Bile Duct Cancer - Latest Research

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Latest Research

ON THIS PAGE: You will read about the scientific research being done now to learn more about this type of cancer and how to treat it. To see other pages, use the menu on the side of your screen.

Doctors are working to learn more about bile duct cancer, ways to prevent it, how to best treat it, and how to provide the best care to people diagnosed with this disease. The following areas of research may include new options for patients through clinical trials [2]. Always talk with your doctor about the diagnostic and treatment options best for you.

A major focus of bile duct cancer research is to find out if new drugs that work differently than chemotherapy (such as anti-angiogenesis therapy; see below) might make the current standard chemotherapy work better for advanced biliary tract cancer.

Anti-angiogenesis therapy [3]. Anti-angiogenesis therapy is focused on stopping angiogenesis, which is the process of making new blood vessels. Because a tumor needs the nutrients delivered by blood vessels to grow and spread, the goal of anti-angiogenesis therapies is to ?starve? the tumor. Anti-angiogenic agents being studied for bile duct cancer treatment include bevacizumab (Avastin) and sorafenib (Nexavar).

Epidermal growth factor receptor (EGFR) inhibitors. Researchers have found that drugs that block EGFR may be effective at stopping or slowing the growth of bile duct cancer. Drugs being studied in this category include cetuximab (Erbitux), erlotinib (Tarceva), and panitumumab (Vectibix).

Photodynamic therapy (PDT). After the doctor gives an inactive form of a drug, he or she uses a special light that is directed at the tumor in the bile duct through an endoscope in a procedure similar to ERCP (see the Diagnosis [4] section for more information about this procedure). This causes a chemical change in the drug, activating it to kill the tumor cells in the area where the light is directed. PDT is currently used to relieve pain and symptoms, not to eliminate bile duct cancer. Doctors are also looking at whether PDT can reduce the risk of a stent becoming blocked by stopping the tumor from growing into it.

Immunotherapy [5]. Immunotherapy (also called biologic therapy) is designed to boost the body?s natural defenses to fight the cancer. It uses materials made either by the body or in a laboratory to improve, target, or restore immune system function.

Hyperthermia therapy. Hyperthermia therapy kills cancer cells by increasing body temperature; it also may make cancer cells more likely to be destroyed by radiation therapy and chemotherapy.

Radiosensitizers. Researchers are looking at radiosensitizers to treat bile duct cancer. Radiosensitizers are drugs that make tumor cells more likely to be killed by radiation therapy.

Genetics. Scientists are also researching the genetic progression of bile duct cancer, which is the process of how one genetic change turns into many genetic changes that cause a cell to become cancerous.

Supportive care. Clinical trials are underway to find better ways of reducing symptoms and side effects of current bile duct cancer treatments in order to improve patients? comfort and quality of life.

Looking for More about the Latest Research?

If you would like additional information about the latest areas of research regarding bile duct cancer, explore these related items that will take you outside of this guide:

- To find clinical trials specific to your diagnosis, talk with your doctor or search online clinical trial databases now [6].
- Review research announced at recent scientific meetings [7].

The next section addresses how to cope with the symptoms of the disease or the side effects of its treatment. Use the menu on the side of your screen to select Coping with Side Effects, or you can select another section, to continue reading this guide.

Links:
[1] http://www.cancer.net/about-us

[2] http://www.cancer.net/node/18513
[3] http://www.cancer.net/node/24376
[4] http://www.cancer.net/node/18510
[5] http://www.cancer.net/node/24726
[6] http://www.cancer.net/node/24878
[7] http://www.cancer.net/node/24532