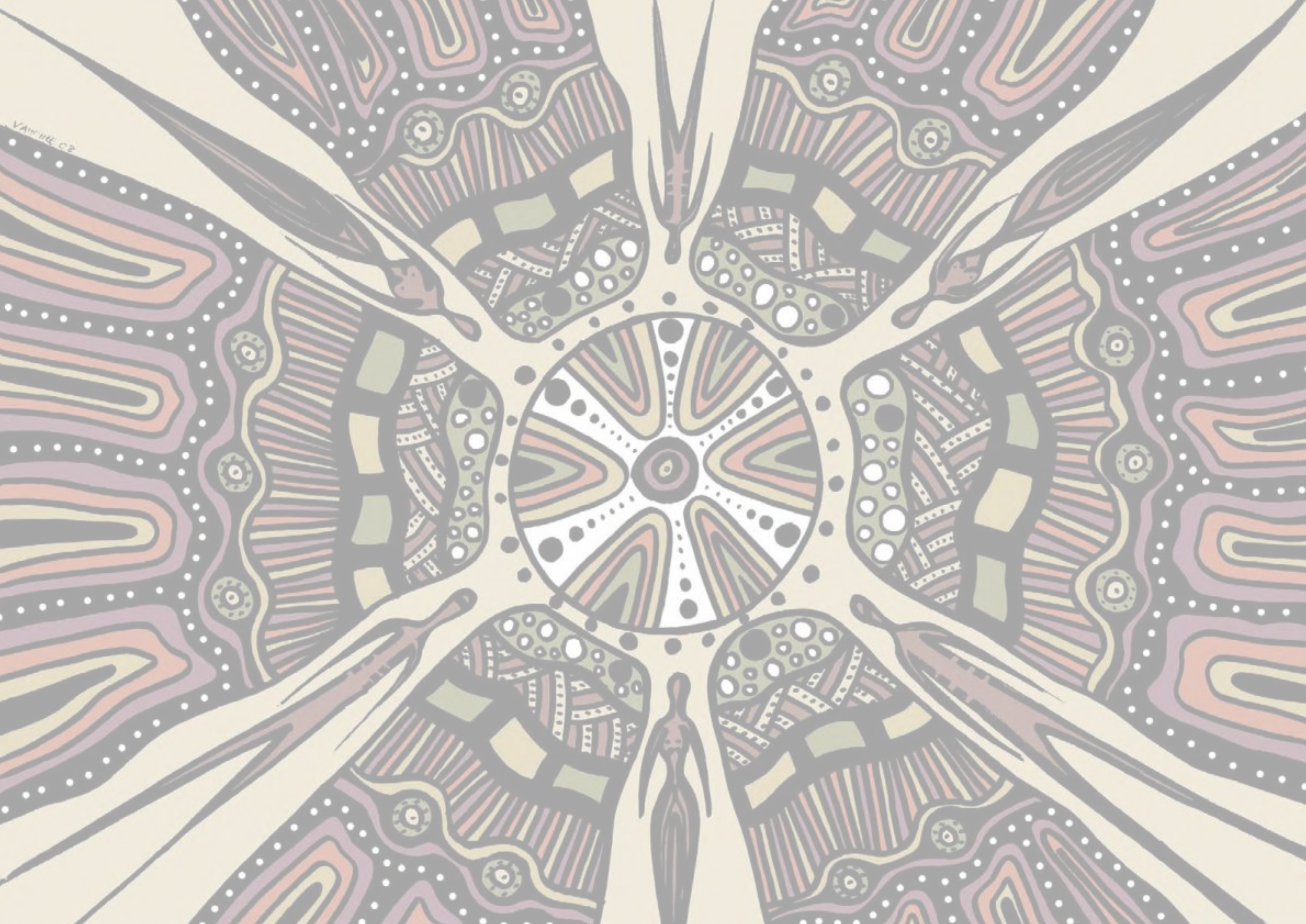
Valerie Ah Chee is a Nyoongar woman born in Armadale in the South West of Australia. She currently resides in Armadale and is working as a Registered Midwife at St John of God Public Hospital in Midland. She is passionate about improving the outcomes of Aboriginal women in the perinatal period and ensuring Aboriginal women have culturally safe space to birth in. She loves painting, mosaics and learning other techniques and a lot of her artwork focuses on her Aboriginal background, pregnancy and birth and women as she comes from a family where her sisters, mother and grandmother play a very special role. Valerie's work is heavily influenced by these connections and focuses on the strong women in her life. She is also aware of the importance that health is for Aboriginal people with diabetes, breast cancer and other issues affecting her family, friends and community.

Valerie has displayed her artwork in a number of exhibitions within the local area including the Mooditj Maa-dar Art Award and some of her paintings and mosaics are proudly hung in various places around Perth.

Illustrations – Julie Haysom

Julie Haysom began her Indigenous cross-cultural education in 1982. After four years country service in Queensland's South Burnett district, she and her partner were transferred as secondary teachers to the remote Aboriginal community of Mornington Island in the Gulf of Carpentaria. Since then, she has been immersed in Indigenous culture, association and issues both professionally and personally in several locations. No longer a full time teacher, she juggles her life as a parent and grandparent, a relief teacher, private art teacher, artist, and as a freelance illustrator.

Julie's illustrating assignments have encompassed projects for a variety of government departments, non-government organisations and individuals, locally, nationally and internationally. She has won several art awards and commendations for painting and drawing. Julie currently lives with her family in Far North Queensland.



The bowel

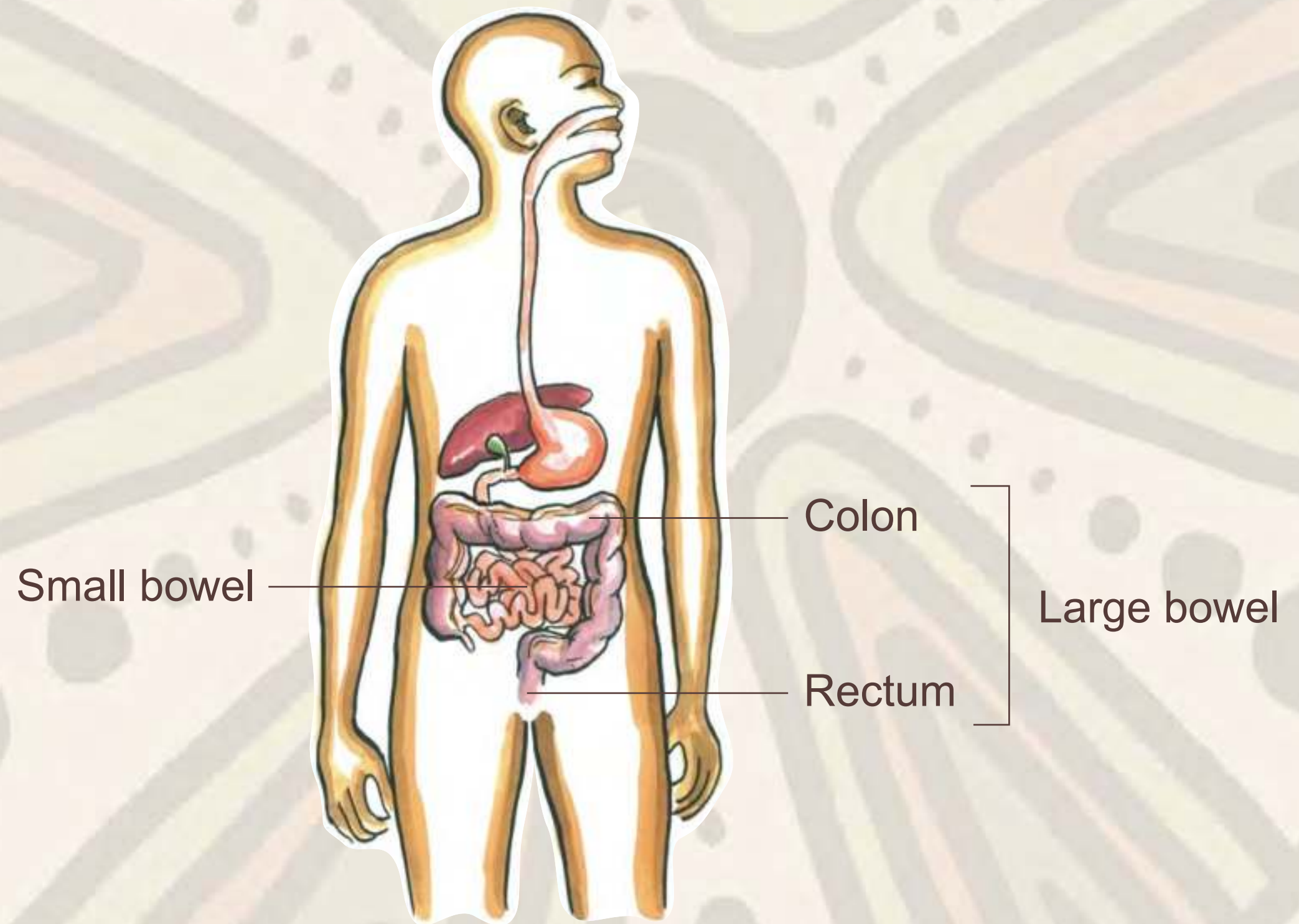
The bowel helps digest our food.

It absorbs the water and nutrients we need to stay healthy.

It gets rid of solid waste from the body as *faeces* (bowel motion, poo or use other words for this).

The bowel is made up of two main parts:

1. The small bowel
2. The large bowel; includes the colon and the rectum



The bowel

What is bowel cancer?

Bowel cancer is an abnormal growth that most often is found inside the large bowel.

It develops from small growths in the lining of the bowel wall known as polyps. This can take years.

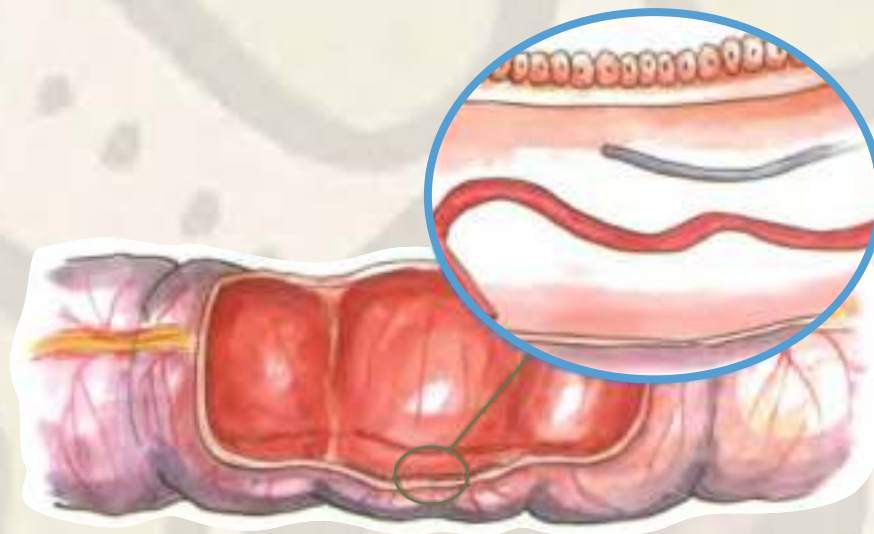
Polyps can look like small lumps, a small bunch of grapes or like cherries on stalks.

Not all polyps will grow into cancer.

If polyps are found early, they can be removed.



Large bowel



**Normal cells on the lining
of the bowel wall**



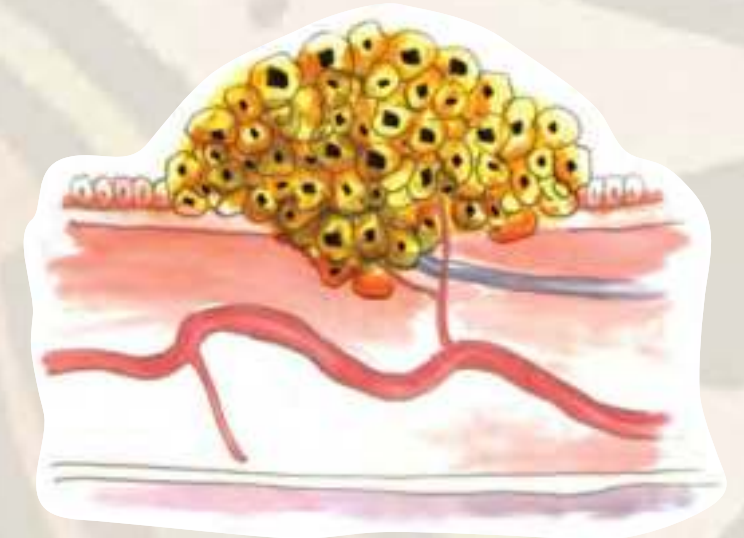
**Abnormal cell on the
lining of the bowel wall**



Multiple abnormal cells



Polyp



Bowel cancer

What is bowel cancer?

Who gets bowel cancer?

Bowel cancer can occur in both men and women.

Bowel cancer is the second most common cancer in Australia that affects both men and women.

Approximately 1 in 29 Australians will develop bowel cancer between the ages of 50-74.

Less Aboriginal people are diagnosed with bowel cancer. However, the death rate for Aboriginal people with bowel cancer is higher.

1 in every 29 people between the ages of 50-74



Who gets bowel cancer?

What are the risks?

Everyone is at risk of bowel cancer, but particularly men and women who:

- Are aged 50 years and over
- Are overweight
- Smoke
- Are not physically active
- Have a high alcohol intake
- Have close family who have had bowel cancer or bowel diseases
- Have bowel diseases
(*eg. Inflammation*) **or**
bowel irregularities



Aged over 50



Overweight



Smoke



No physical activity

Drink heavily



**Have family with
bowel cancer**



What are the risks?

Signs

Bowel cancer can happen without any obvious signs. However, signs can include:

- 1. Bleeding from the bowel**
- 2. Feeling tired for no reason**
- 3. Pain - in your abdomen (tummy)**
- 4. Loss of weight for no reason**
- 5. Changes in your normal bowel habits**

If you have any of these signs, you should see your doctor.



**Bleeding from
the bowel**



**Feeling tired
for no reason**



Pain



**Losing weight
for no reason**

Signs

The Program

The Australian Government is sending out bowel cancer screening kits* to men and women aged 50-74.

These people will receive kits in the mail or from a **Health Worker or Nurse** *(in some areas only)*.

You can do the test yourself at home in privacy.

It's quick, easy and doesn't hurt.

* known as Faecal Occult Blood Tests or FOBT.

- Kit is sent when it is your time to screen
- Get a **FREE** kit in the mail
- Do test yourself at home



The Program

What's in the kit?

In your kit, you will find:

- Instructions on how to complete the kit
- 2 collection sheets
- 2 collection sticks
- 2 small plastic tubes
- 1 plastic pouch
- A Participant Details form to complete and return with the samples
- A Reply Paid envelope



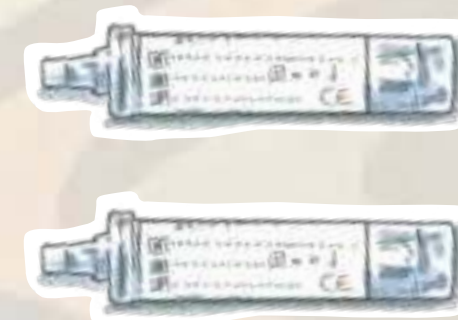
Instructions



2 collection sheets



2 collection sticks



2 small plastic tubes



A plastic pouch

A Participant Details form



A Reply Paid envelope

What's in the kit?

How to do the test

1. On one tube write your name [N], date of birth [A], circle the correct sex and write the date you did the sample [D].
2. Pass urine, then flush the toilet.
3. Put the paper sheet in the toilet bowl on top of the water with the picture facing up. If the paper sinks it is still okay to do the test.
4. Pass the *faeces* (bowel motion, poo or use other words for this) onto the paper sheet.
5. Insert the tip of the collection stick into the *faeces* (bowel motion).
6. Drag the tip of the stick along the *faeces* (bowel motion) back and forward a few times.
7. Insert the collection stick into the top of the small tube.
8. Flush away the paper sheet.

You will need to do this again using the second collection stick. This should be taken from another *faeces* sample (bowel motion), not the same as the first. If you have more than one bowel motion on the same day, you can collect both samples on that day.

Keep the sample in a cool, dry place or in the fridge (do not freeze) away from food until the second sample is taken, or take it to your clinic.



STEP 1



STEP 2



STEP 3



STEP 4



STEP 5 - 6



STEP 7



STEP 8



STEP 9

Repeat steps 1-9
using your second
collection stick
when you pass your
next bowel motion,
ideally within 2-3 days.

STEP 10

How to do the test

Returning the test

1. Place the two tubes into the plastic pouch.
2. Fill in your Participant Details form.
3. Put your Participant Details form and the plastic pouch with the tubes into the envelope.
4. Post the Reply Paid sealed envelope or give it to a Health Worker or Nurse.
5. The test will be sent by post to a laboratory for screening.



1. Put the two tubes into the plastic pouch.



2. Fill in your Participant Details form.



3. Put your Participant Details form and the plastic pouch with the tubes into the envelope.



or



4. Post the Reply Paid sealed envelope or give it to a Health Worker or Nurse.

Returning the test

Your results

You will receive the results in the mail or from your health worker two to three weeks later.

A negative test result means no blood was found. You will get another test in 2 years. You should still look out for signs of bowel cancer.

A positive test result means blood was found. You need to see a doctor for more tests (for example, a colonoscopy). It does not always mean that you have cancer but it is important to check why there was blood in your faeces (bowel motion).



or



**No blood found.
Retest in 2 years**



**Blood found. See
doctor for more tests**

Your results

Need help?

If you have questions about your result you should speak with your local nurse, a local health worker or a doctor.



Local Practice Nurse



Health Worker



Local Doctor

Need help?

Help stop bowel cancer

Being healthy can help prevent bowel cancer.

To reduce your risk of bowel cancer:

1. Eat a healthy diet including bush tucker
2. Eat more fruit and vegetables
3. Keep at a healthy body weight
4. Be physically active
5. Quit smoking or stay a non-smoker
6. Avoid or cut down alcohol intake
7. If over 50, do the simple home test when it's your time



Why change our habits?

For you.

For family.

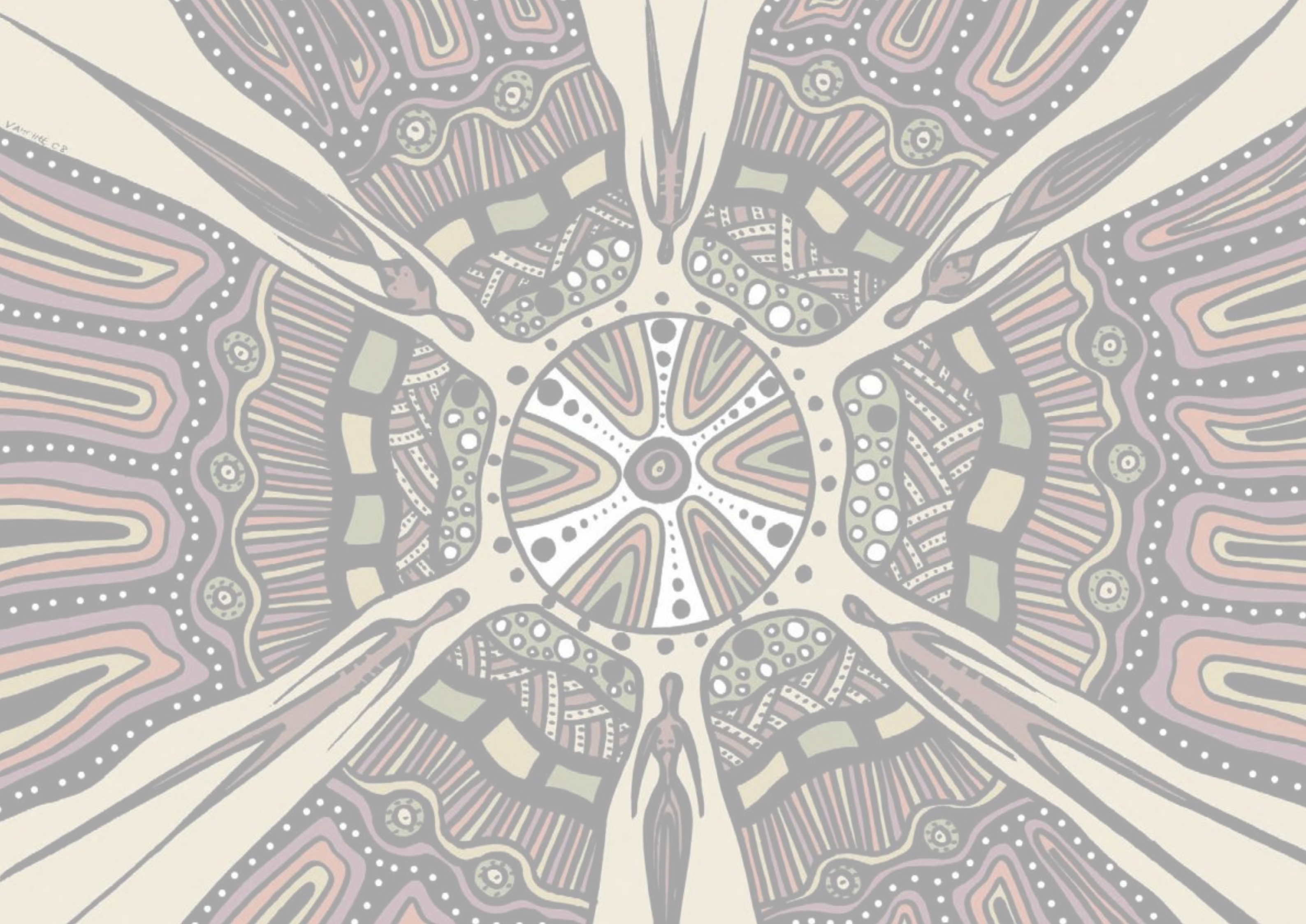
**To be around your community
for a long time.**

* End of screening test section.

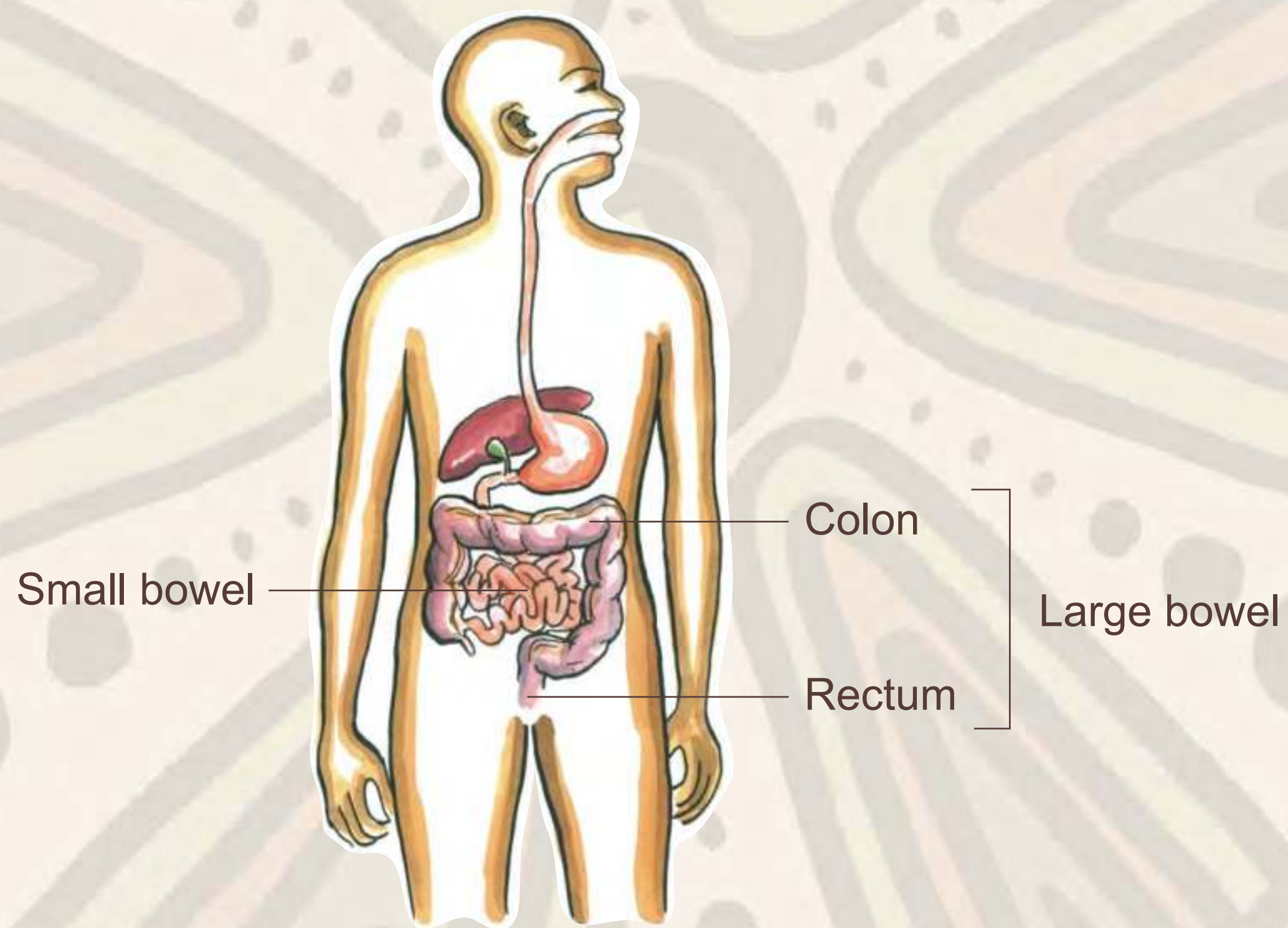
Be here for a long time!



Why change our habits?



VANHE 08



What happens next?

First of all - don't panic. A positive result does not mean cancer.

If you need to have more tests (like a colonoscopy), you will be advised by your doctor, nurse or health care worker.

They will ask you questions about your health to make sure you are ok to go ahead with the test.

They will also give you more information about the test and can answer any questions you may have about it.

They will also help organise your appointment for the test.



What happens next?

What is the next test?

The next test is called a colonoscopy which takes a better look inside of you.

1. You will need to make changes to your diet a couple of days before your test. You won't eat solids for 24 hours before the test.
2. 24 hours before your colonoscopy, you will be asked to drink a special medicine to help clear your bowels. This medicine will make your bowel motions loose so you will need to have close access to a toilet.
3. You will need to go to the hospital to have your test. You may need to travel to a hospital depending where you live. You should take someone with you for support. They can wait with you or come back later.
4. At the hospital you will be given a needle to make you drowsy.

Your doctor or nurse will explain more at the time of the colonoscopy.



1. No solid food for 24 hours before the colonoscopy.



2. 24 hours before your colonoscopy, you will be asked to drink a special medicine to help clear your bowels. You will need to have close access to a toilet.



3. Go to hospital



4. Needle to make you drowsy

What is the next test?

What is the next test?

5. Once drowsy, the doctor will insert a flexible tube with a camera into your back passage (bottom). The doctor can see the inside of your bowel. If there are any changes the doctor can take a sample (biopsy). The test takes between 15-60 minutes.
6. Once the test is over, you will need a couple of hours to recover before you can go home.
7. Because you have had a sedative, you will need someone to help take you home and be with you after the test for at least 24 hours.



5. The test

6. Soon after...



7. Need help going home



What is the next test?

After the test

1. If you had sedation, you should not drive a car, travel on public transport alone, operate machinery, sign legal documents or drink alcohol for 24 hours.
2. You may also feel some minor discomfort after the test (pressure, bloating, cramping). This should wear off after one or two days.
3. If tissue samples were taken, or polyps were removed, during the test you may notice small amounts of blood in your faeces afterwards (less than half a cup). This should disappear after one or two days.
4. If pain or bleeding is severe, or does not go away after three or four days speak with your local nurse or doctor straight away. The doctor who did the colonoscopy should also be notified.



After the test

Results

There are a number of possible things that a colonoscopy might find.

- 1. Nothing (clear)** – No polyps or cancer. This means you have a low risk of getting bowel cancer within the next 10 years. No test though is 100% accurate so see your doctor if you notice any signs later.
You will be asked to do the home test again when recommended.
- 2. Polyps** – Polyps - The doctor will usually remove them when doing the colonoscopy. The doctor will talk to you about what follow-up you will need.
- 3. Cancer** – Will probably need surgery. Your doctor will talk to you about the next steps. If found early, the chance of a full recovery is high. Most people will be able to go back to their current lifestyle.
- 4. Other conditions** – The colonoscopy may find other bowel diseases or irregularities. Your doctor will follow these up with you.



1. Nothing found.
Do home test again
when recommended.



2. Polyps found.
Your doctor will talk
to you about what
follow-up you need.



3. Cancer found.
Need treatment.



4. Other conditions found.
Your doctor will discuss
with you.

Results

Need help?

If you have questions about your result you should speak with your local nurse, a local health worker or a doctor.



Local Practice Nurse



Health Worker



Local Doctor

Need help?

