Familial Bowel Cancer

HIGH RISK

Cancer is a common disease that affects 1 in 3 individuals. Bowel cancer is also fairly common, affecting 1 in 25 people. It is not uncommon to see more than one person in a family with bowel cancer but most, 90-95%, is sporadic and occurs by chance. It is likely that only 5-10% of the disease occurs because of an inherited predisposition, and it is mainly in these families where there may be an increased risk to relatives.

In families where there is an inherited predisposition, cancer tends to occur at a younger age; the same type of cancer may affect several family members; there may be a combination of bowel cancer with other cancers such as womb or ovary; and an individual may have more than one bowel tumour. There is no easy way at present to be sure whether cancer in a family is genetic or not, and we are mainly guided by the number of people in the family who have had cancer, and at what ages it developed.

From your family history, we would consider you to be at higher risk of developing bowel cancer. This is because there are several people in the family who have been affected in your family, some of whom have been affected at a younger age than is usual. Thus there is a fairly high suspicion that there is a predisposition gene running in your family.

This means that your own risk of developing bowel cancer is increased. At present, we would suggest you may wish to have bowel screening, with the aim of detecting polyps (small growths in the bowel) before they become cancerous or as early cancers, when they are easier to treat. We suggest you have a colonoscopy examination of your bowel, which should be repeated every 2 years. This should start at around 35 years of age, or earlier if there have been relatives affected particularly young.

In some families, we might also suggest screening for other forms of cancer. This might include cancer of the womb or ovary for women in the family, although we are not yet sure what is the best way of doing this and some people feel it is more important simply to report any symptoms in particular abnormal menstrual bleeding. In some families, stomach cancer can be a risk especially for those over 50 and screening by endoscopy may be suggested.

You may have wondered whether a genetic test was possible in your family. In some families, the gene alteration may have already been identified and those at risk can be offered a blood test. In other families, this has not yet been done but if somebody who has had bowel cancer or a related cancer is willing to give a blood sample, it may be possible to try to find the genetic alteration. However, at present there are at least 5 genes known which can cause a predisposition to bowel cancer. Thus it may take a long time before the gene alteration is found in any one family.

Possible protective factors are not yet fully understood, but a diet high in fresh fruit, vegetables and fibre, not too much fat, regular exercise, moderate alcohol and avoiding smoking are all associated with lower risks of cancer. Some people who do all these things still get cancer so there is no way of being certain of avoiding the disease.

There is research ongoing looking at other factors in the diet, or drugs, which might reduce the risk of bowel cancer. It is also hoped that there will be easier ways of identifying which families do carry a predisposition gene in the future.
If you have any questions or you would like an appointment to discuss any of the points raised please contact:

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Familial Bowel Cancer
High Risk Families

Information Leaflet