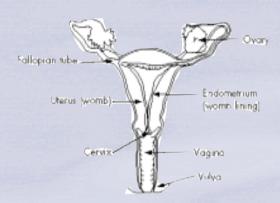
This leaflet has been written to help you understand about cancer of the Uterus- (Endometrial Cancer), its diagnosis, treatment and support available. You may wish to discuss some aspects with your doctor or support nurse (named at the back of this leaflet)

What is Cancer?

The organs of the body are made up of cells. Cancer is a disease of these cells. The cells normally divide in an orderly manner. Sometimes the cells divide out of control - developing into a lump/tumour. A tumour which is malignant consists of cancer cells which have the ability to spread beyond the original site, destroying surrounding tissue, sometimes they can break away and spread to other parts of the body.

The Uterus

The Uterus is a muscular organ usually about the size and shape of a pear, that sits in the pelvis. It is here that a baby develops during pregnancy. The lining of the Uterus is called the endometrium. This thickens during the menstrual cycle, in preparation for a fertilised egg and is shed during a period if the egg is not fertilised.



How does Cancer of the Uterus Develop?

We may not know the exact cause of your cancer, but of the 4,500 (ONS 1998) cases in England each year, 80% of women are post menopausal, therefore the changes in your hormones at this time are an important factor in the development of this type of cancer.

What are the signs & symptoms?

The most common early presentation is abnormal vaginal bleeding, particularly in post menopausal bleeding. (Blake et al 1998). These symptoms may also be due to other conditions, you should seek a medical opinion.

Diagnosing Cancer of the Uterus

A full medical history will be taken and a number of other tests may be carried out before a definite diagnosis can be made. This may include:

- a vaginal examination
- an examination under anaesthetic (EUA) to examine the cervix, uterus, rectum and bladder whilst you are asleep
- a hysteroscopy whereby a tiny tele scope is passed through the vagina and cervix to look inside the womb and allow biopsies (samples) to be taken of the endometrium and examined.

Other investigations (e.g. a scan) may be added to this to allow the doctor to determine the site and stage of the cancer, in order to plan your treatment. See hospital information leaflets.

Stages of Cancer

Staging is a process of investigations which may be used to determine type/size of the tumour and if there is any spread. Staging is important to help decide treatment options.

Stages of Cancer of the Endometrium

The following stages are used for cancer of the endometrium

- Stage 1 Cancer is found only in the main part of the Uterus.
- Stage 2 Cancer cells have spread to the cervix.
- Stage 3 Cancer cells have spread outside the Uterus but have not spread outside the pelvis.
- Stage 4 Cancer cells have spread beyond the pelvis to other body parts or into the lining of the bladder (the sac that holds urine) or rectum.
- Recurrent Recurrent disease means that
 Disease the cancer has come back
 (recurred) after it has been
 treated.

Treatment Options

There are four main treatment options for cancer of the Endometrium including:

- Surgery
- Radiotherapy
- Chemotherapy
- Hormone Therapy

The consultant will decide on the best treatment option for you following discussion with you.

Clinical Trials

Research into new methods of treating cancer of the Uterus is going on all the time. You may be asked to consider taking part in a clinical trial.

Clinical trials are research studies involving patients which compare a different type of medical care with the best treatment currently available. You may be approached regarding a clinical trial which your consultant or specialist nurse will be able to discuss with you. CancerBacup produce a booklet which may be helpful to you.

Surgery

Surgical treatment involves the removal of the Uterus (Hysterectomy). The ovaries and the fallopian tubes will also be removed if possible. This is called a Total Abdominal Hysterectomy and Bilateral Salpingo Oophorectomy, (TAH & BSO) - see hospital information leaflet for specific information.

Radiotherapy

Radiotherapy is the use of high energy X Rays (like having an X Ray) to destroy cancer cells. Radiation may come from a machine outside the body (external beam radiotherapy) or inside the body (internal beam radiotherapy). This involves a radioactive substance being inserted (under anaesthetic or sedation) into your body for a period of time, (similar to a large tampon being inserted into the vagina).

The type of radiotherapy and length of time will be planned and decided individually between the doctor and yourself. (see Clatterbridge Centre for Oncology radiotherapy booklet, for more information).

Chemotherapy

Depending on the type and stage of your cancer, your doctor may suggest chemotherapy treatment (see Clatterbridge Centre for Oncology booklet & specific information sheets)

Hormone Therapy

In some cases your doctor might want to give you hormone therapy as some cancers of the Uterus can be sensitive to hormones such as progesterone.

Life and Relationships

- Most people feel overwhelmed when they are told they have cancer.
- Many different emotions arise which can cause confusion.
- Reactions differ from one person to another.
- There is no right or wrong way to feel.
- You may experience the whole range of personal emotions and reactions both similar or different from family and friends.
- Support and guidance is available in coping with these feelings.

Many people find great comfort in their faith and or religious and spiritual beliefs.

Following the diagnosis of cancer and your subsequent treatment, you may experience physical changes. There may be some issues/concerns you wish to raise /explore, i.e.

- Body Image
- Weight Gain/Loss
- Sexual Health
- Menopause Symptoms
- Others

Your support nurse (named at the end of this leaflet) will be able to support you by explaining about the issue /concern and provide advice and information if required. This may help you adjust/cope with these changes. This may include involvement of other members of the Health Care Team (HCT) i.e.

- Dietician
- Lymphoedema Practitioner
- Physiotherapist
- Occupational Therapist
 and your Primary Health Care Team
 (PHCT), General Practitioner (GP),
 District Nurse (DN), Community Macmillan Nurse (CM)

You may not be aware of who can help with changes in social and financial matters, but your support nurse can put you in touch with the relevant people who can provide guidance and advice in these and other aspects, including

childcare, how to tell the children and practical day to day issues.

You may wish to explore information and coping methods to help yourself.
Therefore the following booklets may be helpful, (there are many others).

- Adjusting to life after cancer -CancerBacup
- Close relationships & cancer -Cancerlink
- Life with cancer Cancerlink

Complementary Therapies

Complementary therapies may be helpful to you and your family. There are many different types i.e.

- Reflexology
- Massage
- Relaxation

and many others. Your support nurse can advise you by providing information regarding the appropriateness for you and how to access them.

Your follow up care

This will be tailored to your specific needs. The doctors will see you on a regular basis in the outpatients department (OPD). If you develop any further symptoms the doctor will see you promptly and may start further investigations.

Use your Gynae Support Nurse.

Equal Opportunities

The hospital is committed to promoting an environment, which provides equal opportunities for all patients, visitors and staff. If you have special requirements such as dietary needs, interpreter services, disability needs or a preference for a female doctor, please do not hesitate to discuss this with a member of staff who will try to help you.

Support Networks Available

Further information, advice and support is available for you/partner family from:

Locally

CANCER RESOURCE STORE
Tel: 0151 709 6161
SEFTON CANCER SUPPORT GROUP
Tel: 0151 521 5179
CANCER SUPPORT CENTRE
Tel: 0151 726 8934

Nationally

CANCERBACUP
Tel: 0808 800 1234
CANCERLINK
Tel: 0808 808 0000
MACMILLAN INFORMATION
Tel: 0845 601 6161
GYNAE C
Tel: 01793 338885

Website information may be obtained from your hospital, local and national support networks above.

Ask your support nurse for a free copy of the Cancer Guide, which can guide, support and inform you through your cancer experience.

Personal contact Name Tel No Support Nurse Hospital Macmillan Nurse District Nurse Other Questions you may wish to ask 4

References

Nordin A (1999) Patient Pictures -Gynaecology, Health Press Ltd, Oxford.

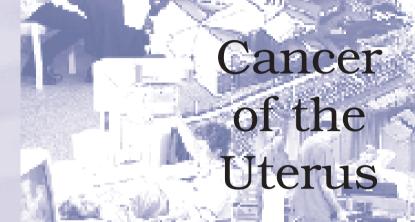
Office for National Statistics (1998) Cancer Statistics Registration 1992. MBI No 25 London, The Stationary Office.

Blake P, Lambert H, Crawford R (1998) Gynaecological Oncology: A guide to clinical management, Oxford University Press National Cancer Institute. CancerNet (1999) Uterine Cancer.

BBC/Macmillan Cancer Relief. The Cancer Guide (1997)

CancerBacup (1993) Understanding Cancer of the Uterus

CancerBacup (1996) Understanding Clinical Trials





Liverpool Women's Hospital Crown Street, Liverpool L8 7SS

Telephone: 0151 708 9988 Visit our Web site at www.lwh.org.uk.