

Anal Cancer

Information for people with cancer

This information should not be used to diagnose yourself or in place of a doctor's care.

Anal cancer starts in the anus.

The anus (or anal canal) is the tube that connects your rectum to the outside of your body. The anus controls the release of stool (poop) from your body.

Diagnosis and Staging

What are the signs and symptoms of anal cancer?

Anal cancer is not common. There are about 600 cases each year in Canada.

If you have early stage anal cancer, you may not have any symptoms.

Symptoms of anal cancer may include:

- Bleeding from your anus. This may be the first sign of cancer.
- Having an itchy anus that does not go away.
- Mucus coming out of your anus.
- A change in your bowel movements (going poop).
- A sore on or near your anus.
- Swollen lymph nodes in your groin or anal area.

If you have any signs or symptoms that you are worried about, please talk to your family doctor or nurse practitioner.

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How is anal cancer diagnosed?

Tests that may help to diagnose anal cancer include:

- **Physical examination:** your doctor will examine you. They will use their fingers to check your anus and rectum. This is called a digital rectal examination (DRE).
- **Anoscopy or sigmoidoscopy:** A tube with a light is put into your anus to look inside the anal canal.
- **Biopsy of anal tissue:** a small bit of tissue is removed and examined by a pathologist to see if it is cancer.
- **Gynecological exam:** People with a vagina should have a gynecological exam with a pap smear to check for cervical cancer (cancer of the cervix). Anal cancer and cervical cancer are both related to HPV (human papillomavirus).
- **If your lymph nodes are swollen,** you may need other tests.

If any of these tests find anal cancer, you may need more tests to see if the cancer has spread. You may need imaging tests like CT scan, MRI or PET scan of your pelvis and abdomen area.

For more information on tests used to diagnose cancer, see our Recommended Websites - Screening and Diagnosis section: bccancer.bc.ca/our-services/services/library/recommended-websites/screening-and-diagnosis-websites

What are the types of anal cancer?

- **Squamous cell carcinoma:** the most common type of anal cancer. 90% (90 out of 100) of anal cancers are squamous cell carcinoma. They start in the cells that line the anus.
- Rare types of anal cancer include adenocarcinomas, basal cell carcinomas and melanomas.

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What are the stages of anal cancer?

Staging describes the cancer. Staging is based on how much cancer is in the body, where it was first diagnosed, if the cancer has spread and where it has spread to.

The stage of the cancer can help your health care team plan your treatment. It can also tell them how your cancer might respond to treatment and the chance that your cancer may come back (recur).

Anal cancer staging:

- **Stage 0:** Carcinoma in situ. This is early cancer and has not spread to any other areas.
- **Stage 1:** Tumour (cancer growth) is 2 cm or less.
- **Stage 2:** Tumour is between 2 cm and 5 cm.
- **Stage 3:** Tumour is more than 5 cm.
- **Stage 4:** Tumour is any size and has spread to nearby organ(s) such as the vagina, urethra, or bladder

For more information on staging, see our About Cancer page:

bccancer.bc.ca/health-info/types-of-cancer/about-cancer

What are the grades of anal cancer?

The grade of the cancer describes how different the cancer cells look from normal cells and how fast the cancer cells are growing. A pathologist will give the cancer a grade after looking at the cells under a microscope.

Anal cancer can be grade 1, 2, 3 or 4. The lower the number, the lower the grade.

Low grade: cells are abnormal but look a lot like normal cells. Low grade cancers usually grow slowly and are less likely to spread.

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High grade: cells are abnormal and do not look like normal cells. High grade cancers usually grow more quickly and are more likely to spread.

The grade of the cancer helps your health care team plan your treatment.

Treatment

What is the treatment for anal cancer?

Cancer treatment may be different for each person. It depends on your particular cancer. Your treatment may be different from what is listed here.

Surgery

- A surgeon will take out the cancer if the tumour is small and there is no cancer in the sphincter (muscles that surround the opening of the anus and control the release of stool).

Radiation therapy (high energy x-rays that kill or shrink cancer cells) and Systemic therapy (chemotherapy)

- If the tumour is small but there is cancer in the sphincter, you may get radiation therapy alone or with systemic therapy.
- For large tumours, you will get systemic therapy and radiation therapy together. This gives a good chance of a cure. However, side effects from this treatment are worse.
- For the largest tumours, tumours that are not responding to other treatments, or cancers that come back after treatment, you may need your entire rectum removed. This means you will not be able to have a bowel movement (go poop). You will have a permanent colostomy (stool is collected in a pouch that is attached outside your body to your stomach area).

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- For more information about radiation therapy go to:
bccancer.bc.ca/our-services/treatments/radiation-therapy
- For more information about systemic therapy go to:
[bccancer.bc.ca/our-services/treatments/systemic-therapy-\(chemotherapy\)](http://bccancer.bc.ca/our-services/treatments/systemic-therapy-(chemotherapy))

What is the follow-up after treatment?

- Follow-up testing and appointments are based on your type of cancer.
- Guidelines for follow-up after treatment are on our website:
www.bccancer.bc.ca/health-professionals/clinical-resources/cancer-management-manual/gastrointestinal/anus#Follow-Up-anus
- These are guidelines written for your doctor, nurse practitioner or specialist. You can look at them to see what appointments and tests you might need after treatment.
- After treatment, you may return to the care of your family doctor or specialist for follow-up. If you do not have a family doctor, please talk to your BC Cancer health care team.
- You should have a rectal exam, anoscopy and an exam of the lymph nodes in your groin every 2-3 months for the first two years after your treatment. After that, you should have the same exams every 4-6 months for three more years.
- The BC Cancer Life after Cancer page has information on issues that cancer survivors may face: bccancer.bc.ca/lifeaftercancer

More Information

What causes anal cancer and who gets it?

We do not know the cause of anal cancer.

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These are some of the risk factors for this cancer. Not all of these risk factors may cause this cancer, but they may help the cancer start growing.

- Being over the age of 50.
- Having an HPV (human papillomavirus) infection
- History of cervical, vulvar or vaginal cancer
- Anal sex
- Having many sexual partners
- Infection with HIV (human immunodeficiency virus)
- Smoking
- Having Bowen's disease. This is a skin condition that causes rough, scaly patches of skin around the anus. If it is not treated, it can become cancer.

Statistics

Anal cancer is not common. There are about 600 cases each year in Canada.

We do not have specific statistics on anal cancer. It is included in "All Other Cancers" on our statistics page: bccancer.bc.ca/health-info/disease-system-statistics/statistics-by-cancer-type

The number of women getting anal cancer each year is rising [See note below, Statistics].

Note: Available statistics do not have information about the inclusion of transgender and gender diverse participants. It is unknown how these statistics apply to transgender and gender diverse people. Patients are advised to speak with their primary care provider or specialists about their individual considerations and recommendations.

Can I help prevent anal cancer?

- **Get regular sexual health screening.** Sexual health screening is important for people who are sexually active.

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- **Get vaccinated against HPV (human papillomavirus).** It is best to get the HPV vaccine before becoming sexually active. However, people who are already sexually active may still benefit from the vaccine. There is more information on the Immunize BC website: immunizebc.ca/diseases-vaccinations/hpv
- **Practice safer sex** by using a new condom every time you have vaginal, anal or oral sex.
- **Stop smoking.** Do not smoke and try not to be around tobacco and cigarette smoke. Even if you have been using tobacco for many years, quitting now will lower your risk of getting cancer. Support is available to help you quit smoking.
 - Visit the BC Cancer Prevention page on Tobacco: bccancer.bc.ca/health-info/prevention/tobacco

Is there screening for anal cancer?

- Your anal canal should be checked once per year by a doctor or nurse practitioner.
- If you are at higher risk for anal cancer, you may need a test of cells scraped from your anus.

Where can I find more information?

- If you have questions about anal cancer, please talk to your health care team.
- Our librarians can help you find the information you need. Visit our Library page: bccancer.bc.ca/our-services/services/library
- Managing Your Symptoms: www.bccancer.bc.ca/health-info/coping-with-cancer/managing-symptoms-side-effects



Provincial Health Services Authority

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- BC Cancer Library Recommended Anal Cancer Websites (Anal Websites):
bccancer.bc.ca/our-services/services/library/recommended-websites/types-of-cancer-websites
- Emotional Support: www.bccancer.bc.ca/health-info/coping-with-cancer/emotional-support