



腸癌：中文（香港繁體）

Bowel cancer: Chinese (traditional Hong Kong)

本資訊是關於腸癌及其治療的相關資訊。

若您對此資訊有任何疑問，請詢問您正在接受治療的醫院的醫生或護士。

您也可於每日上午 8 時至晚上 8 時，致電麥克米倫癌症援助機構（Macmillan Cancer Support）免費熱線：0808 808 00 00。我們有傳譯員，所以您可以使用您自己的母語與我們溝通。當您致電我們時，請以英文告訴我們您所需要的語言。

您可以在 macmillan.org.uk/translations 網頁上找到更多以您的語言及其他語言提供的癌症資訊。

本資訊主要介紹：

- 腸道
- 腸癌
- 如何規劃治療
- 與您的醫療團隊交談
- 腸癌的治療方法
- 治療可能產生的副作用
- 跟進覆診
- 您的感受
- 獲得合適的護理和援助
- 麥克米倫（Macmillan）能夠如何幫助您
- 更多繁體中文資訊
- 參考文獻與致謝

腸道

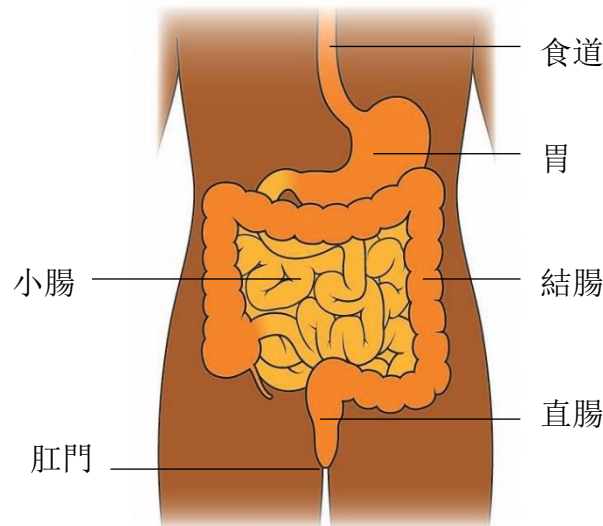
腸道是消化系統的一部分。消化系統分解並吸收食物，讓身體可以利用。

腸道分為兩部分：

- 小腸
- 大腸。

大腸有三個部分，分別是：

- 結腸
- 直腸
- 肛門。



腸癌

身體的所有部分都是由微小的細胞組成。當腸道中的細胞不受控制地生長並形成一個稱為腫瘤的腫塊時，就會出現腸癌。

癌症最先開始生長的地方就是原發性癌症。原發癌是以它開始的身體部位命名的，例如腸癌。

腸癌是影響結腸或直腸的癌症。腸癌也稱為大腸癌。

有時，腸癌細胞會通過血液和淋巴系統擴散到身體的其他部位。這稱為繼發性癌症(轉移性癌症)。

腸癌並不具有傳染性，無法傳染給他人。

癌症亦可影響小腸或肛門。這些癌症的治療方式與腸癌不同。我們有關於這些癌症的英文資料。

淋巴系統

淋巴系統有助於保護我們免受感染和疾病侵害。它由稱為淋巴管的細小管道組成。這些淋巴管連接到身體各處的小淋巴結群。

在結腸和直腸附近有淋巴結。腸癌可以擴散到腸道附近的淋巴結。

腸癌的分期與分級

癌症的分期是指癌症的大小以及是否已經擴散。

癌症的分級是指腫瘤的生長速度。

如何規劃治療

您的醫療團隊將開會，為您規劃最好的治療方法。您的醫生或護士會就這方面與您交談：

- 癌症的分期和分級
- 您的整體健康狀況
- 治療方法和可能的副作用
- 您對可選治療方法的看法。

與您的醫療團隊交談

與你的醫生討論任何治療至關重要。

您的醫院可以為您安排傳譯員。若需要傳譯員，請告知您的護士。您或許也可以帶一位能講您的語言和英語的人陪同。

在與您交談後，醫生通常會要求您在一份表格上簽字，以表明您瞭解治療的意義並同意接受治療。這稱為給予知情同意。只有獲得您的同意後，才會對您進行治療。

關於您的治療可以提出的問題

以下是一些您可能想向您的癌症團隊提出的治療相關問題：

- 我的診斷結果是甚麼意思？
- 甚麼是癌症的分期和分級？
- 我將接受哪些治療？
- 每次治療會帶來哪些益處、風險及副作用？
- 治療會對我的日常生活產生甚麼影響？
- 我可以向誰傾訴我的感受？

腸癌的治療方法

腸癌的治療方法包括：

- 手術（外科手術）
- 藥物（化療、標靶治療或免疫療法）
- 放射治療

許多人會接受多種治療，例如手術後再進行化療或放射治療。

手術

手術切除癌症是腸癌最常見的治療方法。

有時，早期的小型腸癌可以通過稱為局部切除的手術去除。這是使用經肛門插入的手術工具來切除癌症的手術。外科醫生不需要在腹部做切口。

大多數患者會接受部分腸道切除手術。外科醫生通常會切除癌症附近的淋巴結。這是因為癌細胞可能擴散到癌症附近的淋巴結。

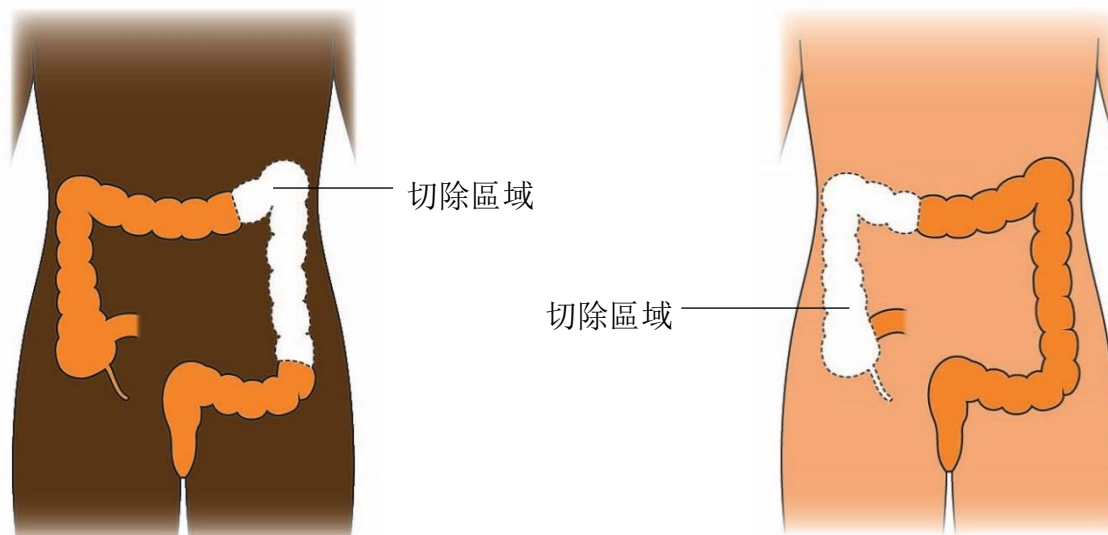
您可能接受的手術方式為：

- **開放手術** - 這是指外科醫生進行一個大的切口來移除癌症。
- **微創（腹腔鏡）** - 手術這是指外科醫生進行4到5個小切口。他們將手術工具通過這些切口來移除癌症。通常，微創手術的恢復速度比開放手術快。

結腸癌的手術類型

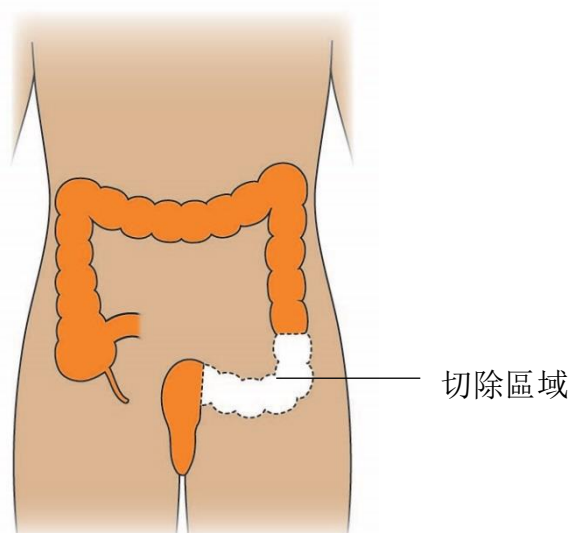
- 半結腸切除術 - 切除半邊結腸。可能是右側或左側，取決於癌症的位置。
- 乙狀結腸切除術 - 切除乙狀結腸。

在移除癌症所在的腸道部分後，外科醫生會將腸道的兩端縫合在一起。有些人可能需要切除全部結腸。這稱為全結腸切除術。如果您需要這類手術，醫生會告訴您更多詳情。



左側半結腸切除術

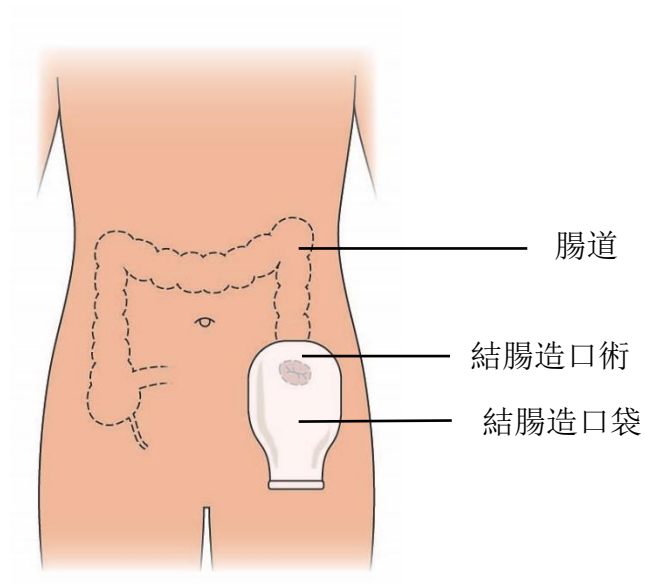
右側半結腸切除術



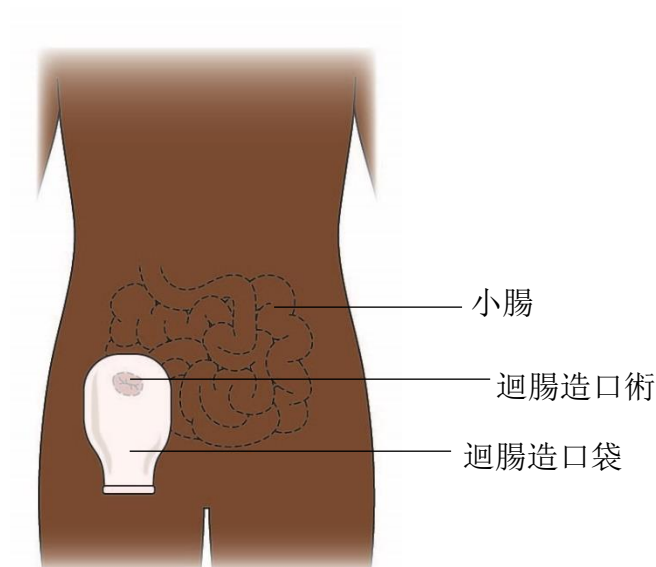
乙狀結腸切除術

造口

有些人需要造口。這是指外科醫生將腸道末端連接到腹部表面。糞便會通過造口排出，進入您佩戴的專用袋中。造口有不同類型：



造口及造口袋（結腸造口術）



造口及造口袋（迴腸造口術）

造口護理師會教您如何護理造口，並提供更多建議和資訊。造口護理師是專門從事造口護理的護士。與有造口經驗的人交談可能會對您有幫助。您的護士或許可以為您安排這樣的會談。您的護士會教您如何在家中管理您的造口。您可能只需要在手術後短

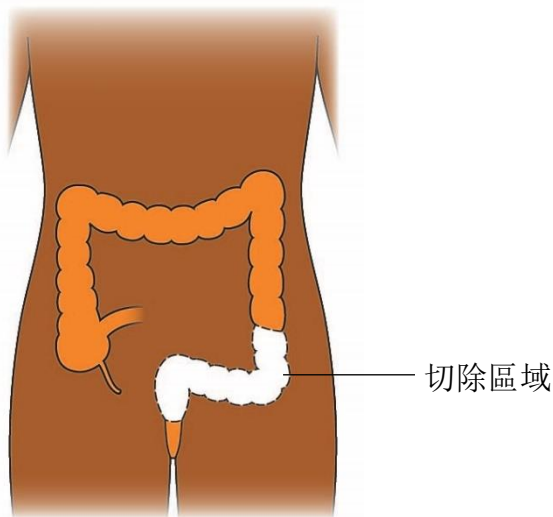
期內擁有造口，以便腸道癒合。但有時候造口會是永久的。您的醫生可以告訴您是否需要造口以及需要多久。

直腸癌的手術類型

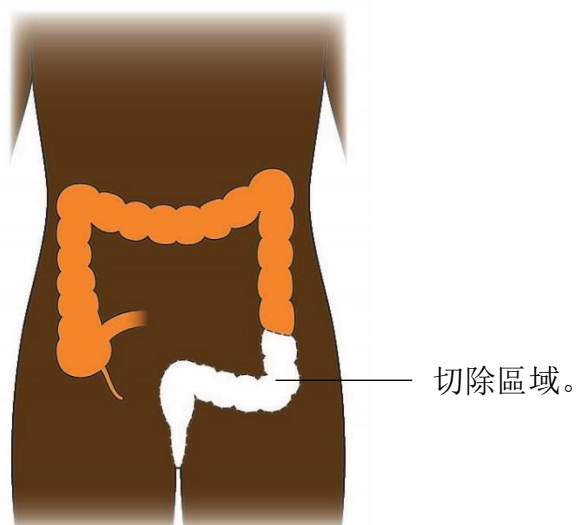
如果您有非常小的直腸癌，可能會進行一種稱為局部切除的手術。癌症通常可以經由肛門移除。這意味著外科醫生不需要在您的腹部做切口。

您可能需要進行更大範圍的手術，以切除癌症以及直腸周圍的一些脂肪組織和淋巴結。手術類型有兩種：

- **前切除術** - 外科醫生會切除受癌症影響的直腸部分。他們會將腸道的兩端縫合在一起。
- **腹會陰切除術** - 這通常用於靠近肛門的癌症。醫生會切除直腸和肛門。此手術後，您將擁有永久性的造口。



前切除術



腹會陰切除術

其他手術類型

有時，癌症會堵塞腸道，導致糞便無法通過。這會引起腹痛和嘔吐。醫生可能會在腸道內放置一個稱為支架的小管，保持腸道暢通。有些人可能需要通過手術切除被堵塞的腸道部分。

如果癌症已經擴散到身體的其他部位，如肝臟或肺部，有時可以進行手術來將其切除。

我們的網站上提供更多以您的語言呈現的關於手術及可能產生的副作用的資訊，請訪問 macmillan.org.uk/translations

化療

化療使用抗癌藥物來消滅癌細胞。早期腸癌通常不需要化療。化療可能在以下情況下進行：

- 手術後，降低癌症復發的風險
- 手術前，縮小癌症腫瘤並降低復發風險
- 作為已擴散癌症的主要治療方法。

化療藥物可能會引發令您不適的副作用，而不同藥物會引發不同的副作用。這些包括：

- 更易感染
- 感覺疲憊
- 感覺噁心或想吐
- 腹瀉 — 排便次數多於平時，或糞便鬆散或水狀
- 口腔潰瘍
- 脫髮。

您的醫生可以向您解釋您可能會出現的副作用，以及控制方法。大部份的副作用都可以用藥物來控制。化療結束後大部份的副作用便會消失。

我們的網站上提供更多以您的語言呈現的化療相關資訊，請訪問 macmillan.org.uk/translations

放射治療

放射治療使用高能X射線來摧毀癌細胞。結腸癌通常不會接受放射治療。這是直腸癌常見的治療方法。

您可能在直腸癌手術前接受放射治療。放射治療可以縮小癌症腫瘤，讓其更易切除，並減少直腸癌復發的風險。

放射治療後，您通常需要等至少 6 週才能進行手術。如果手術後仍有部分癌細胞殘留，可能會使用放射治療。

如果直腸癌擴散或復發，您可能會接受放射治療來縮小腫瘤。放射治療還可以幫助緩解症狀，如疼痛。

直腸癌放射治療的副作用包括：

- 疲倦
- 皮膚變化
- 腸道變化
- 膀胱變化

我們的網站上提供更多以您的語言呈現的放射治療及其可能的副作用資訊，請訪問 [macmillan.org.uk/translations](https://www.macmillan.org.uk/translations)

化學放射治療

如果您患有直腸癌，可能會接受化學放射治療。這是指您同時接受化療和放療。這比單獨進行化療或放療效果更好。同時接受這兩種治療可能會使副作用加劇。

標靶治療

標靶治療藥物針對癌細胞內部或周圍有助於其生長和存活的部分。標靶治療有時用於治療已經擴散到其他部位的腸癌。

您可能會與化療同時使用標靶治療藥物。副作用可能會有所不同。副作用可能包括：

- 皮膚乾燥或皮疹
- 腹瀉
- 感覺噁心
- 類似流感的症狀。

大多數副作用可以通過藥物控制，並在治療結束後消失。

免疫治療

免疫治療藥物利用免疫系統來尋找並攻擊癌細胞。它們可能用於治療已經擴散到身體其他部位的腸癌。

免疫治療的副作用包括：

- 腹瀉
- 皮膚變化
- 關節疼痛
- 感覺疲憊。

治療可能產生的副作用

腸道變化

治療後，您的腸道可能會有一段時間運作異常。您可能會：

- 有腹瀉

- 需要更頻繁地排便
- 需要排便時，沒有太多預兆
- 感到肛門疼痛。

這些情況通常會隨著時間改善。如果您有這些副作用或情況沒有改善，請告訴您的醫生或護士。他們可以為您提供建議和藥物幫助。

保護您的皮膚

腹瀉或水狀糞便可能會使肛門周圍的皮膚疼痛。以下建議可能會有幫助：

- 保持肛門周圍皮膚清潔和乾燥。
- 使用無香料的濕紙巾，因為它比衛生紙對皮膚更溫和。
- 使用護墊、防護濕紙巾或噴霧來保護皮膚。專科護士可以為您提供護墊和藥膏的使用建議。
- 穿棉質內衣，使皮膚保持乾爽。

飲食改變

您的醫療團隊可能會建議您在腸道手術恢復期間遵循特定的飲食。

手術後的最初幾天，您可能會被建議採取低纖維飲食。低纖維食物包括白麵包、白麵條或普通餅乾、去皮的水果和蔬菜。

定時進食將有助於腸道更規律地運作。您可能會發現每天吃幾次小餐比吃一兩次大餐更容易消化。

如果您仍然在飲食上有問題，請向您的護士或醫生尋求建議。

焦慮

感到焦慮或擔心可能會讓您排便變稀。學習如何放鬆可能有助於腸道平穩運作。這對您的整體健康也有好處。

麥克米倫廁所卡

如果您擔心需要緊急使用廁所，這可能會讓您不敢外出。攜帶一張免費的麥克米倫廁所卡可能會有所幫助。您可以在商店、辦公室和咖啡店等地方出示這張卡片。我們希望此卡能幫助您使用廁所，但可能並非所有地方都接受。

此卡僅提供英文版本，上面寫著：「由於我的癌症治療，我需要緊急使用廁所。請問您能幫忙嗎？」

您可致電我們的麥克米倫支援熱線 **0808 808 00 00**，獲取卡片。

您也可以在此 orders.macmillan.org.uk 網上訂購。

您也可以使用無障礙廁所。這些廁所設有洗手盆和換衣服的空間。無障礙廁所有時候會上鎖。您可以從 [英國殘疾人權利組織 \(Disability Rights UK\)](https://www.disabilityrightsuk.org/) 購買一把鑰匙。

更多有關副作用的資訊

我們提供更多有關疲勞和飲食問題的資訊，這些資訊可能對您有幫助。您可以在網上找到這些資訊，網址為 macmillan.org.uk/translations。

跟進覆診

完成治療後，您將會定期進行檢查，並可能需要進行一些測試。這些檢查通常會持續長達 5 年。

如果在檢查期間出現任何新症狀，請儘快告訴您的全科醫生、癌症醫生或護士。

您的感受

當您獲悉患上癌症時，您可能會感到不知所措，您可能出現很多不同的情緒。感受沒有對錯之分。而應對的方法亦有很多種，與親朋好友交談可能會有所幫助。或者向您的醫生或護士尋求協助。

獲得合適的護理和援助

如果您患有癌症並且不會說英語，您可能會擔心會影響您的癌症治療和護理。但是您的醫療團隊應該可以為您提供能滿足您需要的護理、援助和資訊。

我們知道，有時尋找合適的援助可能會面對額外的困難。例如，如果您有工作或家庭，可能很難抽出時間到醫院出席預約覆診。您可能還會擔心金錢和交通費。所有這些事情都會讓人感到壓力和難以應對。

我們還向癌症患者提供麥克米倫（Macmillan）資助金。這是一次性的款項，可用於支付醫院停車費、交通費、托兒或暖氣費等費用。

麥克米倫（Macmillan）能夠如何幫助您

在麥克米倫（Macmillan），我們知道癌症確診後會如何影響您的各方面生活，我們隨時為您提供援助。

麥克米倫支援熱線 (Macmillan Support Line)

我們提供傳譯服務，所以您可以用自己的語言與我們溝通。您只需用英語告訴我們您希望使用哪種語言即可。

我們可以幫助您解決醫療問題，為您提供有關經濟援助的資訊，或者在您想要與人交談的時候聆聽您的意見。熱線服務時間為每星期七天，每日上午 8 時至晚上 8 時。請致電 0808 808 00 00 聯絡我們。

麥克米倫網站

我們的網站上有大量關於癌症的英文資訊。您也可以在此 macmillan.org.uk/translations 上找到更多其他語言的資訊。

我們亦可以為您安排翻譯。電郵至 informationproductionteam@macmillan.org.uk 告訴我們您的需求。

資訊中心

我們的資訊和支援中心設立於醫院、圖書館及流動中心。您可以前往任何一個中心，獲取您需要的資訊並與工作人員面對面交談。訪問 macmillan.org.uk/informationcentres 找到最近的中心，或致電 0808 808 00 00 聯絡我們。

本地支援小組

在支援小組中，您可以與其他受癌症影響的人交談。訪問 macmillan.org.uk/supportgroups 查詢您所在地區的支援小組，或致電 0808 808 00 00 聯絡我們。

麥克米倫線上社區

您可以在 macmillan.org.uk/community 與其他受癌症影響的人在線交談。

您可以在任何時間訪問該網站，無論白天或晚上。您可以分享您的經驗、提出問題，或者只是閱讀其他人的帖子。

更多繁體中文資訊

我們提供更多有關下列主題的繁體中文資訊：

應對癌症

- 癌症與新冠病毒
- 英國的癌症護理
- 如果您患有癌症，可申請的福利
- 飲食問題與癌症
- 生命的終結
- 難民和尋求庇護人士的醫療保健
- 健康飲食
- 患癌時獲得費用幫助
- 若您被診斷患有癌症
- LGBTQ+ 人士與癌症
- 敗血症和癌症
- 癌症治療的副作用
- 疲倦（疲勞）與癌症

癌症類型

- 乳癌

- 子宮頸癌
- 大腸癌
- 肺癌
- 前列腺癌

治療

- 化療
- 放射治療
- 手術

要查看此資訊，請訪問 macmillan.org.uk/translations

參考文獻與致謝

本資訊由麥克米倫癌症援助機構（Macmillan Cancer Support）癌症資訊開發團隊編寫和編輯。由翻譯公司提供繁體中文的翻譯版本。

此資訊基於我們網站上的英文版結腸癌和直腸癌內容。

此資訊已由相關專家審核，並經由高級醫學編輯、腫瘤顧問醫生 Paul Ross 博士批准。

同時感謝審閱本資訊的癌症患者。

我們所有資訊的依據都是來自最佳的證據。如需更多有關我們使用的資料來源，請聯絡我們：informationproductionteam@macmillan.org.uk

內容審閱：2024年 下次預計審閱：2027

MAC15136_中文（香港繁體）_E04

我們盡一切努力確保我們提供的資訊是準確和最新的，但請不要依賴這些資訊來替代針對您情況的專業建議。在法律允許的範圍內，Macmillan 不承擔與使用本出版物中的任何資訊或其中包含或提及的第三方資訊或網站相關的責任。

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Bowel cancer: English

This information is about bowel cancer and treatments for bowel cancer. If you have any questions about this information, ask your doctor or nurse at the hospital where you are having treatment.

You can also call Macmillan Cancer Support on freephone **0808 808 00 00**, 7 days a week, 8am to 8pm. We have interpreters, so you can speak to us in your own language. When you call us, please tell us in English which language you need.

There is more cancer information in your language and other languages at macmillan.org.uk/translations

This information is about:

- The bowel
- Bowel cancer
- How treatment is planned
- Talking to your healthcare team
- Treatments for bowel cancer
- Possible side effects of your treatment
- Follow up
- Your feelings
- Getting the right care and support for you
- How Macmillan can help you
- More information in your language
- References and thanks

The bowel

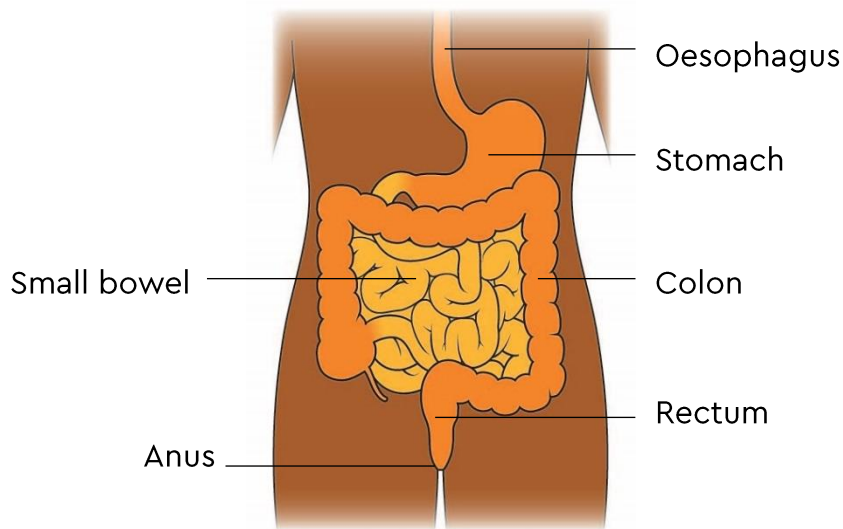
The bowel is part of the digestive system. The digestive system breaks down and absorbs food so that the body can use it.

The bowel has 2 parts:

- the small bowel
- the large bowel.

The large bowel has three parts. These are:

- the colon
- the rectum
- the anus.



Bowel cancer

All parts of the body are made up of tiny cells. Bowel cancer happens when the cells in the bowel grow in an uncontrolled way and form a lump called a tumour.

The place where the cancer first begins to grow is the primary cancer. The primary cancer is named after the place in the body where it started, for example bowel cancer.

Bowel cancer is cancer that affects the colon or the rectum. Bowel cancer is also called colorectal cancer.

Sometimes, bowel cancer cells spread to other parts of the body through the blood and the lymphatic system. This is called secondary cancer.

Bowel cancer is not infectious and cannot be passed on to other people.

Cancer can also affect the small bowel or the anus. These cancers are treated differently to bowel cancer. We have information in English about these types of cancer.

The lymphatic system

The lymphatic system helps protect us from infection and disease. It is made up of fine tubes called lymphatic vessels. These vessels connect to groups of small lymph nodes throughout the body.

There are lymph nodes close to the colon and rectum. Bowel cancer can spread to the lymph nodes close to the bowel.

Stages and grades of bowel cancer

The stage of a cancer means how big it is and if it has spread.

The grade of a cancer is how quickly the cancer may grow.

How treatment is planned

Your healthcare team will meet to plan the best treatment for you. Your doctor or nurse will then talk to you about:

- the stage and grade of the cancer
- your general health
- the treatments and possible side effects
- what you think about the available treatments.

Talking to your healthcare team

It is important to talk about any treatment with your doctor.

Your hospital can arrange an interpreter for you. Let your nurse know if you need one. You may also want to take someone with you who can speak your language and English.

After talking with you, your doctor will usually ask you to sign a form to show that you understand what the treatment means and that you agree to having it. This is called giving your consent. You will not be given treatment unless you have agreed to it.

Questions to ask about your treatment

Here are some questions you might want to ask your cancer team about your treatment:

- What does my diagnosis mean?
- What is the stage and grade of the cancer?
- What will my treatment be?
- What are the benefits, risks and side effects of each treatment?
- How will the treatment affect my daily life?
- Who can I talk to about how I am feeling?

Treatments for bowel cancer

Treatments for bowel cancer include:

- an operation (surgery)
- drugs (chemotherapy, targeted therapy or immunotherapy)
- radiotherapy

Many people have more than one type of treatment, such as an operation and then chemotherapy or radiotherapy.

Surgery

An operation to remove the cancer is the most common treatment for bowel cancer.

Sometimes, very small early-stage bowel cancers can be removed with an operation called a local resection. This is where they remove the cancer using surgical tools passed through the anus. The surgeon does not need to make a cut in the tummy (abdomen).

Most people will have an operation to remove part of the bowel. The surgeon will usually remove the lymph nodes that are near the cancer. This is because cancer cells can spread to lymph nodes near the cancer.

You may have your operation as:

- **open surgery** – this is when the surgeon makes 1 large cut before removing the cancer.
- **keyhole (laparoscopic) surgery** – this means the surgeon makes 4 or 5 small cuts. They put surgical tools through the cuts to remove the cancer. You usually recover more quickly from keyhole surgery than from open surgery.

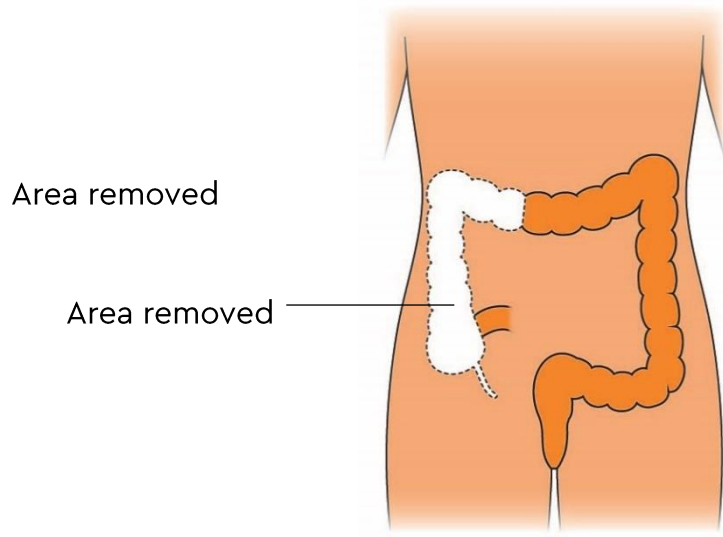
Types of operation for colon cancer

- **Hemi-colectomy** – half of the colon is removed. This may be the right or left side, depending on where the cancer is.
- **Sigmoid colectomy** – the sigmoid colon is removed.

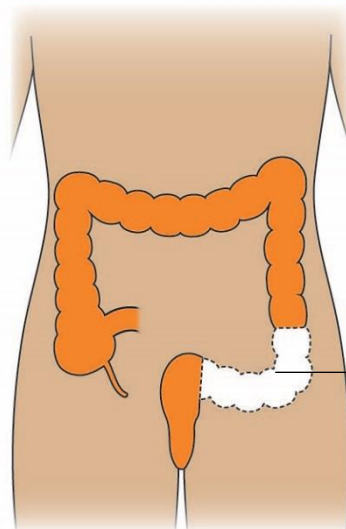
After removing the part of the bowel where the cancer is, the surgeon joins the two ends of the bowel together. Some people may need to have all the colon removed. This is called a total colectomy. Your doctor will tell you more about this if you need this type of operation.



Left hemi-colectomy



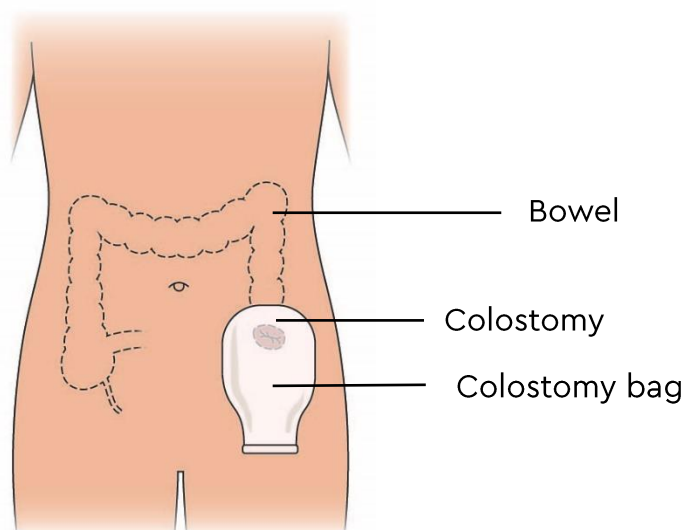
Right hemi-colectomy



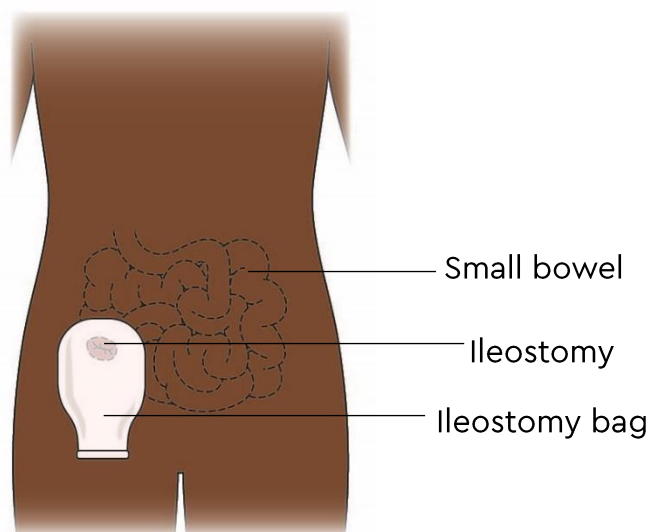
Sigmoid colectomy

Stomas

Some people need to have a stoma. This is when the surgeon connects the end of the bowel to the surface of the tummy (abdomen). You will pass poo (stools) out through the stoma into a special bag you wear. There are different types:



Stoma and stoma bag (colostomy)



Stoma and stoma bag (ileostomy)

A stoma nurse will show you how to look after the stoma and give you more advice and information. A stoma nurse is a nurse who specialises in stoma care. You may find it helps to talk to someone who has a stoma. Your nurse may be able to arrange this for you. Your nurse will teach you how to manage your stoma at home. You may only need a stoma for a short time after an operation, to allow

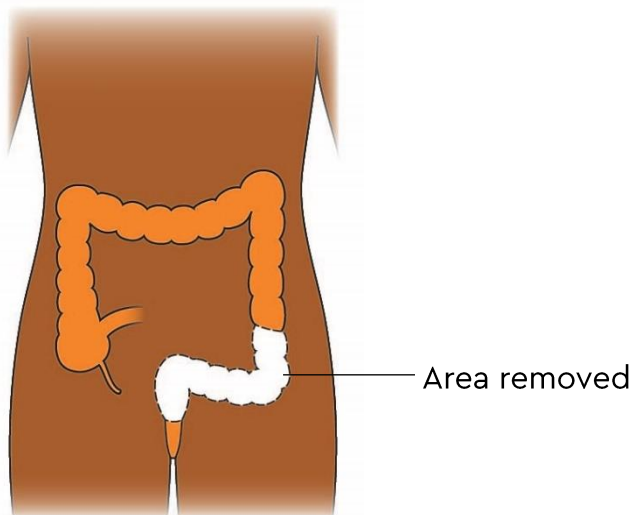
the bowel to heal. But sometimes it will be permanent. Your doctor can tell you if you may need a stoma and how long you may have it for.

Types of operation for rectal cancer

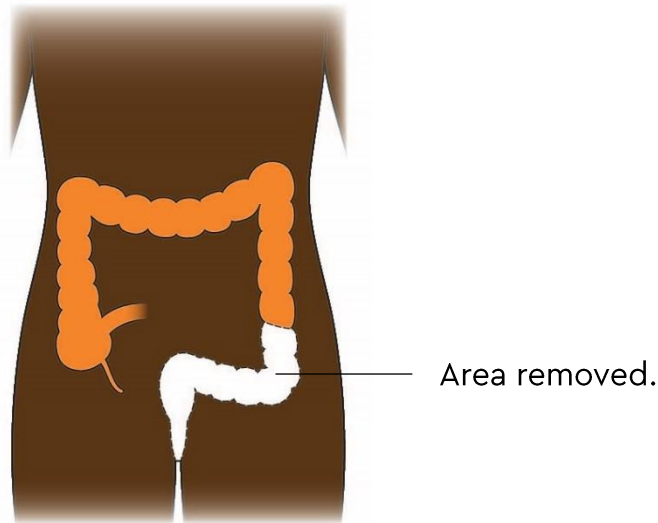
If you have a very small rectal cancer, you may have an operation called a local excision. The cancer can usually be removed through the anus. This means the surgeon does not have to make a cut in your tummy.

You may need a larger operation to remove the cancer and some of the fatty tissue and the lymph nodes around the rectum. There are 2 types of operation:

- **Anterior resection** – the surgeon removes the part of the rectum that is affected by the cancer. They join the two ends of the bowel together.
- **Abdominal perineal resection** – this is usually used for cancers near the anus. The doctor removes the rectum and anus. After this operation, you will have a permanent stoma.



Anterior resection



Abdominal perineal resection

Other types of surgery

Sometimes, the cancer blocks the bowel and stops poo from passing through. This can cause tummy pain and vomiting. The doctor may put a small tube called a stent into the bowel to keep it open. Some people may need to have the blocked part of the bowel removed during an operation.

If the cancer has spread to another part of the body, such as the liver or lungs, you can sometimes have an operation to remove it.

We have more information in your language about surgery and some of the side effects you may have on our website, visit [macmillan.org.uk/translations](https://www.macmillan.org.uk/translations)

Chemotherapy

Chemotherapy uses anti-cancer drugs to destroy cancer cells. You do not usually need chemotherapy for early-stage bowel cancer. Chemotherapy may be given:

- after surgery to reduce the risk of cancer coming back
- before surgery, to shrink the cancer and reduce the risk of it coming back
- as the main treatment for cancer that has spread.

Chemotherapy drugs can cause side effects that make you feel unwell. Different drugs can cause different side effects. These include:

- being more likely to get an infection
- feeling tired
- feeling sick or being sick
- diarrhoea – passing more poo than usual, or loose or watery poo
- a sore mouth
- hair loss.

Your doctor can talk to you about the side effects you may have and how to manage them. Most side effects can be controlled with drugs. Most side effects go away when chemotherapy is over.

We have more information about chemotherapy in your language on our website, visit [macmillan.org.uk/translations](https://www.macmillan.org.uk/translations)

Radiotherapy

Radiotherapy uses high-energy x-rays to destroy the cancer cells. You do not usually have radiotherapy for colon cancer. It is a common treatment for rectal cancer.

You may have radiotherapy before an operation to remove rectal cancer. It can make the cancer smaller and easier to remove and reduce the risk of the rectal cancer coming back.

After the radiotherapy, you usually wait at least 6 weeks before having surgery. Radiotherapy may be used after an operation if there is a chance that some cancer remains.

If rectal cancer has spread or comes back, you may have radiotherapy to make it smaller. It can also help with symptoms, such as pain.

Side effects of radiotherapy for rectal cancer include:

- tiredness
- changes to your skin
- bowel changes
- bladder changes.

We have more information in your language about radiotherapy and some of the side effects you may have on our website, visit [macmillan.org.uk/translations](https://www.macmillan.org.uk/translations)

Chemoradiation

If you have a rectal cancer, you may have chemoradiation. This is when you have chemotherapy and radiotherapy at the same time. It can work better than having either chemotherapy or radiotherapy on their own. Having the treatments together can make the side effects worse.

Targeted therapy

Targeted therapy drugs target something in or around a cancer cell that is helping it grow and survive. Targeted therapies are sometimes used to treat bowel cancers that have spread to other parts of the body.

You may have a targeted therapy drug with chemotherapy. Side effects can vary. They may include:

- dry skin or a rash
- diarrhoea

- feeling sick
- flu symptoms.

Most side effects can be controlled with drugs and go away when treatment is over.

Immunotherapy

Immunotherapy drugs use the immune system to find and attack cancer cells. They may be used to treat bowel cancer that has spread to other parts of the body.

Side effects of immunotherapy include:

- diarrhoea
- skin changes
- joint pains
- feeling tired.

Possible side effects of your treatment

Bowel changes

After treatment, your bowel may work differently for a while. You may:

- have diarrhoea
- need to poo more often
- not get much warning when you need to poo
- have a sore bottom.

These usually improve over time. Tell your doctor or nurse if you have these side effects or if they do not improve. They can give you advice and medicines to help.

Protect your skin

Having loose or watery poo can make the skin around your bottom sore. These tips may help:

- Keep the skin around your bottom clean and dry.
- Use unperfumed wet wipes as they are softer on your skin than toilet paper.
- Use pads and barrier wipes or sprays to help protect your skin. A specialist nurse can advise you about pads and creams to use.
- Wear cotton underwear to keep your skin dry and cool.

Diet changes

Your healthcare team may advise you to follow a specific diet while your bowel recovers from surgery.

For the first few days after surgery, you may be advised to eat a low-fibre diet. Low fibre foods include white bread, white pasta or plain crackers, peeled fruit and vegetables.

Eating at regular times will help your bowel to work more regularly. You may find it easier to eat several small meals a day instead of 1 or 2 large meals.

If you continue to have problems with what you can eat, speak to your nurse or doctor.

Anxiety

Feeling anxious or worried can make your poo looser. Learning how to relax may help your bowel to settle. It is also good for your general health.

Macmillan toilet card

You may worry about going out if you need to use a toilet urgently. It may help to carry a free Macmillan toilet card. You can show this in places such as shops, offices and cafes. We hope it will help you get access to a toilet but it may not work everywhere.

The card is only available in English and reads 'due to my cancer treatment I need urgent access to a toilet. Please can you help?'

You can get one by calling our Macmillan Support Line on 0808 808 00 00.

Or you can order one at orders.macmillan.org.uk

You can also use disabled toilets. They have a wash basin and space to change your clothes. Disabled toilets are sometimes locked. You can buy a key from [Disability Rights UK](https://www.disabilityrightsuk.org/).

More information on side effects

We have more information about tiredness and eating problems which you may find helpful. You can find this information online at macmillan.org.uk/translations.

Follow up

After your treatment has finished, you will have regular check-ups and may also have tests. These usually continue for up to 5 years.

If you notice any new symptoms between check-ups, tell your GP, cancer doctor or nurse as soon as possible.

Your feelings

You may feel overwhelmed when you are told you have cancer. You may have many different emotions. There is no right or wrong way to feel. There are many ways to cope with this. Talking to a close friend or relative may help. Your doctor or nurse can help too.

Getting the right care and support for you

If you have cancer and do not speak English, you may be worried that this will affect your cancer treatment and care. But your healthcare team should offer you care, support and information that meets your needs.

We know that sometimes people may face extra challenges in getting the right support. For example, if you work or have a family it can be hard to find time to go to hospital appointments. You might also have worries about money and transport costs. All of this can be stressful and hard to cope with.

We also offer Macmillan Grants to people with cancer. These are one-off payments that can be used for things like hospital parking, travel costs, childcare or heating bills.

How Macmillan can help you

At Macmillan, we know how a cancer diagnosis can affect everything, and we are here to support you.

Macmillan Support Line

We have interpreters, so you can speak to us in your language. Just tell us, in English, the language you want to use.

We can help with medical questions, give you information about financial support, or be there to listen if you need someone to talk to. The free, confidential phone line is open 7 days a week, 8am to 8pm. Call us on 0808 808 00 00.

Macmillan website

Our website has lots of information in English about cancer. There is also more information in other languages at [macmillan.org.uk/translations](https://www.macmillan.org.uk/translations)

We can also arrange translations just for you. Email us at informationproductionteam@macmillan.org.uk to tell us what you need.

Information centres

Our information and support centres are based in hospitals, libraries and mobile centres. Visit one to get the information you need and speak with someone face to face. Find your nearest centre at [macmillan.org.uk/informationcentres](https://www.macmillan.org.uk/informationcentres) or call us on 0808 808 00 00.

Local support groups

At a support group, you can talk to other people affected by cancer. Find out about support groups in your area at [macmillan.org.uk/supportgroups](https://www.macmillan.org.uk/supportgroups) or call us on 0808 808 00 00.

Macmillan Online Community

You can talk to other people affected by cancer online at macmillan.org.uk/community

You can access it at any time of day or night. You can share your experiences, ask questions, or just read through people's posts.

More information in your language

We have information in your language about these topics:

Coping with cancer

- Cancer and coronavirus
- Cancer care in the UK
- Claiming benefits when you have cancer
- Eating problems and cancer
- End of life
- Healthcare for refugees and people seeking asylum
- Healthy eating
- Help with costs when you have cancer
- If you are diagnosed with cancer
- LGBTQ+ people and cancer
- Sepsis and cancer
- Side effects of cancer treatment
- Tiredness (fatigue) and cancer

Types of cancer

- Breast cancer
- Cervical cancer
- Large bowel cancer
- Lung cancer
- Prostate cancer

Treatments

- Chemotherapy
- Radiotherapy
- Surgery

To see this information, go to [macmillan.org.uk/translations](https://www.macmillan.org.uk/translations)

References and thanks

This information has been written and edited by Macmillan Cancer Support's Cancer Information Development team. It has been translated into this language by a translation company.

The information included is based on our colon cancer and rectal cancer content available in English on our website.

This information has been reviewed by relevant experts and approved by Senior Medical Editor Dr Paul Ross, Consultant Medical Oncologist.

Thanks also to the people affected by cancer who reviewed this information.

All our information is based on the best evidence available. For more information about the sources we use, please contact us at informationproductionteam@macmillan.org.uk

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