Cancer risk in patients with kidney disease

Patient Information

Working together for better patient information
This leaflet explains the risk of cancer in patients who have kidney disease, are receiving dialysis or have a kidney transplant. It also explains what ‘cancer screening’ is and how you may be able to reduce your risk of developing cancer in the future. 

This leaflet provides general information only. If you have specific concerns about any problems you may be experiencing, you should talk to your GP or kidney doctor.

Cancer can cause a large number of symptoms and it is impossible to list them all here. However, not all unusual or new symptoms are due to cancer. If you are worried about anything please speak to your GP or kidney doctor.
Am I more likely to get cancer because I have kidney disease?

Patients with kidney problems may be more at risk of cancer than those without kidney problems. This risk increases as your kidney disease gets worse. Some treatments for kidney disease reduce your immune system, which can make you more at risk of getting cancer.

Does having a kidney transplant change the risk of me developing cancer?

Yes, people who have received a kidney or a joint kidney and pancreas transplant are more at risk of developing certain kinds of cancers than other patients with kidney problems or those receiving dialysis. This is due to immunosuppression therapy. Your immune system fights infections and can also find and destroy cancer cells. Suppressing it helps to stop your body from rejecting your transplant but it can also affect its ability to detect cancer.

Below are some of the types of cancer that are more common in patients with a kidney transplant.

- Skin cancer including melanoma
- Lymphoma (cancer of the lymph nodes)
- Kidney cancer (both transplant kidney and own kidney)
- Cancer of the gastrointestinal system (gut) such as bowel cancer
- Lung cancer
How can I reduce the risk of cancer if I have had a kidney transplant?

We know that people with a transplant may be at particular risk of cancer of the skin. These may appear and grow quickly. You should try to examine all of your skin every month for any new growths or moles. (Ask a friend or loved one to look at the parts of your body you cannot see such as your ears and back). If you find a new growth you must report this to your doctor as soon as possible. It is important that you follow the advice below about avoiding the sun as much as possible and use sun cream when you do go out in it.

Can cancer lead to kidney disease?

Yes. A side effect of some cancer treatments is kidney damage. Sometimes cancer itself can lead to kidney problems, either through damage to the kidney or if the cancer is within the kidney, in which case the kidneys may need to be removed.
Should I be screened for cancer?

‘Screening’ is when a group of people (for example, of a certain age or sex) are tested for cancer, even though they don’t have any symptoms. You will be invited to attend as part of the national screening programme in the UK.

Most people who have screening will not have cancer. If the screening detects a possible cancer, you will usually have to undergo more tests to look at this in more detail. In some people, it will turn out that the screening was a false alarm and there is no cancer (a ‘false positive’ result).

It is your choice about whether to undergo screening. However, many cancers are more likely to be cured if they are picked up early.

It is important that you consider taking part in any screening for cancer that you are offered by the NHS. This will be on the same schedule as patients without transplants. Examples of screening that you may be offered include:

- **Cervical cancer screening** (“smear test”) – women only between the ages of 25 - 65
- **Breast cancer screening** (“mammogram”) – women only between the ages of 50 - 70
- **Bowel cancer screening** (“faecal occult blood test” or “colonoscopy”) – both men and women aged 55 and over

Public Health England also has a prostate cancer risk management programme for men over the age of 50, although this is not a formal screening programme at present.
How can I reduce the risk of cancer?

There are certain steps you are able to take that can reduce the risk of cancer in the future:

• **Stop smoking.** Smoking greatly increases the risk of most cancers, as well as increasing the risk of a stroke or heart attack in the future. For advice on how to stop smoking, see [www.nhs.uk/smokefree](http://www.nhs.uk/smokefree)

• **Maintain a healthy weight.** Your doctor or nurse will be able to advise you on what a healthy weight for your height is, or you can calculate it yourself on the NHS website - [www.nhs.uk/Tools/Pages/healthyweightcalculator.aspx](http://www.nhs.uk/Tools/Pages/healthyweightcalculator.aspx). If your weight is falling and you can’t explain why, you should mention this to your doctor.

• **Take regular exercise.** You should aim to exercise as often as possible - ideally every days. This can be as simple as walking to the shops. Further advice is available at [www.nhs.uk/live-well/exercise](http://www.nhs.uk/live-well/exercise)

• **Eat a balanced diet with vegetables and fibre.** The dietitian at your kidney clinic will be able to advise you further on this.
• **Avoid too much sun exposure** by wearing high-factor suncream (at least SPF 30 and ideally SPF 50) and staying out of the sun between 11am and 3pm. If you need to spend time outside in the sun, wear a wide-brimmed hat and a long-sleeved top. Do not use tanning salons or sun beds. You may need to take vitamin D supplements as a result of avoiding the sun. You doctor can advise you about this.

• **Avoid drinking too much alcohol.** We advise that you follow national guidelines about alcohol - [www.nhs.uk/live-well/alcohol-support/calculating-alcohol-units](http://www.nhs.uk/live-well/alcohol-support/calculating-alcohol-units). It is recommend that you drink no more than 14 units of alcohol (around six pints of normal-strength beer or four 250ml glasses of wine) per week. You may have been asked to limit how much you drink (sometimes called a “fluid restriction”) – don’t forget that alcoholic drinks count towards this.

• **Keep aware of any changes in your body.** Men should examine their testicles ([www.nhs.uk/common-health-questions/mens-health/what-should-my-testicles-look-and-feel-like](http://www.nhs.uk/common-health-questions/mens-health/what-should-my-testicles-look-and-feel-like)) and women their breasts ([www.nhs.uk/common-health-questions/womens-health/how-should-i-check-my-breasts](http://www.nhs.uk/common-health-questions/womens-health/how-should-i-check-my-breasts)) every three months for lumps. Look at your urine or bowel motions (poo) in the toilet for blood every week. If you are concerned about something, discuss it with your doctor.
Where can I find out more information?

- Cancer Research UK – Screening for cancer
  www.cancerresearchuk.org/about-cancer/screening
- Renal Association Patient Information Leaflets – includes leaflets on Fluid Balance and a Healthy diet and Lifestyle for your kidneys
  www.renal.org/information-resources/patient-leaflets
- Renal Association Clinical Practice Guideline on Post-operative care in the kidney transplant patient – includes information on cancer screening
  www.renal.org/guidelines