

Bowel and Anal Cancer Dictionary

A

Adenoma: a tumour or polyp which is benign but can change over time to become cancerous.

Adjuvant chemotherapy: treatment given to patients after surgery has removed their primary tumour.

Anaemia: a reduced number of red blood cells and/or levels of haemoglobin (the pigment in the blood which carries oxygen).

Anus: the opening at the lower end of the bowel through which stools are passed.

ASA: (American Society of Anaesthesiologists) grades are a simple scale describing fitness to undergo an anaesthetic. Comorbidities that do not (ASA Grade 2) or does (ASA Grade 3) limit a patient's activity.

B

Biopsy: small piece of tissue taken from the area concerned to be examined under a microscope.

Bowels: another name for the intestines - the small bowel (duodenum, jejunum and ileum) and the large bowel (colon and rectum).

Bristol Stool Chart: a medical aid designed to classify the form of human faeces into seven categories. (Types 3 and 4 being the ideal stools).

C

Cancer: abnormal and uncontrolled division of cells that invade and destroy surrounding tissue.

Chemotherapy: the treatment of cancer by drugs which can stop cancer cells from dividing and spreading.

CEA: blood test (Carcinoembryonic antigen). This blood test measures the amount of this protein that may appear in the blood of some people who have certain kinds of cancers, especially bowel cancer. This blood test is sometimes used during follow up.

Colectomy: removal of the colon by surgery. Partial colectomy is the removal of a portion of the colon.

Colon: part of the large bowel which has the role of absorbing water and salts from digested food. It is the final pathway for the removal of waste products from the body.

Colonoscopy: the passing of a long, flexible, narrow tube through the anus to inspect the lining of the rectum and colon (bowel).

Colostomy: the end of the colon is brought to the skin surface on the abdomen to form an external channel for the passage of stools into a colostomy bag.

Colorectal Nurse Specialist (CNS): a nurse who has received specialist training and is experienced in all aspects of bowel cancer.

Comorbidity: is two or more co-existing medical conditions or disease processes that are additional to an initial diagnosis.

CT scan: (computerised tomography) a high quality x-ray with the ability to examine soft tissue, i.e. not solid material like bone, by giving a cross sectional image of 'slices' of the body.

D

Diverticular Disease: is when small bulges or pockets (diverticular) develop in the lining of the intestine. Diverticulitis is when these pockets become inflamed or infected.

Dysplasia: The presence of abnormal or enlarged cells that can pre-empt the occurrence of cancers.

E

Enema: the passing of a small tube through the anus to allow the introduction of a quantity of fluid into the rectum. This is used to relieve constipation or to empty the bowel.

Enhanced Recovery Programme: Is a modern evidence based approach to help people recover quicker after major surgery.

F

Faecal Occult Blood Test (FOB Test): a kit to test for traces of hidden (occult) blood in the stools. Forms part of the national screening programme.

Faeces: bowel motions; stools; also called 'waste' and poo.

Family Cancer Genetics Clinic: a specialist clinic where people with suspected family history can be screened and given specific genetic advice.

Fibre: a substance found in foods that come from plants, fruits and vegetables. Fibre helps to aid digestion.

Flatus/Flatulence: gas in the stomach or intestine, commonly referred to as 'wind' when passed through the rectum.

Flexible sigmoidoscopy: a short, flexible lighted tube passed through the anus into the rectum to inspect the lining of the lower part of the colon and rectum.

G

Gastroenterologist: a physician specially trained in the diagnosis and treatment of disorders of the gastro intestinal tract.

Gene (genetic makeup): the inherited characteristics of an individual; the blueprint of life.

Genetics: the study of inherited genes.

H

Haemorrhoids(piles): enlargement of the normal spongy blood- filled cushions in the wall of the anus.

Hemicolectomy: surgical removal of about half of the colon with subsequent joining of the remaining colon.

Histopathology: the examination of tissue from the body under a microscope to spot the signs and characteristics of disease.

I

Ileocaecal valve: the valve at the junction of the small bowel and large bowel which controls the back flow of waste products.

Ileostomy: an opening into the ileum, part of the small intestine, from the outside of the body. An ileostomy provides a new exit for waste material.

Inflammatory Bowel Disease (IBD): a general term for chronic inflammatory disorders affecting the small and/or large intestine. e.g. Crohn's disease, Ulcerative Colitis.

K

Key Worker: a Professional, who with patient consent and agreement, takes a key role in co-ordinating the patients care and promoting continuity, ensuring the patient knows who to access for information and advice.

L

Laparoscopic Surgery: commonly called 'keyhole surgery'. Several small incisions are made in the abdomen allowing a laparoscope (a small viewing camera) and specialised surgical instruments to view and operate on the tumour.

Laparotomy (open surgery): a surgical incision into the abdominal cavity to examine abdominal organs.

Large bowel: the colon and rectum.

Liver Biopsy: a medical procedure to obtain a small piece of liver tissue for diagnostic testing.

Lymph nodes: a network of vessels which transport fluid from body tissue to the blood stream, acting as the body's drainage system.

M

Magnetic Resonance Imaging (MRI): a sophisticated X-ray machine that takes detailed pictures of internal organs, including the pelvis.

Malignant: a cancerous tumour which can invade and destroy surrounding tissue and spread to other sites in the body.

Margin: used in medical terms to describe a healthy section of tissue surrounding a tumour.

Melaena: black tarry faeces (stool) due to the presence of partly digested blood from higher up the digestive tract.

Metastases/Metastasis/metastatic: Secondary deposits of cancer cells travel from the primary tumour site to other organs of the body.

Monoclonal Antibodies: a form of biological therapy used with chemotherapy to treat metastatic bowel cancer.

Micro satellite instability (MSI): advanced test on a specimen to help decide if a patient would benefit from chemotherapy

Macmillan Support Worker: A member of the Bowel and Anal Cancer Team, supporting patients face to face and on the telephone. Can help with things such as triaging and signposting.

Mucus: clear 'jelly like' substance which lubricates the lining of the bowel to ease the passage of stools. Excessive amounts are often produced when bowel cancer is present.

MDT: Multi-disciplinary team - a team made up of various health professionals who work together to discuss a patient's case and how best to manage treatment and care.

N

Neoadjuvant chemotherapy: chemotherapy given before treatment to remove the primary tumour with the aim of improving the results of surgery.

O

Occult blood: non-visible blood in the stools, which can be detected by a simple laboratory test known as a faecal occult blood (FOB) test.

Oncologist: a physician who specialises in the diagnosis and treatment of cancer.

P

Palliative: Medication, treatment or care given for late stage cancer which can help alleviate symptoms but will not 'cure' the cancer.

PET Scan: Positron Emission Tomography. A specialised scan that produces three dimensional images of the body. A PET scan uses a radioactive drug to show up abnormal tissue.

Performance Status: (P.S.) is a medical measure used to assess a person's general fitness. Eg PS 0 = fully active, able to carry on all pre disease activities without restriction).

PICC Lines: (Peripherally inserted central catheters). A long, thin, flexible tube is inserted into a large vein in the arm, near the bend of the elbow. It's then threaded into the vein until the tip sits in a large vein just above the heart. Chemotherapy is often administered via this route. PICC Lines usually stay in for the duration of treatment.

Polyp: a cluster of cells which project as a growth, usually on a stalk, from the mucosal lining of the bowel.

Prognosis: a prediction of what might happen in the future i.e. the progress of the disease.

R

Radiologist: a Doctor who specialises in reporting imaging such as x-ray, ultrasound and other similar examinations.

Radiotherapy: the treatment of cancer by deep X-rays.

This is sometimes given for rectal cancer before or after surgery.

Rectum: the lowest part of the large bowel nearest the anus.

S

Secondaries: cancer that has spread from the original site to other organs. Also known as metastases.

Screening: Aims to detect bowel cancer at an early stage in people with no symptoms, when treatment is more likely to be effective.

Sigmoidoscopy: a short, lighted tube passed through the anus into the rectum to inspect the lining of the lower part of the colon and rectum.

Stoma: the opening made through the abdomen for the passage of stools into a colostomy bag.

Stoma Nurse: a specialist nurse who has been highly trained in the care of patients who have had a stoma, their carers and families.

Stools: motions, faeces, waste, poo.

T

TNM: a system of staging of the disease. T=size of tumour; N=number of lymph nodes affected; M=spread of cancer to other organs i.e. metastatic spread.

Ultrasound (ultrasonic waves): inaudible sound waves which are used to examine the structure of the inside of the body.

V

Virtual Colonoscopy: (CT Colonoscopy/CTC) a less invasive scan looking at external and internal surface of the large bowel. Bowel preparation is needed before this procedure.

X

X-Ray: a scan which produces data or images of internal bones and organs.

If there are other words or terms that you are unclear about please do contact your Colorectal Macmillan Nurse Specialist who will be able to help you.

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Macmillan Support Worker

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