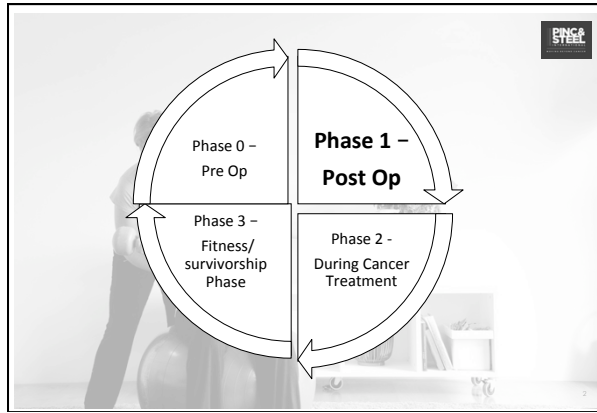
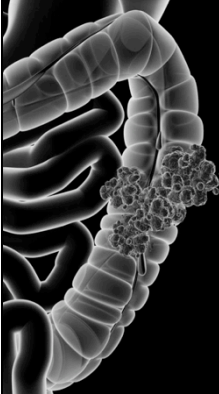


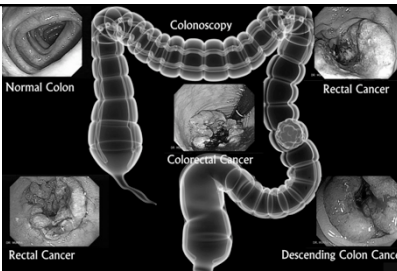
**POST OP PHASE – colorectal cancer**  
Rehab Considerations For Patients After Cancer Surgery  
Lou James

**The type of colorectal cancer operation a person has will depend on:**

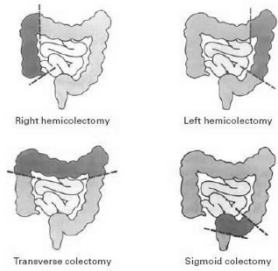
- Where the cancer is in the bowel
- The type and size of the cancer
- Whether the cancer has spread

**REMOVING EARLY STAGE TUMOURS**



- In small, early stage cancer of the large bowel or back passage, the surgeon may just remove the cancer from the bowel lining
- This operation is called a local resection

**A colectomy removes part of the colon, as well as nearby lymph nodes.**



- The surgeon will remove the part of the colon with the cancer and a small segment of normal colon on either side of the cancer.
- The remaining sections of your colon are then reattached.

A colonic stent is a wire-mesh tube which helps keep the large intestines open to relieve bowel blockage caused by a tumour.

**The colonoscope**  
This flexible tube is used to view the inside of the colon. It is passed through the rectum.

15mm diameter  
Video camera lens  
Irrigation  
Light  
Instrument channel

**The stent**  
It is self-expandable and gently expands over 48 hours once released, pushing aside the tumour to leave the passage clear. Most people cannot feel the stent once it is in, and it will not interfere with daily activities.

6 to 12cm in length  
Up to 25mm diameter fully opened (20mm diameter unopened)

**1** Using X-ray, a soft guide wire is inserted through the colonoscope and manoeuvred through the blockage.

**2** A slim sheath that has the compressed stent is placed over the wire and guided into position across the blockage.

**3** The sheath is retracted to release the stent and the colonoscope is withdrawn.

**4** The stent will reach its maximum diameter within two days.

Pressure from thickened bowels  
Tumour blockage  
Guide wire  
Colon  
Colonoscope

Sheath with stent inside  
Light

Stent expands  
Sheath retracted

Stent fully deployed  
Obstruction is relieved  
Colonoscope retracted

**RECTAL SURGERY 1**

Rectum  
Tumour

Stoma

Colostomy bag

**RECTAL SURGERY 2**

Tumour  
Rectum  
Anus  
Sigmoid colon  
Colon  
Rectum  
Anus

**SURGICAL SCARS**

Scars from laparoscopic surgery


Scar from open surgery

**Post Op Phase services for colorectal cancer patients**

- Aims to facilitate recovery after colorectal surgery, restore strength, movement and function and reduce post op side effects.
- Services include:
  - Manual physiotherapy
  - Scar management
  - Breathing techniques
  - Functional guidance
  - Exercise prescription

**Complications from colorectal surgery include:**



- Wound infection, dehiscence (bursting of wound) or hernia
- Anastomosis breakdown, leading to abscess or fistula formation
- Bleeding with or without haematoma formation
- Adhesions resulting in bowel obstruction
- Adjacent organ injury
- Cardiorespiratory complications, such as myocardial infarction, pneumonia, pulmonary embolism, etc



**POST OP ISSUES:**

- Bowel problems
  - Change in consistency of bowel motions
  - Frequent bowel motions
  - Difficulty emptying
  - Faecal incontinence
  - Bloating and flatus
  - Can be more severe if they have radio/ chemo
  - Bowel function likely to improve over first few months up to 2 years
- Bladder problems
- Sexual dysfunction
- Fatigue
- Poor functional exercise capacity
- Low levels of physical activity
- Anxiety and depression



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**Improving Bowel function**

- Diet, fiber, medication
- EXERCISE
- Physical activity
  - Gentle exercise i.e. walking initially
  - Avoiding heavy lifting, squatting
  - Education and reassurance
- Pelvic floor
  - Important in maintaining anal sphincter control
  - To prevent leakage



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**Colostomy Bags**

- Ostomy bags are securely attached to the body with adhesive and rarely spill or break
- After the ostomy site heals, patients can usually return to normal exercise activities
- Patients may have to forgo contact activities or be fitted with a special device that protects the ostomy bag from potential damage
- Special adaptive devices can be fitted, that protect the bag while patients swim, run, lift weights or participate in any other activity that can loosen the connection between the pouch and ostomy opening
- Advisable to empty bags before exercise



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**Essential steps after COLORECTAL SURGERY:**

- Listening, reassuring & education is paramount.
- Check scar
- Ensure adequate pain management
- Ask about sleep
- Give functional advice – dressing / lifting strategies
- Ensure pain free positioning for exercises
- Check surgeons protocol
- Early emphasis should be on posture, breathing & functional movements

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**EXERCISE PRESCRIPTION ESSENTIALS:**


Initial post op phase exercises should help:

- Prevent tight adhered scar tissue
- relieve tension and pain,
- help promote movement and healing.

```

    graph TD
      A[Breathing techniques] --> B[Pain control and biomechanical counseling]
      B --> C[Pelvic floor education and exercise]
      C --> D[Core awareness and setting]
      D --> E[Gentle cardio exercise]
  
```

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**Importance of exercise for colorectal cancer patients**


- 2 large observational research studies have shown that 3 hours per week of moderate intensity physical activity after diagnosis of colon cancer
  - > **50-63%** reduction in the risk of total death and
  - > **39-59%** reduction in death due to colon cancer
- This benefit was seen across BMI scores, age, in both women and men and all disease stages

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## Summary

- Post-operative problems after colorectal cancer surgery can include symptoms such as anxiety, depression, bowel, bladder and sexual dysfunction, poor functional exercise capacity, and low levels of physical activity.
- These highly distressing problems can negatively impact patients' health-related quality of life.
- Cancer rehab physios can provide essential support to this patient group to make a huge difference to their quality of life



## Useful websites

<http://www.beatbowelcancer.org.nz/>  
<https://www.bowelcanceruk.org.uk/>  
<https://www.bowelcancerresearch.org/>  
<http://www.bowelcanceraustralia.org/>  
<http://www.stomalthrapy.com>

