

More women than men are diagnosed with bowel cancer as an emergency despite extra GP visits

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Credit: Cancer Research UK

More than a third (34 percent) of women with bowel cancer in England were diagnosed after an emergency hospital visit compared to less than a third of men (30 percent), despite women having more red flag symptoms and more visits to their GP, according to research presented at



the National Cancer Research Institute (NCRI) Cancer Conference in Liverpool.

If diagnosed after an emergency hospital visit, patients are more likely to have poorer survival as the disease is usually at an advanced stage.

Data from 2799 women and 2946 men diagnosed with bowel cancer in England between 2005-2010, was analysed by researchers from University College London, the London School of Hygiene & Tropical Medicine and the University of Exeter and funded by Cancer Research UK and the British Medical Association.

Of the women diagnosed as an emergency, one in five (20 percent) had alarm symptoms such as a change in bowel habits or rectal bleeding the year before the emergency diagnosis compared to fewer than one in six (14.5 percent) men.

Women were also more likely than men to be diagnosed with a less-serious condition, such as <u>irritable bowel syndrome</u> (IBS), before being diagnosed with cancer. Those who had received a less-serious diagnosis in the year before their emergency admission, were more likely to be diagnosed with cancer following a later <u>emergency</u> hospital visit.

Dr Cristina Renzi, one of the lead researchers based at UCL, said: "This study suggests that it's more difficult to pick up <u>bowel cancer</u> in women than men, since female tumours are often located in a part of the <u>bowel</u> which means symptoms can be confusing. IBS is also more common among women and shares many of the same symptoms as cancer."

Dr Richard Roope, Cancer Research UK's GP expert, said: "Bowel cancer can be difficult to diagnose because it can share symptoms with diseases other than cancer. The most common symptom recorded for women in the study before they were diagnosed with cancer was



stomach pain, which is usually associated with other women's health conditions. This could explain why some men were diagnosed with colon cancer earlier, as stomach pains don't have as many alternative explanations for men as they do for <u>women</u>. Sometimes diagnosing cancer is a process of elimination, so other conditions need to be eliminated first which means a longer wait for a cancer diagnosis.

"A lot has changed since the data used in this study was collected. GPs have been given new guidance to recognise and refer suspected cancers, and work continues to raise public awareness of cancer symptoms. Emergency diagnoses remain an issue though and efforts to improve this must continue."

Professor David Weller, member of the NCRI Cancer Conference Scientific Committee, said: "Research like this helps the health service understand where it should act to help more <u>cancer</u> patients get diagnosed earlier. These findings are the sort of potentially practice changing research we are showcasing at the NCRI Cancer Conference."

More information: Gender inequalities in emergency colon cancer diagnosis: A longitudinal data-linkage study in England on pre-diagnostic clinical history and healthcare use. Abstracts for the NCRI Cancer Conferences. abstracts.ncri.org.uk/abstract ... -and-healthcare-use/

Provided by Cancer Research UK

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