Bowel cancer screening programme

Follow-up examination
What is this leaflet for?

You have taken part in the bowel cancer screening programme.

We found blood in your stool.
Blood in your stool can have various causes. It can be linked to polyps or bowel cancer.

A follow-up examination is needed in the hospital
Your colon will be examined in the hospital. This leaflet contains further details about this follow-up examination.

Do you still have questions after reading the information in this leaflet?
Please contact your family doctor or visit www.bevolkingsonderzoekdarmkanker.nl
The screening in five steps

1 Letter with results and appointment
You have received a letter with this leaflet with the results from the screening.

This letter will inform you about your appointment for the intake interview at the hospital.

2 Contact with your GP
The hospital needs your medical data but does not receive them automatically. Therefore, contact your GP to request your medical data. You will take this information to the hospital.

You can also ask your GP about any other questions you might have about the results.

3 Intake interview at the hospital
At the hospital, you will have an intake interview about the surveillance examination with a doctor or nurse. You will discuss your medical data, among other things. The doctor or nurse will ask you if there is a history of bowel cancer in your family. During the interview, you will discuss whether the surveillance examination is feasible and beneficial. That depends on your health, among other things. The surveillance examination will also be explained to you. After the interview, you will make an appointment for the surveillance examination.

The letter with this leaflet describes what you have to take with you to the hospital.

The intake interview lasts about half an hour.
4 Preparation at home
During the surveillance examination, it is important that your intestine is clean and empty. The doctor can then properly examine your colon. That is why you drink a laxative beforehand in your home. You will have to go to the toilet often and you may get intestinal cramps.

- During the intake interview, you will be given more details about the preparation at home. You will also receive a prescription for the pharmacy where you can pick up the laxative.

5 Surveillance examination at the hospital
The surveillance examination is intended to examine the inside of your colon. The doctor uses an endoscope for this. That is a flexible tube that is about as thick as a finger. The doctor carefully slides the endoscope through the anus and into the bowel. The end of the endoscope has a small camera with a light. This allows the doctor to see if there are polyps in your bowel.

- The surveillance examination takes about 30 to 45 minutes.

- You will receive light sedation
  Many people experience the insertion of the endoscope as unpleasant. Moving the endoscope through the colon can also hurt, especially in the bends of your bowel. That is why you receive a mild sleeping aid and a painkiller. This is called light sedation. This will be explained to you during the intake interview.
What happens if the doctor sees a polyp?
If the doctor sees a polyp during the surveillance examination, the doctor can usually remove the polyp immediately. It is also possible that the doctor will get a very small piece from the inside of the colon for further examination. After the surveillance examination, the polyp or the piece of intestinal tissue is further examined in a laboratory. This is necessary to see if you have bowel cancer. It is also possible that another condition is detected in the bowel, such as an inflammation in the bowel. You will be informed about the results after about a week.

Costs of the follow-up examination
The intake interview and the surveillance examination are not part of the screening programme. These costs are covered by your healthcare insurance. For example, your insurer may not have a contract with the hospital where you have an appointment. In that case, your healthcare insurer does not reimburse all costs. If you have any questions about reimbursement of the costs, please check with your healthcare insurer before you go to your appointment.
Complications during a surveillance examination

Every surveillance examination is done very carefully. Nevertheless, complications can arise:
• Bleeding may occur when removing a polyp. If the bleeding occurs during a surveillance examination, the doctor can often stop the bleeding during the surveillance examination itself.
• There is a very small chance of a perforation of the bowel. That is a hole or tear in the bowel. This is very rare.
• Due to a small hole or tear in the colon, stool material can end up in the abdominal cavity. This can cause peritonitis.

An average of two serious complications occur during every 1,000 surveillance examinations. There is a very small chance of death as a result of a surveillance examination.
More information about this can be found at www.bevolkingsonderzoektarmkanker.nl under ‘Participate or not?’

Complaints after the surveillance examination

After the surveillance examination, you may experience symptoms such as abdominal pain, intestinal cramps, bloating or flatulence for a while. It is possible that some mucus or fluid will come out of the anus. If the doctor has removed a polyp or piece of intestinal tissue, you can also see a little blood. This can occur up to two weeks after the surveillance examination. Usually it stops bleeding after a few days.

When do you contact the hospital?
Are you losing a lot of blood or is the bleeding lasting longer than a few days? Do you have a fever? Or are the abdominal complaints getting worse? Then contact the hospital where you had the surveillance examination. Go to the emergency room outside office hours.
What are the possible results of the surveillance examination?

Immediately after the surveillance operation you will be told what the doctor has seen. If the doctor removed polyps or a piece of intestinal wall for examination in the laboratory, you will be informed about the results after about a week. Four different results are possible:

1. **The doctor does not find any polyps**
   Bowel cancer develops very slowly. That is why you do not need to participate in the screening programme for the next ten years after a surveillance examination. After that period, you will automatically receive an invitation to participate.

2. **The doctor finds one small polyp**
   The doctor will remove the polyp. You do not have bowel cancer. The doctor will talk to you about the follow-up. Because bowel cancer develops very slowly, you do not need to participate in the screening programme for the next ten years after a surveillance examination. After that period, you will automatically receive an invitation to participate.

3. **The doctor finds one or more large polyps**
   The doctor will remove the polyp(s). It is important to check if polyps are growing again in your colon. That is why you will receive a new surveillance examination in three or five years.

4. **The doctor has found bowel cancer**
   The doctor will discuss with you which treatment is best for you.

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<table>
<thead>
<tr>
<th>Result</th>
<th>Probability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not have any polyps</td>
<td>26/100</td>
</tr>
<tr>
<td>Have one small polyp</td>
<td>24/100</td>
</tr>
<tr>
<td>Have one or more large polyps</td>
<td>42/100</td>
</tr>
<tr>
<td>Have bowel cancer</td>
<td>8/100</td>
</tr>
</tbody>
</table>
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The doctor does not find any polyps

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The doctor finds one small polyp

The doctor will remove the polyp. You do not have bowel cancer. The doctor will talk to you about the follow-up. Because bowel cancer develops very slowly, you do not need to participate in the screening programme for the next ten years after a surveillance examination. After that period, you will automatically receive an invitation to participate.

The doctor finds one or more large polyps

The doctor will remove the polyp(s). It is important to check if polyps are growing again in your colon. That is why you will receive a new surveillance examination in three or five years.

The doctor has found bowel cancer

The doctor will discuss with you which treatment is best for you.

Immediately after the surveillance operation you will be told what the doctor has seen. If the doctor removed polyps or a piece of intestinal wall for examination in the laboratory, you will be informed about the results after about a week.

Four different results are possible:

1. The doctor has found bowel cancer.
2. The doctor finds one or more large polyps.
3. The doctor finds one small polyp.
4. The doctor does not find any polyps.

What is the probability of these results after the surveillance examination?

Of the 2,000 people who send a stool test, 1,900 people will not have a follow-up examination. 100 people will undergo a surveillance examination:

- 100 people will undergo a surveillance examination.
- 1,900 people will not have a follow-up examination.
- 26 out of 100 people will not have any polyps.
- 24 out of 100 people will have one small polyp.
- 42 out of 100 people will have one or more large polyps.
- 8 out of 100 people will have bowel cancer.
Go to your GP if you have intestinal complaints

There is a very small chance that you do have polyps or bowel cancer even though they were not detected during the surveillance examination. Was nothing detected but have you developed symptoms that may be linked to bowel cancer?

- Do you see blood in your stool, for example?
- Or have you been suffering from constipation or diarrhoea without a clear cause?

Make an appointment with your GP.
More information

For more details about the screening programme go to www.bevolkingsonderzoekdarmkanker.nl.

If you have any questions, tips or complaints about the screening programme, please contact the screening organisation in your region. The phone number can be found in the letter with this leaflet or on your screening organisation’s website. The screening organisation coordinates the screening on behalf of the government.

Please contact your GP if you have any questions about your health, or ask your questions in the hospital.

For more details about bowel cancer see:
www.mlds.nl/darmkanker
www.kanker.nl/darmkanker
www.darmkankernederland.nl
www.thuisarts.nl/darmkanker

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Information in other languages

www.bevolkingsonderzoekdarmkanker.nl/vertalingen

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National Institute for Public Health and the Environment
P.O. Box 1 | 3720 BA Bilthoven
The Netherlands
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Committed to health and sustainability