Uterine Cancer - Diagnosis [1]

This section has been reviewed and approved by the Cancer.Net Editorial Board [2], 08/2014

ON THIS PAGE: You will find a list of the common tests, procedures, and scans that doctors can use to find out what?s wrong and identify the cause of the problem. To see other pages, use the menu on the side of your screen.

Doctors use many tests to diagnose cancer and find out if it has spread to another part of the body, called metastasis. Some tests may also determine which treatments may be the most effective. For most types of cancer, a biopsy is the only way to make a definitive diagnosis of cancer. If a biopsy is not possible, the doctor may suggest other tests that will help make a diagnosis. Imaging tests may be used to find out whether the cancer has spread. This list describes options for diagnosing this type of cancer, and not all tests listed will be used for every woman. Your doctor may consider these factors when choosing a diagnostic test:

- Age and medical condition
- Type of cancer suspected
- Signs and symptoms
- Previous test results

Pelvic examination. The doctor feels the uterus, vagina, ovaries, and rectum to check for any unusual findings. A Pap test [3], often done with a pelvic examination, is primarily done to evaluate for cervical cancer. However, sometimes a Pap test may occasionally find abnormal glandular cells, which are caused by uterine cancer.

In addition to a physical examination, the following imaging tests may be used to diagnose uterine cancer:

Transvaginal ultrasound [4]**.** An ultrasound uses sound waves to create a picture of internal organs. In a transvaginal ultrasound, an ultrasound wand is inserted into the vagina and aimed at the uterus to obtain the pictures. If the endometrium looks too thick, the doctor may decide to perform a biopsy (see below).

Computed tomography (CT or CAT) scan [5]**.** A CT scan creates a three-dimensional picture of the inside of the body with an x-ray machine. A computer then combines these images into a detailed, cross-sectional view that shows any abnormalities or tumors. A CT scan can also be used to measure the tumor?s size. Sometimes, a special dye called a contrast medium is given before the scan to provide better detail on the image. This dye can be injected into a patient?s vein or given as a pill to swallow.

Magnetic resonance imaging (MRI) [6]**.** An MRI uses magnetic fields, not x-rays, to produce detailed images of the body. MRI can also be used to measure the tumor?s size. A special dye called a contrast medium is given

before the scan to create a clearer picture. This dye can be injected into a patient?s vein or given as a pill to swallow. This is particularly useful to get detailed images if the treatment option is primarily hormone management (see Treatment Options [7]).

Doctors also use the following surgical tests to establish a diagnosis:

Endometrial biopsy [8]**.** A biopsy is the removal of a small amount of tissue for examination under a microscope. Other tests can suggest that cancer is present, but only a biopsy can make a definite diagnosis. The sample removed during the biopsy is analyzed by a pathologist. A pathologist is a doctor who specializes in interpreting laboratory tests and evaluating cells, tissues, and organs to diagnose disease.

For an endometrial biopsy, the doctor removes a small sample of tissue with a very thin tube. The tube is inserted into the uterus through the cervix, and the tissue is removed with suction. This process takes about one minute. Afterward, the woman may have cramps and vaginal bleeding. These symptoms should go away soon after and can be reduced by taking a nonsteroidal anti-inflammatory drug (NSAID) as directed by the doctor. Endometrial biopsy is often a very accurate way to diagnose uterine cancer. However, patients who have abnormal vaginal bleeding before the test may still need a dilation & curettage (D&C; see below) even if no abnormal cells are found during the biopsy.

Dilatation and Curetage (D&C). A D&C is a procedure to remove tissue samples from the uterus. A woman is given anesthesia during the procedure. A D&C is often done in combination with a hysteroscopy so the doctor can view the lining of the uterus during the procedure. During a hysteroscopy, the doctor inserts a thin, lighted flexible tube in the vagina, through the cervix, and into the uterus.

Once endometrial tissue has been removed either during a biopsy or D&C, the sample is checked for cancer cells, endometrial hyperplasia, and other conditions. In the past, there was concern that a D&C would push cancer cells out of the uterus into other reproductive organs. However, research studies have shown that this has no effect on patients who received a D&C combined with a hysteroscopy.

After diagnostic tests are done, your doctor will review all of the results with you. If the diagnosis is cancer, additional testing will be performed to describe how far the disease has grown. This helps to categorize the disease by stage [9] and directs the type of treatment that will be needed.

The next section helps explain the different stages for this type of cancer. Use the menu on the side of your screen to select Stages, or you can select another section, to continue reading this guide.

Links:
[1] http://www.cancer.net/cancer-types/uterine-cancer/diagnosis
[2] http://www.cancer.net/about-us
[3] http://www.cancer.net/node/24638
[4] http://www.cancer.net/node/24714
[5] http://www.cancer.net/node/24486
[6] http://www.cancer.net/node/24578
[7] http://www.cancer.net/node/19315
[8] http://www.cancer.net/node/24406
[9] http://www.cancer.net/node/19314