



National Institute for Public Health  
and the Environment  
*Ministry of Health, Welfare and Sport*

For the early detection of cancers

# Follow-up diagnostic testing after the colorectal cancer population screening programme





# Why this leaflet?

You have taken part in the colorectal cancer population screening programme.

## **We found blood in your stool**

There could be a number of reasons for blood in your stool. It could be because of polyps or colorectal cancer. There may also be other reasons.

## **Follow-up diagnostic testing is needed**

Being referred for follow-up diagnostic testing does not mean you have polyps or colorectal cancer. The aim of follow-up diagnostic testing is to find the reason for the blood in your stool.

There are two steps to follow-up diagnostic testing. First, you have an interview with a doctor or nurse at the hospital. The appointment details for this interview are in the result letter with this leaflet.

The second step is a visual examination. This means looking at the inside of your colon. A visual examination of the colon is called a colonoscopy. The aim of the colonoscopy is to find the reason for the blood in your stool. If a colonoscopy is possible in your case, you will get a second appointment at the hospital after the interview. This leaflet tells you more about follow-up diagnostic testing.

## **Do you still have questions after reading this leaflet?**

Please contact your GP or go to

[www.bevolkingsonderzoekdarmkanker.nl/vertalingen](http://www.bevolkingsonderzoekdarmkanker.nl/vertalingen).

## Follow-up diagnostic testing in 5 steps

### 1 Result letter with appointment details

We sent you a letter with the results of the population screening with this leaflet.

*In this letter are appointment details for an interview at the hospital. You can choose a different date or hospital if you like.*



### 2 Contact with your GP

The hospital needs your medical data, but it will not get this information automatically. Please contact your GP to ask for your medical data. You can then take this information with you to the hospital.

### 3 Interview at the hospital

At the hospital, you will have an interview with a doctor or nurse.

You will discuss:

- your health;
- if you take any medicines;
- if anyone else in your family has had colorectal cancer;
- how the colonoscopy works;
- if a colonoscopy is possible in your case;
- if and when you will have an appointment for a colonoscopy.

It is a good idea to think about these things before your interview.

*The letter we sent you with this leaflet explains what you need to bring with you to the hospital.*

*The interview will take about half an hour.*



### 4 Preparation at home

It is important that your colon is clean and empty during the colonoscopy. This way, the doctor is able to examine your colon properly. For this reason, you must drink a laxative at home before you go to the hospital. This will make you need the toilet a lot and may cause cramps.

*During the interview, the doctor or nurse will explain the preparation at home to you in more detail. He or she will also give you a prescription, so you can pick up the laxative from a pharmacy.*



### 5 Colonoscopy at the hospital

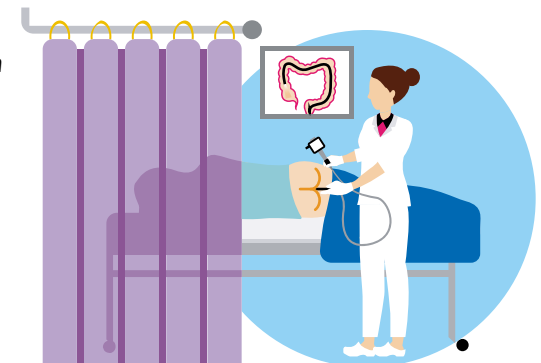
The aim of the colonoscopy is to examine the inside of your colon. The doctor will do this using an endoscope. This is a flexible tube that is about as thick as a finger. The doctor will carefully slide the endoscope through the anus and into your colon. In the tip of the endoscope, there is a small camera with a light. This way, the doctor can see if there are any polyps in your colon.

*The colonoscopy will take around 30 to 45 minutes.*

#### **You will get a light anaesthetic**

*Many people feel uncomfortable when the doctor inserts the endoscope.*

*The endoscope can sometimes hurt a bit as it moves deeper into the colon, especially when it needs to make a turn. This is why you will get a light anaesthetic ('roesje') to make you sleepy and/or a painkiller. The doctor or nurse will explain this to you during the interview.*



## After the colonoscopy

After the colonoscopy, you will have time to recover from the examination and the light anaesthetic. If everything goes well, the doctor will tell you what they saw as soon as you are fully awake. Then you can have something to eat and go home. In principle, you can eat and drink whatever you like after the examination.

## What if the doctor finds a polyp?

If the doctor finds a polyp during the colonoscopy, they can usually remove it immediately. The doctor may also remove a very small piece of the inside of your colon, so that it can be examined further in the laboratory. You will get the result after about a week.

### The costs of follow-up diagnostic testing

The interview and the colonoscopy are not part of the population screening.

These costs are paid by your healthcare insurer. You may need to pay the costs, or part of them, yourself. This depends on your excess and how much of it you have already used.

Follow-up diagnostic testing may be scheduled in a hospital that does not have a contract with your healthcare insurer. Contact your healthcare insurer to find out which hospitals they have a contract with. If you like, you can change the appointment to another hospital that has a contract with your healthcare insurer. To do this, please contact the Centre for Population Screening. You can find their contact details in the result letter and at [www.bevolkingsonderzoeknederland.nl/en](http://www.bevolkingsonderzoeknederland.nl/en).

If you have questions about getting the costs paid back, contact your healthcare insurer before you go to your appointment.

## Complications during a colonoscopy

Every colonoscopy is done very carefully, but complications can happen:

- If a polyp is removed, the spot might bleed. If there is bleeding during a colonoscopy, the doctor is often able to stop it during the examination.
- There is a very small chance of a small hole or tear in the colon. This almost never happens.
- If there is a hole or tear in the colon, stool can get into the abdominal cavity. This can lead to an infection called peritonitis.

For every 10,000 colonoscopies, an average of 3 serious problems happens. There is a very small chance that a colonoscopy can lead to death. You can find more information about this at [www.bevolkingsonderzoekdarmkanker.nl](http://www.bevolkingsonderzoekdarmkanker.nl) under Uitslag (Result).

## Symptoms after the colonoscopy

On the day of the colonoscopy, you may feel symptoms afterwards. These can include pain in your belly, cramps, feeling bloated or having gas. A little mucus or liquid may leak from your anus. If the doctor has removed a polyp or a piece of the inside of your colon, you may have a little bit of bleeding. This can happen up to 2 weeks after the colonoscopy. The bleeding usually stops after a few days.

### **When should you contact the hospital?**

Are you bleeding a lot or have you been bleeding for longer than a few days? Did you get a fever? Or are the symptoms in your belly becoming worse? If so, you should call the hospital where you had the colonoscopy. If you get these symptoms outside of opening hours, go to the Accident and Emergency department.

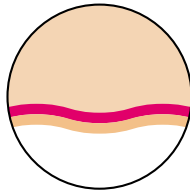


# What could the result of the colonoscopy be?

The doctor will tell you what they have seen immediately after the colonoscopy. If the doctor removed any polyps or a piece of the inside of your colon for a test in the laboratory, you will get the results after about a week. Four different results are possible:

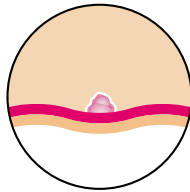
## 1 The doctor does not find any polyps

After a colonoscopy, you do not need to take part in the population screening for the next 10 years. This is because colorectal cancer develops very slowly. We will send you a new invitation in 10 years' time, unless you are older than 75.



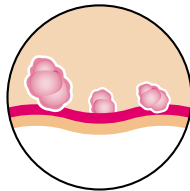
## 2 The doctor finds one or more small polyps

The doctor will remove the polyp or polyps. The doctor will talk to you about the next steps.



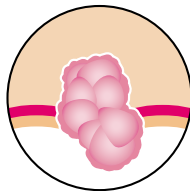
## 3 The doctor finds one or more large polyps

The doctor will remove the polyp or polyps. It is important to check back later to see if polyps are growing in your colon again. The doctor will talk to you about the next steps.

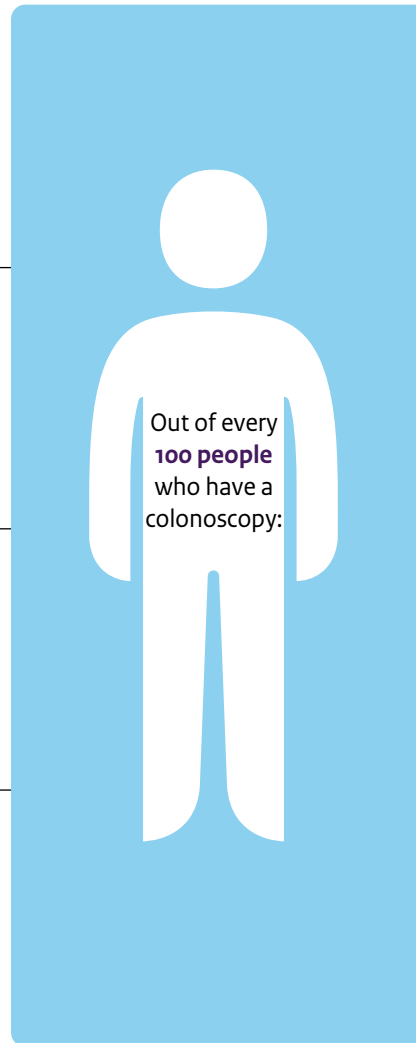


## 4 The doctor finds colorectal cancer

The doctor will talk to you about which treatment is best in your case.



# How likely is each of these results after a colonoscopy?



28 out of the 100 will have no polyps at all



40 out of the 100 will have one or more small polyps



27 out of the 100 will have one or more large polyps



5 out of the 100 will have colorectal cancer

## Contact your GP if you are having colon problems

There is a very small chance that you do have polyps or colorectal cancer, but that the doctor does not discover this during the colonoscopy. Did the doctor find nothing, but do you have symptoms of colorectal cancer?

- Do you see blood and/or mucus in your stool?
- Or have you had any of the following symptoms for a long time: a permanent change in the pattern of your bowel movement, less interest in food, weight loss, symptoms in your belly (such as pain, cramps or feeling bloated) or constantly feeling tired?

Then you should make an appointment with your GP.





## More information

For more information about the population screening, go to [www.bevolkingsonderzoekdarmkanker.nl/vertalingen](http://www.bevolkingsonderzoekdarmkanker.nl/vertalingen).

If you have questions, tips or complaints about the population screening, please contact the Centre for Population Screening. You can find the telephone number in the letter with this leaflet or at [www.bevolkingsonderzoeknederland.nl/en](http://www.bevolkingsonderzoeknederland.nl/en).

The Centre for Population Screening coordinates the population screening on behalf of the government.

If you have questions about your health, contact your GP or ask the doctor or nurse when you are at the hospital.

### **More information about colorectal cancer:**

[www.kwf.nl/darmkanker](http://www.kwf.nl/darmkanker)

[www.kanker.nl/darmkanker](http://www.kanker.nl/darmkanker)

[www.mlds.nl/darmkanker](http://www.mlds.nl/darmkanker)

[www.thuisarts.nl/darmkanker](http://www.thuisarts.nl/darmkanker)

*We have paid much care and attention to the content of this leaflet. You cannot derive any rights from it.*

## Information in other languages

You can read this information in English/Turkish/Arabic/Ukrainian/Russian at:  
Bu bilgiyi Türkçe olarak şu internet sitesinde okuyabilirsiniz:

يمكنكم قراءة هذه المعلومات باللغة العربية على الموقع:

Ви можете прочитати цю інформацію українською на веб-сайті:  
Вы можете прочитать эту информацию на русском языке на веб-сайте:



[www.bevolkingsonderzoekdarmkanker.nl/vertalingen](http://www.bevolkingsonderzoekdarmkanker.nl/vertalingen)

We wrote this leaflet with help from general practitioners (NHG), gastroenterologists (NVMDL), the Colorectal Cancer Foundation, the Dutch Stomach, Liver and Bowel Foundation, the Dutch Cancer Society (KWF) and the Centre for Population Screening.



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