

Surveillance and lifestyle advice after colorectal surgery

Cancer Services

Information for patients



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Welcome to your surveillance programme

Following your recent operation, a surveillance (follow-up) programme will be organised by the clinical nurse specialists. A series of investigations will be arranged with the aim of detecting abnormalities. The timeline in this leaflet indicates the timing of these investigations.

What investigations will I have?

CEA blood test.

This is a blood test that will be done throughout your follow-up programme.

Some cancers secrete a substance (a tumour marker) called a CEA (carcinoembryonic antigen). We test your blood to see if your CEA level is above the normal limit of 5 ug/l. Some people's normal level may be higher than this due to things such as age or smoking, so this blood test is used as a guide only.

A blood test form will be sent to your home address, and you can get the test done at your GP surgery or local hospital.

Colonoscopy / flexible sigmoidoscopy

These tests involve a tube with a camera attached being passed into your back passage or stoma (depending on the operation you have had). During a colonoscopy the whole bowel will be looked at, whereas during a flexible sigmoidoscopy only the back passage and the rectum are looked at.

These tests are not suitable for all patients. If you are waiting to have your ileostomy reversed, you may have to wait until this has been done before you have this procedure. If you are receiving chemotherapy or radiotherapy treatment this may also mean that the procedure is delayed.

What investigations will I have? (continued)

Other blood tests

You may need other blood tests and we will send you forms to have these done as necessary.

CT scan

CT scan appointments and information about the scan will be sent to you by post.

A specialist radiologist will look at the scan images and it can take around six weeks for the results to be available. When the written report is ready, your colorectal nurse will show it to your consultant and then you will be contacted with the results.

Clinic appointments / telephone calls

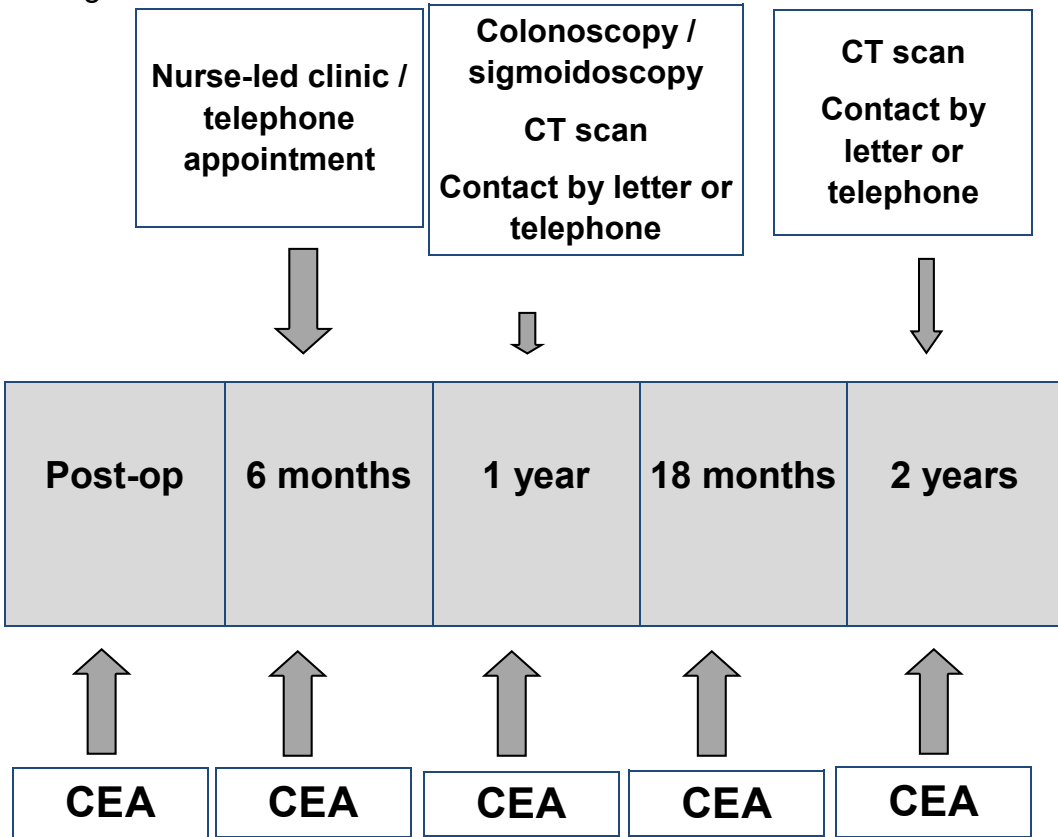
We offer either:

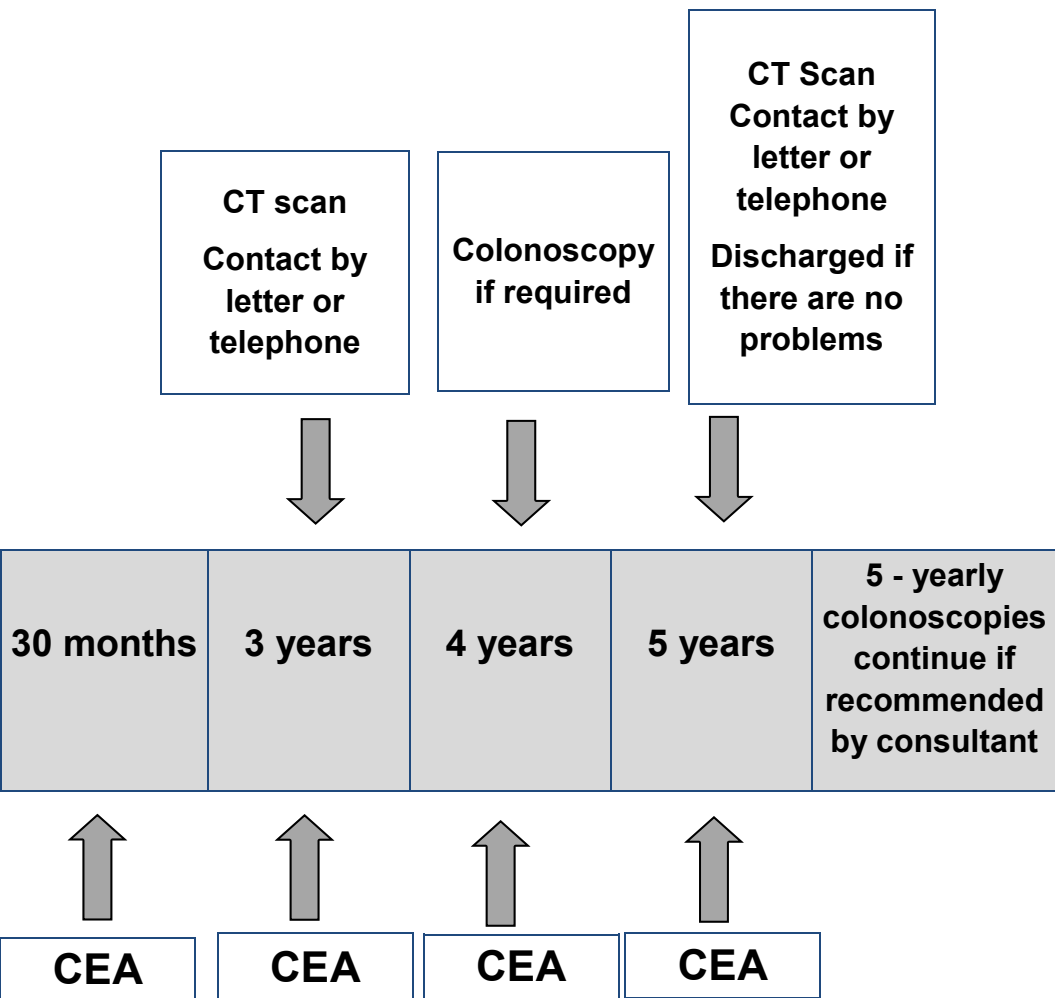
- a nurse-led clinic appointment, when a consultation with a colorectal nurse will take place, or
- a telephone consultation.

The timeline shows how often you will need these appointments / telephone calls.

Timeline

This is a guideline, and may alter, particularly if you are receiving treatment with another department. Also, it will depend on your recovery and will be regularly updated in line with new standards and guidelines.





Lifestyle advice

- **Stop smoking:** if you smoke, stopping is the healthiest decision you can make
- **Be more active:** doing a small amount of physical activity regularly, such as going for a short walk, will give you more energy and make you feel stronger
- **Eat healthily:** eating healthily helps your recovery and gives you more energy
- **Follow sensible drinking guidelines:** alcohol is linked with an increased risk of some cancers. Following sensible drinking guidelines is good for your overall health
- **Find ways to reduce stress and anxiety**

More detailed information is available in the Macmillan booklet “Life after cancer treatment”. Contact Macmillan Cancer Support on 0808 808 00 00 if you would like a copy.

Psychological support and concerns checklist

Psychological support is available. Speak to your colorectal nursing team. They can help you address any concerns you might have and guide you in the right direction or refer you to an appropriate service.

What symptoms should I look out for?

If it is an **emergency situation** you should contact emergency services or attend the nearest Accident and Emergency (A&E) department.

If you have any of the following symptoms, you are advised to contact your colorectal nurse specialist (key worker) for advice.

Pain in your abdomen (tummy) that is new to you and does not go away with your usual painkillers.

Weight loss that is not planned, or loss of appetite.

Bowel habit changes (such as diarrhoea) that last for two weeks.

Bleeding from your back passage or stoma that you have not had before.

Fatigue (tiredness), which could be a sign of anaemia.

Lumps, bumps or swelling around your scar or stoma.

Contact details

Colorectal nurse specialists (key workers):

Leicester Royal Infirmary 0116 258 5184

Leicester General Hospital 0116 258 4455

Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice



Leicester's Hospitals is a research active trust so you may find research is happening on your ward or in your clinic.

To find out more about the benefits of research and become involved yourself, speak to your clinician or nurse, call 0116 258 8351 or visit www.leicestersresearch.nhs.uk/patient-and-public-involvement

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If you would like this information in another language or
format such as EasyRead or Braille, please telephone the
number below or email equality@uhl-tr.nhs.uk

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

إذا كنت ترغب في الحصول على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો.

0116 250 2959

To give feedback on this leaflet contact
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