Metastatic Colorectal Cancer (mCRC)

What are the colon and rectum?
The colon and rectum are parts of the large intestine (or large bowel), which makes up a section of the digestive system, responsible for breaking down and absorbing food, along with the small intestine.1

What is colorectal cancer?
Colorectal cancer is a type of gastrointestinal (GI) cancer that can also be called bowel cancer, colon cancer or rectal cancer, which all refer to any cancer that grows in the large intestine. Most colorectal cancers develop from abnormal growths, called polyps.1

What is mCRC?
mCRC, also known as secondary, advanced or stage IV colorectal cancer, is a cancer that began in the colon or rectum but has now spread to other parts of the body.1 mCRC typically spreads to the liver, lungs, lymph nodes (these help to fight infection), and the tissue lining of the abdominal cavity (where your organs are contained).2

What are the possible symptoms of mCRC?
Symptoms of mCRC will vary for each person, and you may get different symptoms at different periods of time or depending on where in your body it has spread to. Common mCRC symptoms can include:2

- Feeling tired or generally unwell
- A cough that doesn’t go away
- Low energy levels
- Weight loss
- Feeling sick
- Having less appetite
- Losing weight
- A cough that doesn’t go away
- Breathlessness
- Loose bowel movements (diarrhea) or constipation
- Aches and pains in bones
- Heartburn or acid reflux
- Having less appetite
- Having a yellowing of the skin and eyes (jaundice)

Speak to your health care team if you notice these symptoms persisting or they are concerning you.

For more information on your metastatic GI cancer journey, including information on the emotional side of cancer, your health care team, living with a metastatic GI cancer, the role of patient organizations and peer support, and planning your future, please see the MyJourney patient brochure.

For further information on symptoms, treatment, and side effects, consult the ESMO Cancer Guide for mCRC patients
https://www.esmo.org/content/download/15729/2707681/ESMO-ACF-EN-Colorectal-Cancer-Guide-for-Patients.pdf


Every patient is different and treatment options will need to be discussed with a range of health care professionals as part of a multidisciplinary team, sometimes known as a tumor board. The general aims of your treatment are increasing survival, improving symptoms, stopping the tumor progressing, and maintaining quality of life.

You may be eligible for surgery for mCRC to remove the initial tumor and possibly parts that it has spread to. If needed, you may then receive (alone or in combination):

- **Chemotherapy** (a treatment that kills fast-growing cells, including cancer cells)
- **Targeted therapy** (a type of treatment that targets the changes in cancer cells that help them grow, divide, and spread)

You will have a biopsy (a sample of tissue taken from your tumors) to see what targeted therapy will work on your cancer.

- **Radiotherapy** (radiation beams that kill the cancer cells).

You may be able to undergo surgery in the hope of becoming cancer-free. Also, while you may have originally been unable to have surgery on your original tumor or tumors that have spread, you may become eligible for surgery or ablation (a procedure that uses radio waves to heat and destroy cancer cells) if your treatment with chemotherapy/targeted therapy/radiotherapy works well enough. This option will be discussed with specialized surgeons.

If you are too unwell to undergo treatment, or choose not to, you will receive palliative care, which aims to manage your symptoms and improve how you feel. Other treatments may also be available to you through clinical trials.

You may also wish to seek a second medical opinion, depending upon your circumstances and considering the positives and benefits (see page 19 in the MyJourney patient brochure for more details).

**What treatments are available for mCRC?**

**What are the possible side effects of chemotherapy for mCRC?**

The side effects of chemotherapy will depend on the type of medication and the dose used. Common side effects can include:

- **Fatigue**
- **Diarrhea**
- **Feeling and being sick**
- **Losing your hair**
- **Blood clots**
- **Increased risk of infection**
- **Numbness or tingling in fingers and toes**
- **Loss of appetite, taste changes or a sore mouth**
- **Increased risk of infection**

**What is my outlook with an mCRC diagnosis?**

Outlook, or prognosis, will vary for each person with mCRC and will depend on individual circumstances. Treatment options for mCRC are rapidly evolving, leading to improved outcomes. In recent years, average survival has reached around 30 months. However, this is just an average, and some people can live much longer, particularly if they have surgery aimed at removing their mCRC or they have a good response to chemotherapy. Your doctor will be able to give you an approximate idea of what to expect. You may also not wish to know your outlook; instead, you may want only your loved ones to know your outlook, or only how your symptoms may change over time.

It is likely that you will get some of the side effects listed above, but you are very unlikely to have them all. Most are temporary and can be managed by medicine or lifestyle changes. Speak to your health care team as soon as you notice any side effects.

**How will my mCRC symptoms be managed?**

Symptoms of mCRC can be challenging, but your health care team will offer support and treatment to help you feel more comfortable. As well as medication for pain and sickness, there are treatments available that can help to shrink the cancer and relieve other symptoms. Other treatments can address specific symptoms such as a blockage in the intestine, including:

- **Stents** (a small tube to keep passageways open)
- **Stoma** (a permanent or temporary contained opening in the bowel)
- **Removal of the obstructing tumor if urgently needed.**

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*Chemotherapy is most commonly used out of the three available treatments for mCRC.*