

## BOWEL CANCER THAT HAS SPREAD TO THE LIVER

### Bowel cancer is one of the most common causes of death from cancer

Bowel cancer is the fourth biggest cancer killer in the world, following lung, liver and stomach cancers respectively.<sup>1</sup>

- In Europe and North America, it is the second most common cause of death from cancer;<sup>1</sup>
- In Asia, it is the fourth most common cause of death from cancer.<sup>1</sup>

### Bowel cancer commonly spreads to the liver

The liver is the most common part of the body to which bowel cancer spreads. This is because the bowel is directly connected to the liver by blood vessels.<sup>2</sup> Bowel cancer can also spread to other organs such as the lungs or bones. Once the cancer starts to spread like this it is known as secondary or metastatic colorectal cancer, which is often abbreviated to mCRC.

- Around a quarter of people that are first diagnosed with bowel cancer will already have secondary cancer that has spread to the liver;<sup>2,3</sup>
- A further 25–35% of patients will go on to develop secondary liver cancer after their diagnosis with bowel cancer.<sup>3</sup>

### The outlook for patients with bowel cancer that has spread to the liver is very poor

- The majority of people with bowel cancer that has spread to the liver (66–90%) will die from liver failure caused by liver tumours;<sup>4,7</sup>
- Bowel cancer is increasingly understood to be a different disease depending on various biological and genetic factors. For example, researchers have learned that primary tumour location within the bowel is an important prognostic factor for both early and advanced bowel cancer that has spread to the liver. Patients with mCRC that originates from the right side of the colon are clinically more difficult to treat because they are less responsive to standard of care chemotherapies and have fewer treatment options available, since the tumours do not respond to some biologic agents.<sup>8</sup>
- Surgical removal (also known as resection) of the liver cancers currently provides the only realistic possibility of providing a cure for patients with tumours that have spread from the bowel. However, approximately 20–30% of patients will have liver tumours that can be removed surgically;<sup>9,10</sup>
- Of those patients that can be treated using resection, 15–67% (median 30%) have been reported to be alive after five years, compared to 0–6% for patients who do not undergo surgery;<sup>10</sup>
- In some cases, the use of chemotherapy, biological drugs and/or Selective Internal Radiation Therapy (SIRT) can reduce the size of inoperable liver tumours to make them operable.

### Treatments

Even though it may be possible to remove the original cancer from the bowel, once the cells from bowel cancer have spread to other parts of the body, the disease becomes difficult to cure. The risk of the cancer spreading or recurring after treatment depends on how aggressive the cancer is and how well the initial treatments have worked. The more advanced the bowel cancer is when discovered, the more likely it will spread or come back.

#### 1. Surgical techniques

Surgical resection to remove the cancer provides the only realistic possibility of providing a cure for liver tumours that have spread from the bowel.

#### 2. Chemotherapy

Chemotherapy is used to shrink cancer which can help to control symptoms and may help people with advanced bowel cancer to live longer. Chemotherapy treatments may be provided alone or in combination with other cancer treatments.

#### 3. Biological therapy

Biological treatments work by disrupting the growth of cancer cells. These treatments can help patients with advanced bowel cancer to live longer. These treatments are often given with chemotherapy.

#### 4. Selective Internal Radiation Therapy (SIRT)

SIRT (also known as radioembolisation) is a special type of radiotherapy that targets liver tumours from inside the body with high doses of radiation. Millions of microscopic radioactive 'beads' called microspheres are injected through a catheter into the artery that feeds liver tumours with blood. The microspheres travel through the arteries to become lodged in the very small blood vessels in and around the liver tumours where they give off high doses of radiation. As the microspheres only give off radiation to a small area, they target the liver tumour while doing little damage to the surrounding healthy liver tissue.

##### Fast facts about bowel cancer<sup>1</sup>

- Cases of bowel cancer are higher in countries where people eat food that is high in calories and animal fat, and do not take part in much physical exercise or activity;
- The consumption of red meat and processed meat, excessive consumption of alcoholic drinks, obesity and lack of physical activity are thought to contribute to the cause of bowel cancer;
- Being physically active, not smoking, avoiding drinking excessive amounts of alcohol and eating plenty of fruits, vegetables and foods high in fibre are thought to help to protect against bowel cancer;
- Vitamin D, produced by the body's exposure to sunlight, and calcium, which can be obtained by drinking milk, are also thought to have some preventative effect;
- Typical bowel cancer symptoms:
  - A change in bowel habits;
  - Blood in stools or very dark stools;
  - Abdominal pain or a lump in the stomach;
  - Unexplained tiredness, dizziness or breathlessness;
  - Unexplained weight loss.

For more information please visit [www.sirtex.com](http://www.sirtex.com)

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