

# CAN YOU GET COLERECTAL CANCER BEFORE TURNING 50?

ACCORDING TO DATA GATHERED BY THE CANCER REGISTRY OF SINGAPORE FROM 2006 TO 2010, colorectal cancer is the most common cancer in males and the second most common cancer in females. The number of people of both sexes suffering from colorectal cancer has been climbing steadily since 1971, with the majority of such cases diagnosed at Stage 2 or later.

This increasing incidence is believed to parallel the demographic shift of our population to that of an ageing population. Coupled with poor dietary habits – in particular the over-consumption of red and processed meats – poor lifestyle choices such as cigarette smoking and alcohol drinking, and the increase in the number of people who are obese and/or physically inactive, it is little wonder that the rate of incidence for cancer has been rising so rapidly.

Up to 90% of all patients who have colorectal cancer are aged at 50 or above, typically because it takes time for the patient's constant exposure to undesirable environmental conditions (as mentioned above) before the cancer develops. However, this necessarily means that 10% of all patients with colorectal cancer are aged below 50, which is by no means a small number of people.

What are some of the factors that lead one to develop colorectal cancer before 50? It is likely that these individuals often have certain genetic mutations inherited from birth that predispose them to the development of colorectal cancer, giving them what essentially amounts to a "head start". As such, an individual who can check two or more off the following checklist should consider genetic screening for colorectal cancer:

- Strong family history of 3 or more colorectal cancers affecting 2 or more generations
- Strong family history of multiple relatives with colorectal cancers or cancers in other organs such as the uterus, ovary, small intestine, bladder and kidneys
- Personal or family history of colorectal cancer or polyps diagnosed before 50 years old
- Family history with known hereditary conditions like Familial Adenomatous Polyposis (FAP), Lynch Syndrome, Puertz-Jegher's Syndrome (PJS) or Cowden's Syndrome
- Multiple polyps in the colon, rectum or the rest of the gastrointestinal tract
- Your managing physician believes there is a possible hereditary component to your colorectal cancer.

Genetic screening for colon cancer is an examination of a person's genes for pattern mutations that may indicate a genetic condition or predict the chance of a person developing a specific disease in the future. A simple, non-invasive procedure, it merely involves drawing a small amount blood from the patient's arm, whereupon it will be sent to the lab for further testing and analysis.

Knowing what one is personally at risk of developing, a person is usually better able to make significant life planning decisions that may greatly affect the overall outcome of the disease. This is especially vital for colorectal cancer as the early stages of this cancer has no symptoms. By the time a patient presents with symptoms, up to 60% of them will have already entered the advanced stages of the cancer (stage 3 or 4). This is precisely why genetic screening is so important: without foreknowledge that the patient is at a greater risk of developing certain kinds of cancer, even a physician may frequently ignore some of the early warning signs in younger patients, putting it down to some other more common condition such as constipation or Irritable Bowel Syndrome. ■



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