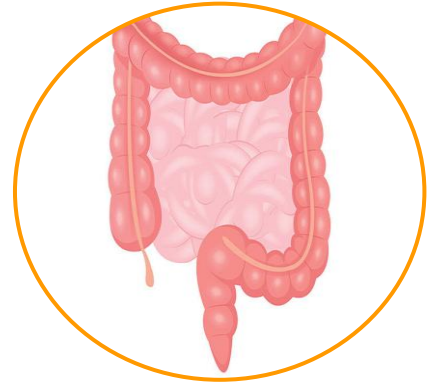


Against Bowel Cancer

Bowel cancer is the second largest cause of cancer deaths in the UK, with around 17,400 people dying from bowel cancer every year. Yet scientists believe that more than half of bowel cancer cases are preventable, with the leading risk factor being a low-fibre diet.

CancerWatch believes that with a much stronger focus of prevention, along with continued improvements to early screening and treatment, we could be aiming to virtually eliminate deaths from bowel cancer over the coming decades.



Did you know?

- Bowel cancer is the **fourth most common** form of cancer in the UK, and the **second largest** cause of cancer deaths (behind lung cancer).
- Each year around **44,000** people are diagnosed and around **17,400** people in the UK die from bowel cancer.
- Scientists believe that **more than half (54%)** of bowel cancer cases are **preventable**. Key risk factors include diet, obesity and being overweight, smoking and alcohol.
- The biggest risk by far is a **low-fibre diet**, with nearly a third (28%) of bowel cancer cases caused by eating too little fibre. 96% of adults in the UK are not eating enough fibre.
- **Deaths** from bowel cancer have fallen by nearly half since the 1970s, likely due to better treatment, screening and early diagnosis, and bowel cancer **incidence rates** have been flat or falling over the last decade.
- However, a serious cause for concern is the sharply increasing incidence of bowel cancer cases among **younger adults** under the age of 50.

Sources: [Cancer Research UK, Bowel cancer statistics](#); [Office for Health Improvement & Disparities, National Diet and Nutrition Survey 2019 to 2023, 2025](#); [Cancer Research UK, Bowel cancer rates rising in younger adults around the world, 2024](#)

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What needs to happen?

A serious approach to **bowel cancer prevention** needs to focus on the key drivers of bowel cancer and the possible causes of rising incidence among young adults. It makes sense to start with a primary focus on low fibre diets, the biggest risk factor for bowel cancer. A focus on food in schools and other public sector settings, public guidance and awareness-raising could all be important elements of a plan to boost the number of Britons eating a higher fibre diet.



Bowel cancer screening has been successful in increasing early detection rates and saving lives. The age range for bowel cancer screening has successfully been extended downward over recent years from ages 55-74 to ages 50-74. But 43% of cases occur in those over 74 and screening still only detects 12% of cases.

It was recently announced that the sensitivity of the screening test was to be increased but further increases in the sensitivity could detect even more cases, if colonoscopy capacity was greater. The UK National Screening Committee (UK NSC) provides recommendations on screening programmes in the UK.

What are we asking for?

With the right combination of prevention, continued extension of early screening and continuing improvements in treatment, we could be aiming to virtually eliminate deaths from bowel cancer over the coming decades.

CancerWatch's work focuses on prevention and screening policy and in these areas we are calling on the government to:

1. Implement a wide-ranging plan to boost the number of Britons eating a higher fibre diet. This should include:

- a. **Improving and updating school food standards** – to reflect the latest scientific advice, including on the importance of high fibre diets.
- b. **Ensuring adequate funding and monitoring of school food standards** – ensure funding is sufficient for schools to meet revised standards and put in place a monitoring framework to ensure compliance.
- c. **Developing attractive high fibre school meal options** – work with school meal providers and celebrity chefs to develop a range of attractive high fibre meals that are deliverable within budget.

- d. **Extending good food standards to all public food provision** – strengthen nutrition standards in public sector food procurement guidance and make these standards mandatory across all public sector settings.
- e. **Updating and strongly promoting the Eatwell Guide** – the government should update the Eatwell Guide, and promote the Guide much more fully, through social media, the NHS app, and targeted interventions.
- f. **Improving labelling and developing greater awareness** – high fibre labels on food should be made more prominent and the government and supermarkets should lead a campaign on healthy eating and high fibre diets.

2. Consider extending the scope of the bowel cancer screening programme and increasing the sensitivity of the screening test over time.

- a. **Review the case for extending the screening programme up to those aged 79** – in its next review of the bowel cancer screening, the UK National Screening Committee (UK NSC) should actively review the case for extending the screening programme to those aged 75-79.
- b. **Build NHS capacity to continue to increase the sensitivity of the screening test** – the government should set a plan to build up colonoscopy capacity over time with a view to gradually reducing the screening threshold down to the highest degree of sensitivity recommended by UK NSC.

3. Use screening programmes to boost prevention awareness.

The NHS sends out millions of individual notifications about bowel cancer screening each year. We should use this point of intervention to deliver written information about the simple steps people can take protect themselves and their families from developing bowel cancer.

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