

Caring for Colorectal Cancer Survivors

What to do:

- Annual physical exam
- Annual digital rectal exam in patients who were treated for anal cancer and received radiation therapy
- Colonoscopy surveillance (per gastroenterologist or clinical genetics recommendations)
 - Generally every 5 years if prior was normal
 - May be more frequent in patients with genetic syndromes
- Assess for and treat long-term and late effects:
 - Distress, depression, and anxiety
 - Peripheral neuropathy
 - Bowel, bladder, sexual dysfunction
- Advise healthy habits (exercise, weight loss)

What NOT to do:

- Routine lab tests, including CEA >5 yrs post diagnosis
- Routine imaging tests in the absence of new symptoms

Management of Long-term and Late Effects

Long-term/Late Effect	Management
Bowel/bladder dysfunction (low anterior resection syndrome)	<ul style="list-style-type: none"> • Chronic diarrhea, incontinence, urgency: consider anti-diarrheal agents, bulking agents (such as Metamucil® or Benafiber®); pelvic floor rehabilitation, protective undergarments • Sphincter dysfunction: refer to a gastroenterologist or rectal surgeon • Other: assess ostomy for changes in stoma color, output; refer to wound ostomy care nurse for management of persistent ostomy issues • Persistent urinary symptoms (e.g. recurrent UTI, urgency, frequency, leakage) refer to urologist for further evaluation
Distress/depression/anxiety	<ul style="list-style-type: none"> • Assess for depression periodically • Refer for counseling and prescribe pharmacotherapy as needed
Sexual dysfunction/sexual Intimacy	<ul style="list-style-type: none"> • Encourage couples to discuss sexual intimacy; refer to counseling as needed; consider sexual health expert referral as needed
Peripheral neuropathy	<ul style="list-style-type: none"> • Consider physical therapy or rehabilitation medicine consult • Consider duloxetine for painful neuropathy • Refer to neurologist or pain specialist for persistent or refractory pain

RESOURCES:

<https://www.mskcc.org/cancer-care/patient-education/pelvic-floor-muscle-kegel-exercises-women-improve-sexual-health>
 MSK Rehabilitation Center (includes physical therapy for pelvic floor dysfunction): 646-888-1900



Memorial Sloan Kettering
Cancer Center

FOR MORE INFORMATION:

www.mskcc.org/hcp-education-training/survivorship/provider-education

CONTACT US: survivorship@mskcc.org