



Gastrointestinal cancers

April is Gastrointestinal Cancer Awareness Month in the Cayman Islands.

The Cayman Islands Cancer Society and on-island healthcare facilities are highlighting the importance of screening for gastrointestinal cancers, as well as promoting healthy lifestyle habits that can decrease the risk of developing cancer.

According to Dr. Deepak Varma, senior consultant gastrointestinal and bariatric surgeon at Health City Cayman Islands, the gastrointestinal (GI) tract is a 25-foot-long pathway extending from the mouth to the anus.

Food passes through the oesophagus and is processed in the stomach and small intestines to extract nutrients. Waste is then removed from the body through the colon and rectum. Unfortunately, tumours can form in any one of these organs.

WHY DO GI CANCERS OCCUR?

Reasons range from underlying conditions to lifestyle choices to genetics.

Gastrointestinal cancer is common worldwide. Treatments are more effective when the cancer is detected at an early stage, which can be a challenge.

The most common types of gastrointestinal cancers are:

- Oesophageal cancer
- Gastric (stomach) cancer
- Colorectal cancer
- Pancreatic cancer
- Liver cancer

WHAT ARE THE SYMPTOMS OF GI CANCERS?

Often, symptoms of gastrointestinal cancers don't occur until the cancer is more advanced.

Patients with oesophageal cancer may have difficulty swallowing, whereas those with gastric cancer may notice ulcer-like symptoms (e.g., indigestion, loss of appetite, bloating and pain).

Liver and pancreatic cancers can be more silent and give rise to subtle symptoms like weight loss and appetite loss.

Colon and rectal cancers are more common, and they can lead to bleeding in stools and alterations in bowel habits. A recent change in bowel habits should warrant a thorough investigation by a doctor.

Screening-tests to find cancers in early stages, and before they develop symptoms, are very relevant in large intestine cancers. Screening colonoscopy is recommended above age 50.

If patients have symptoms and the doctor has reason to suspect a diagnosis of gastrointestinal cancer, they may perform some of the following tests:

- Endoscopy or esophagogastroduodenoscopy (EGD) to check the lining of the oesophagus, stomach, and small intestine for tumours.
- Colonoscopy to check the colon and rectum for polyps, which can become cancerous.
- Lab tests to look for changes in the blood.
- Imaging studies (MRI, X-ray, ultrasound, CT scan or PET scan) to check for abnormal tissue anywhere in the digestive system.

- Biopsy to obtain a sample of abnormal tissue and analyse it for the presence of cancer cells. Tissue samples are often collected during an endoscopy procedure. Pathologists then examine the tissue for cancer cells.

Most gastrointestinal cancers are treated with surgery if they can be removed and if they are not too advanced.

When the cancers are advanced and not amenable for surgery, they will require chemotherapy or targeted therapy.

Many of the cancers are treated with chemotherapy initially, followed by surgery to get excellent long term results.

Surgery involves complete removal of the tumour, along with surrounding tissue. To ensure function of the remaining gastrointestinal tract, the healthy parts of the intestine or stomach are joined together to maintain normal continuity of the digestive system.

Liver and pancreatic cancers need very complex surgeries for cure. Most of the gastrointestinal cancers need a multidisciplinary approach involving the surgeons, medical oncologist, radiation oncologist, pathologist, intensive care, interventional radiologist and radiologists.

Thus, it is very important for a gastrointestinal cancer patient to seek treatment at a centre with comprehensive care involving all these specialties.

For further information, visit cics.ky