

Colon Cancer Research Paper

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Colon Cancer

One in twenty-three men and one in twenty-six women have a risk of developing colon cancer in their lifetime (American Cancer Society, 2018). That is at least one person if not more in your family or friends that is at a risk for developing colon cancer. Colon cancer is the growth of cells that form in the lower end of the digestive tract (Harding, 2020). The dreaded colonoscopy may just be the reason you or someone you know will catch colon cancer before it's too late. The invasive nature of the colonoscopy may be what leads far too many people from getting a lifesaving diagnostic test that can ensure early detection and possible successful treatment.

Statement of the Problem

You have a patient experiencing the following symptoms; vomiting, rectal bleeding, abdominal tenderness, diarrhea, weight loss, anorexia, ascites (Harding, 2020). With these symptoms a medical professional will likely order a CT scan and a colonoscopy be performed to rule out various gastrointestinal diseases. A CT scan is a diagnostic imaging procedure that shows images of bone, muscles, and organs. A colonoscopy is an imaging procedure where a doctor inserts a flexible tube with a light and small video camera on the end inside of the colon and rectum. The colonoscopy is a gold standard for colon cancer detection (Harding, 2020). The important aspect of a colonoscopy is that once the tube is inserted and visualization is obtained, if anything is found that may be suspicious, it is removed through a biopsy (Harding, 2020).

Now imagine the same patient not exhibiting any outward signs or symptoms but is currently 45 years of age and high risk for colon cancer. A medical professional request the same patient undergo a routine colonoscopy in an effort for early detection, which would be a

preventive measure in the hopes of catching colon cancer at a very early stage. How many of the latter patients would undergo this test since not showing any outward symptoms? The answer to this question may be one contributing factor to the 52,550 deaths as a result of colon cancer in 2023 alone (American Cancer Society, 2018). The impact of these 52,550 patients that ultimately lost their fight against colon cancer on the nursing profession is profound. These were likely 52,550 patients admitted into the hospital requiring extensive around the clock care at some point during their disease. The additional strain on nursing can also be compounded by hospital acquired infections when patients are admitted for extended care or autoimmune compromised, as many cancer patients are. Conversely the remaining individuals diagnosed with colon cancer likely only required outpatient treatment, thereby reducing the burden of extensive around the clock care and potential exposure to other complicating issues.

Risk Reduction/Treatment of the Problem

To accomplish a rise in early detection and earlier treatment, nurses and doctors need to convince their patients to complete an annual physical examination each year, to include all lab work and diagnostic studies, even if outward signs of a problem are absent. The lab work and diagnostic assessments often can detect such early stages that a minor procedure, such as a polyp removal is quick and relatively insignificant. Some of the lab work and diagnostic assessments encouraged or recommended to diagnose colon cancer are digital rectal examination, complete blood count, liver function test, stool testing for occult blood, and possibility a barium enema (Harding, 2020). With that, educating patients on these certain aspects of their healthcare may be just one part of the education process. The other phase of education involves their diet such as reduced amounts of red and processed meats, as well as an increase of fruits, vegetables and grains. Another aspect is living an active lifestyle verses a sedentary one. Studies have shown

that living a sedentary life can lead to an increased risk of colon cancer (Harding, 2020). Even with a positive lifestyle, regular check ups with all supporting diagnostics, colon cancer is still a possibility. However, as previously indicated, if early detection occurs treatment is usually successful. These treatments are determined by the stage of the cancer. For example, stage one colon cancer is likely surgery. Surgery for stage one consists of removing the tumor and at least five additional centimeters of intestines on either side of the tumor including nearby lymph nodes are removed, then anastomosis the area closed (Harding, 2020). If detected at a later point such as stage two, three or four, treatment will include chemotherapy or radiation along with surgery. Stage two tumors are wide resected and reanastomosis (Harding, 2020). If you have a tumor that is not resectable or the cancer metastasized, palliative surgery can control hemorrhage or relieve a malignant bowel obstruction (Lippincott Advisor, 2018). Chemotherapy and radiation in this case is used to relieve pain and control the spread of the colon cancer or metastasize (Harding, 2020).

Planning of Teaching Content

In an effort to enhance education on colon cancer during our health fair we plan to inquire of any visitors to our booth if they have either had an annual physical, if they have completed lab and diagnostic studies, and if any of them have completed colon cancer screening such as Cologuard, or a colonoscopy. If our visitor indicates that they have accomplished all three they will receive a blue “hope” wristband that hopefully others will acknowledge and strive to accomplish for themselves. The next phase of our interaction is to discuss some signs and symptoms, especially with those that have not talked with their doctors about colon cancer, that may help convince them to schedule an appointment with their doctor and seek additional information. These symptoms include constipation, rectal bleeding, and an unexplained change

in bowel movements. If any of our visitors affirm that they are experiencing any of these symptoms we will recommend they seek immediate follow up with their family doctor. During the health fair presentation, we will utilize visual aids such as a tri-fold poster and blue “hope” colon cancer wrist bands. An additional item to be utilized will be a sample kit for Cologuard to demonstrate how simple, easy, and discrete it is to submit a sample for testing.

Conclusion

In conclusion, all cancers are a devastating disease, however colon cancer if detected early has a real survivability rate depending on the stage. The rate depends on certain factors, but generally they are as follows; localized 91%, regional 72% and distant is 13% for a 5-year span (American Cancer Society, 2018). Early diagnosis and treatment will be easier on the patient as well as the nursing and medical hospitalization staff. Education, healthy lifestyle, and preventive screening are key factors in reducing the mortality rate and unnecessary suffering for tens of thousands. The stigma surrounding the dreaded colonoscopy should be dispelled and people should use this lifesaving test as a way of detecting a relatively survivable disease.

References:

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