

Colon Cancer

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Colon cancer is the third most common cancer in both men and women. It occurs in the last part of the digestive tract. Cancerous tumors form in the colon and are most commonly known as adenocarcinomas (“Colon Cancer,” 2022). Colon cancer is slow-growing, and symptoms do not normally appear until the disease is advanced (Harding, 2020). In the early stages, signs and symptoms are vague and appear nonspecific (Harding, 2020). In advanced stages, symptoms become more relevant. Symptoms of advanced disease include abdominal tenderness, palpable mass, hepatomegaly, and ascites (Harding, 2020). Once the cancer is considered advanced, metastasis to the liver, lungs, bones, brain, and adjacent abdominal structures is common (Harding, 2020).

Statement of the Problem

Colon cancer is second in terms of mortality worldwide (“Colon Cancer,” 2022). This type of cancer does not have an exact underlying cause. It seems that family history and genetics play a major role in development (“Colorectal Cancer,” 2022). Conditions such as a history of polyps, inflammatory bowel diseases including Crohn’s Disease and Ulcerative Colitis, as well as uterine and ovarian cancer increase the risk of developing colon cancer (“Colorectal Cancer,” 2022). Men are normally diagnosed earlier than women. The average age to be diagnosed is around 63 (“Colorectal Cancer,” 2022). In addition, lifestyle choices such as physical inactivity, diet, obesity, alcohol use, and smoking also play a role in developing colon cancer. According to the American Cancer Society (2023), there will be an estimated 106,970 cases diagnosed and 52,550 deaths during 2023 due to colon cancer. Leaving this disease untreated can cause an increased risk of mortality and incidence within the community.

Risk Reduction/Treatment of the problem

There are multiple ways that colon cancer can be prevented. Avoiding risk factors and protecting yourself are the most important ways to prevent colon cancer from developing. Prevention starts with being screened and changing unhealthy lifestyle choices. Screening for individuals should begin at the age of 45 (Doubeni, 2022). If someone is considered high-risk and has a family history of colon cancer, screening should begin earlier around the age of 40 (Doubeni, 2022). There are several different ways that a person can be screened. One of the most common screening tests that are performed is a colonoscopy. A colonoscopy allows one to see the inside of both the colon and the rectum using a thin tube that is attached to a camera and a light (Doubeni, 2022). This procedure should be completed every 10 years for individuals who are considered average risk for developing colon cancer (Doubeni, 2022). However, if an individual is considered high-risk, a colonoscopy should be completed every 3-5 years (Doubeni, 2022).

A fecal occult blood test, and a computed tomography colonography can be performed as well (Doubeni, 2022). A fecal occult blood test checks for blood within the stool and should be completed annually (Doubeni, 2022). A computed tomography colonography is used to detect polyps within the colon (Doubeni, 2022). If polyps are found then a colonoscopy must be performed for further evaluation (Doubeni, 2022). Testing should be selected based on risks, benefits, and personal preference.

Treatment of colon cancer depends on the stage. For early stages of colon cancer, a polypectomy can be performed during a colonoscopy (Harding, 2020). This procedure removes both cancerous and precancerous polyps from the colon. If the polypectomy confirms a cancer diagnosis then a bowel resection can be performed. A bowel resection is a complete resection of

the tumor (Harding, 2020). The three most common bowel surgeries include a proctocolectomy with an ileostomy, a right hemicolectomy, and a left hemicolectomy (Harding, 2020). A proctocolectomy removes the colon, rectum, and anus (Harding, 2020) whereas the left and right hemicolectomy remove different parts of the colon depending on where the cancer is located (Harding, 2020). Postoperatively, it is important to restore bowel continuity and allow normal bowel function to return. An ostomy and stoma may be created when normal elimination patterns can no longer be possible (Harding, 2020). In addition, to surgical treatments, chemotherapy can also be used to treat colon cancer (Harding, 2020). Chemotherapy can be given before or after surgery and as palliative care for advanced cancer (Harding, 2020). Chemotherapy attacks rapidly dividing cancerous cells and decreases the size of the tumor.

Last, but not least, positive lifestyle changes can also help treat colon cancer. Changes include quitting smoking, use of any tobacco products, limiting alcohol intake, losing weight if obese, adequate physical activity, and a healthy diet that includes high-fiber foods, fruits, vegetables, and low-fat dairy products (“Lowering Your Risk of Colon Cancer,” 2021). Choosing healthy lifestyle choices can not only decrease the risk of developing colon cancer but can improve an individual’s overall well-being.

Planning of Teaching Content

Two specific learning outcomes that are necessary for individuals to understand is the importance of maintaining a healthy diet and adequate physical activity levels. Individuals should avoid high consumption amounts of red and processed meats (“Lowering Your Risk of Colon Cancer,” 2021). Instead, foods that are high in fiber and protein, fruits, and vegetables should be consumed (“Lowering Your Risk of Colon Cancer,” 2021). Participating in physical activity for at least 30 minutes a day can improve a person’s overall health status. Evidence has

shown that regular exercise decreases the risk of colon cancer development by 40% (“Colon Cancer,” 2022).

To discuss this information, I will use active learning methods and retrieval practice. Active learning methods can develop a discussion and allow for participation from the client. Discussions can raise important questions on information that may need to be further explained. While educating about colon cancer, I will also use retrieval practice. This learning method can allow individuals to recall the most important information that was taught. It is important to see what information was mostly absorbed during an educational session.

Providing educational material in multiple ways is important to make sure that each client understands what is being discussed. I will utilize teaching tools such as a trifold poster with pictures, written handouts, and videos to explain information about colon cancer. Trifolds can provide the most important but basic information on the cancer itself in a concise format. I will also provide pictures, so the client can see the beginning stages of colon cancer, throughout the disease, and after treatment. In addition, written material can provide more thorough information on the disease itself. I will also utilize videos as a teaching tool to provide information through a visual aspect.

Conclusion

Colon cancer is the second leading cause of cancerous death around the world (“Colon Cancer,” 2022), but it doesn’t have to be. It is super important for individuals to follow screening and prevention guidelines. As a healthcare professional, it is important to provide education on colon cancer, it can provide higher quality and stronger patient outcomes. Mortality and incidence rates can be decreased by following prevention and screening guidelines.

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