

ASCO ANSWERS

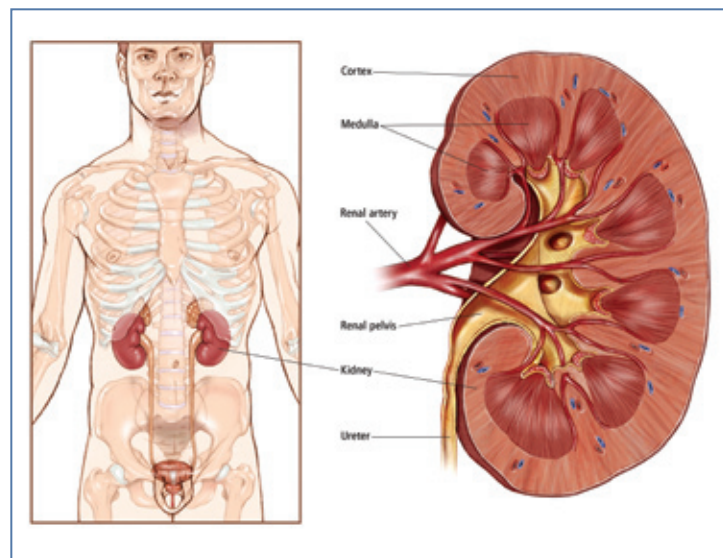
KIDNEY CANCER

WHAT IS KIDNEY CANCER?

Kidney cancer begins when cells in the kidney grow out of control and form a tumor. There are several types of kidney cancer; renal cell carcinoma is the most common. In addition, there are several types of kidney cancer cells. Knowing which kind of cell a tumor is made up of helps doctors plan treatment.

WHAT IS THE FUNCTION OF THE KIDNEY?

The kidneys are reddish-brown, fist-sized organs located above the waist on either side of the spine. They filter blood and remove impurities, excess minerals and salts, and surplus water that leave the body as wastewater (urine). These organs also produce hormones to help control blood pressure, red blood cell production, and other functions. Because each kidney works independently, one kidney can be removed while preserving the function of the other.



Find additional cancer information at www.cancer.net.

WHAT DOES STAGE MEAN?

The stage is a way of describing the cancer, such as where it is located, if or where it has spread, and if it is affecting the functions of other organs in the body. There are five stages for kidney cancer: stage 0 (zero) and stages I through IV (one through four); stage 0 kidney cancer is extremely rare. Illustrations for these stages are available at www.cancer.net/kidney.

HOW IS KIDNEY CANCER TREATED?

The treatment of kidney cancer depends on the size and location of the tumor, whether the cancer has spread, and the person's overall health. When the cancer has not spread beyond the kidneys, surgery to remove the tumor and part of the kidney preserves kidney function and may be the only treatment necessary. Kidney cancer may also be treated with targeted therapy and immunotherapy. Several targeted therapy drugs have been approved by the U.S. Food and Drug Administration, including sunitinib (Sutent), sorafenib (Nexavar), and temsirolimus (Torisel). Other targeted therapy drugs, such as bevacizumab (Avastin), and adjuvant therapy (treatment after surgery) are being evaluated in clinical trials. Radiation therapy and chemotherapy are not commonly used to treat kidney cancer. However, these treatments may be used to relieve symptoms or treat cancer that has spread to other areas of the body. When making treatment decisions, people may also consider a clinical trial; talk with your doctor about all treatment options. The side effects of kidney cancer treatment can often be prevented or managed with the help of your health-care team.

HOW CAN I COPE WITH KIDNEY CANCER?

Absorbing the news of a cancer diagnosis and communicating with your doctor are key parts of the coping process. Seeking support, becoming organized, and considering a second opinion are other steps. Take care of yourself during this time. Understanding your emotions and those of people close to you can be helpful in managing the diagnosis, treatment, and healing process.

QUESTIONS TO ASK THE DOCTOR

Regular communication is important in making informed decisions about your health care. Consider asking the following questions of your doctors:

- What type of kidney cancer do I have?
- Can you explain my pathology report (laboratory test results) to me?
- What stage is the kidney cancer?
- Has the cancer spread to my lymph nodes or anywhere else?
- Would you explain my treatment options?
- What clinical trials are open to me?
- What role, if any, do anti-angiogenic drugs (drugs that fight cancer by preventing blood vessel formation) have in my treatment plan?
- How will this treatment benefit me?
- How will this treatment affect my daily life? Will I be able to work, exercise, and perform my usual activities?
- Will this treatment affect my ability to become pregnant or have children?
- What is the expected timeline for my treatment plan?
- What long-term side effects may be associated with my cancer treatment?
- Where can I find emotional support for me and my family?
- Whom do I call for questions or problems?
- Is there anything else I should be asking?

Additional questions to ask the doctor can be found at www.cancer.net/kidney.

Information in ASCO's patient education materials is not intended as medical advice or as a substitute for the treating doctor's own professional judgment; nor does it imply ASCO endorsement of any product, service, or company.

ASCO believes that all treatment decisions should be made between patients and their doctors.

**For more information, visit ASCO's patient website,
www.cancer.net, or call 888-651-3038.**

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Making a world of difference in cancer care

TERMS TO KNOW

Benign:

A tumor that is not cancerous

Biopsy:

Removal of a tissue sample that is then examined under a microscope to check for cancer cells

Chemotherapy:

The use of drugs to destroy cancer cells

Immunotherapy:

Treatment that uses the body's own immune system to fight cancer

Lymph node:

A tiny, bean-shaped organ that fights infection

Malignant:

A tumor that is cancerous

Metastasis:

The spread of cancer from where the cancer began to another part of the body

Nephrectomy:

Part or total removal of a kidney

Oncologist:

A doctor who specializes in treating people with cancer

Prognosis:

Chance of recovery

Radiation therapy:

The use of high-energy x-rays to destroy cancer cells

Targeted therapy:

Treatment that targets faulty genes or proteins that contribute to cancer growth and development

Tumor:

A mass of tissue that requires a biopsy