

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).

■ 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 (1 through 4). Most doctors use 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. Find more information at www.cancer.net/uterine.

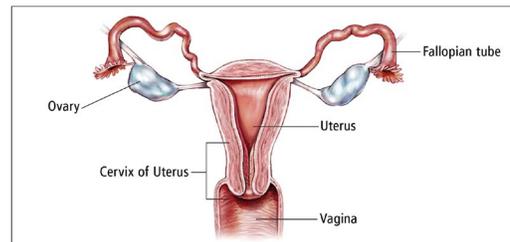
■ How is uterine cancer treated?

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, usually 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. Clinical trials are an option to consider for treatment and care for all stages of cancer. 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 or supportive 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. These topics should be discussed with the doctor before treatment begins. Learn more at www.cancer.net/fertility.

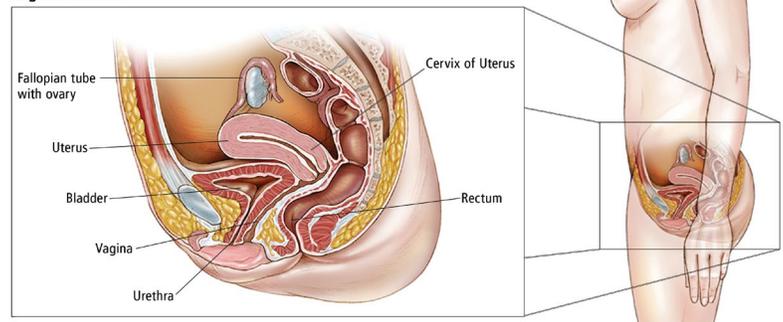
■ How can I cope with uterine cancer?

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.

Frontal section



Sagittal section



Questions to ask the health care team

Regular communication is important in making informed decisions about your health care. It can be helpful to bring someone along to your appointments to take notes. Consider asking your health care team the following questions:

- ▶ 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 available for 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 of cancer care, who can help me?
- ▶ What long-term side effects may be associated with my cancer treatment?
- ▶ Where can I find emotional support for me and my family?
- ▶ If I have a question or problem, who should I call?

**Find more questions to ask the health care team at www.cancer.net/uterine.
For a digital list of questions, download Cancer.Net's free mobile app at www.cancer.net/app.**

Words 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 cancer of the female 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.

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