

Uterine Cancer

What is uterine cancer?

Uterine cancer is a disease in which healthy cells in the uterus change and grow out of control, forming a mass called a tumor. Adenocarcinoma, also called endometrial cancer, begins in the lining of the uterus and is the most common type of uterine cancer. In the United States, uterine cancer is the most commonly diagnosed cancer of a woman's reproductive system.

What is the function of the uterus?

The pear-shaped uterus is located between a woman's bladder and rectum. Also called the womb, it is where a baby grows when a woman is pregnant. It has 3 sections: the cervix (the narrow, lower section), the isthmus (the broad, middle section), and the fundus (the dome-shaped, top section). The inside of the uterus has 2 layers of tissue: endometrium (an inner layer) and myometrium (the outer layer of muscle tissue).

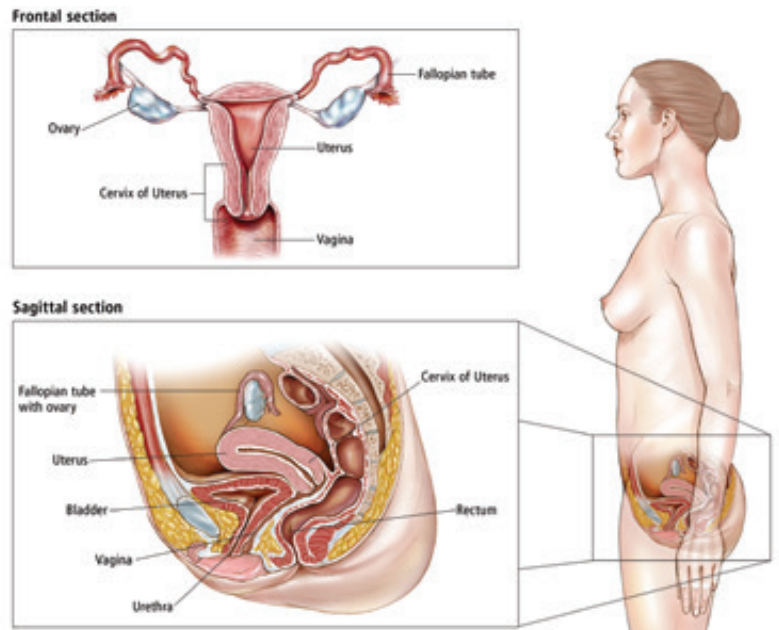


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What does stage mean?

The stage is a way of describing where the cancer is located, if or where it has spread, and whether it is affecting other parts of the body. There are 5 stages for uterine cancer: stage 0 (zero) and stages I through IV (one through four). However, most doctors use another standard staging system, the FIGO system, to stage uterine cancer. The tumor may also be given a grade, which indicates how quickly the cancer may grow or spread. Details about stage and grade are available at www.cancer.net/uterine.

How is uterine cancer treated?

The treatment of uterine cancer depends on the type of tumor, whether the cancer has spread, and the woman's overall health. Surgery to remove the uterus and cervix usually is the first treatment. Sometimes, the ovaries, fallopian tubes, and nearby lymph nodes may also be removed. Radiation therapy, chemotherapy, and hormone therapy with the sex hormone progesterone may also be treatment options. Combinations of different treatments are often recommended. When making treatment decisions, women may also consider a clinical trial; talk with your doctor about all potential treatment options. The side effects of uterine cancer treatment can often be prevented or managed with the help of your health care team. This is called palliative care and is an important part of the overall treatment plan. Women may have specific concerns about whether treatment may affect their sexual and reproductive health, and these topics should be discussed with the doctor before treatment begins.

How can I cope with uterine cancer?

Absorbing the news of a cancer diagnosis and communicating with your health care team are key parts of the coping process. Seeking support, organizing your health information, making sure all of your questions are answered, and participating in the decision-making process are other steps. Talk with your health care team about any concerns. 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 uterine cancer do I have?
- Can you explain my pathology report (laboratory test results) to me?
- What stage and grade is the uterine cancer? What does this mean?
- Would you explain my treatment options?
- What clinical trials are open to me? Where are they located, and how do I find out more about them?
- What treatment plan do you recommend? Why?
- Who will be part of my treatment team, and what does each member do?
- How will this treatment affect my daily life? Will I be able to work, exercise, and perform my usual activities?
- Could this treatment affect my sex life?
- Will this treatment affect my ability to become pregnant?
- If I'm worried about managing the costs related to my cancer care, who can help me with these concerns?
- 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 with questions or problems?
- Is there anything else I should be asking?

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

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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

Dilation & curettage (D&C):

Removal of tissue samples from the uterus

Fibroid:

A noncancerous tumor in the uterine muscle

Gynecologic oncologist:

A doctor who specializes in treating women with cancer of the reproductive system

Hysterectomy:

Removal of the uterus

Lymph node:

A tiny, bean-shaped organ that fights infection

Malignant:

A tumor that is cancerous

Metastasis:

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

Prognosis:

Chance of recovery

Radiation therapy:

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

Tumor:

An abnormal growth of body tissue

MADE AVAILABLE THROUGH

