

Uterus Cancer - Frequently asked questions

Who is the ideal person for this information?

- Patient with diagnosis of uterine cancer
- Partner, family member or relative of uterine cancer patient

This information includes common symptoms, diagnosis of uterine cancer and treatment you may be offered. Being diagnosed with uterine cancer is distressful for the patient and her close relatives; our team will guide and support you throughout the cancer journey. This leaflet is to supplement the support you will get.

What is endometrial (uterine) cancer?

Uterine cancer is cancer of endometrium which is the inner lining of the uterus. It is one of the most common types of female reproductive organs' cancer. There are two types of uterine cancer. Type 1 grows slowly while type 2 grows rapidly. Type 1 uterine cancer is most common out of these two types. Endometrial cancer is different from uterine muscle tumor, which is called sarcoma.

Uterine cancer occurs when cells of endometrium (inner lining of uterus) start to grow rapidly without any control. Uterine cancer most commonly occurs after menopause. Menopause is a term to suggest the time in a woman's life when she stops having menstruation.

What is Atypical Hyperplasia (AH) or Endometrial Intraepithelial Neoplasia (EIN) of uterus?

Atypical hyperplasia (AH) or Endometrial intraepithelial neoplasia (EIN) is a condition which is associated with uterine cancer in 40-50% of cases. It is associated with 14-45 times increased risk for uterine cancer in future. Hence, this condition should be managed as a precancerous or cancerous condition. Abnormal uterine bleeding (AUB) is the most common symptom of EIN.

What are the common symptoms of uterine cancer?

The most common symptom of uterine cancer is abnormal uterine bleeding (AUB, which patients experience as bleeding through vagina. Abnormal uterine bleeding includes:

- Bleeding in between two menstrual cycles
- Heavy bleeding through vagina during periods or menstruation
- Any vaginal bleeding after attaining menopause

These symptoms can be associated with other conditions that are not cancer. But if you have these symptoms, inform your doctor.

What are the factors associated with uterine cancer?

In most cases, the reason behind uterine cancer is unknown. However, there are factors that can be responsible for uterine cancer (Not having risk a factor doesn't mean that you won't get cancer or having risk factors doesn't mean that you will get cancer).

- Obesity (BMI >30)
- Type 2 diabetes mellitus
- History of polycystic ovarian syndrome
- History of infertility, late menopause, early menarche
- Genetic conditions like Lynch syndrome (HNPCC syndrome)
- Family history of endometrial or colon cancer
- Endometrial Hyperplasia
- Hormone replacement therapy (estrogen only)

What are the tests for uterine cancer?

If you have vaginal bleeding after menopause or bleeding between two menstrual cycles, your doctor might suggest some test called Ultrasonography (USG) and Biopsy of endometrial tissue.

During the biopsy procedure, the doctor will take a small sample from inner lining of the uterus. This is safe and not much painful. Another doctor (Pathologist) will look at this biopsy tissue under a microscope to see if cancer is present.

Ultrasound (USG) is a non-invasive and painless imaging test to see the uterus. This is to check for increased thickness of uterus lining. Increased thickness of uterine inner lining has more chance of its association with uterine cancer.

What is cancer staging?

Preoperative tests provide an idea of the cancer stage. But surgery for uterine cancer decides the final stage of cancer. Cancer stage gives an idea of how far the cancer has spread. Further treatment plans depend on the uterine cancer stage and how fast it is growing. Your age and other medical conditions will also influence the treatment plan.

How is uterine cancer treated?

Women with uterine cancer have surgery for treatment and decide on cancer stage. Later on, further treatment with chemotherapy and radiotherapy is based on final cancer staging. Some women will require surgery only while others might need further treatment.

Your doctor will remove the uterus, ovaries and fallopian tubes during surgery. This surgery is called hysterectomy with B/L salpingo-oophorectomy. During surgery, the doctor will also look for other organs around the uterus to look for cancer spread and might remove other organs if necessary.

- Chemotherapy—Chemotherapy is the medical term for medicines that kill cancer cells or stop them from growing.
- Radiation therapy—Radiation is basically X-ray/Photon rays that kill cancer cells. Radiation can be given through a machine that is outside the body or with a radiation source directly into the vagina.

What happens after uterine cancer treatment?

After treatment, you will be checked every 3-month interval for the first 2 years after treatment. This close follow-up visit intended to see if the cancer comes back. Follow-up visits usually include blood tests, examination and imaging tests. If you have symptoms similar to the time of diagnosis, then tell your doctor.

What happens if uterine cancer comes back or spreads?

If the cancer comes back or spreads, you might require more surgery, chemotherapy or targeted therapy. Your doctor will give you more information and suitable options for treatment in this situation.

What if I want to get pregnant one day?

If you have not yet gone through menopause and want to have a baby in future, talk with your doctor. A woman cannot get pregnant after a hysterectomy or radiation. Your doctor can discuss different options with you.

Can uterine cancer be prevented or diagnosed early?

If uterine, colon, rectal, stomach and kidney cancer runs in your family, talk to your doctor. If you or your relatives have a diagnosis of hereditary non-polyposis colorectal cancer (HNPCC), then inform your doctor. There might be things that you can do to keep from getting cancer or early diagnosis.

What else should I do and ask my doctor?

It is important to follow all your doctors' instructions about visits and tests. It's also important to talk to your doctor about any side effects or problems you have during treatment. It is important to inform your doctor about any symptoms or side effects to follow his/her instructions carefully. Always express your expectations and feelings about treatment to your doctor. Anytime you are offered treatment plan, it is better to ask:

- What are the benefits of this cancer treatment? Will it reduce or relieve my symptoms?
- What are the side effects to this treatment?
- What other treatment is there beside this plan?
- What happens if I do not wish to have this treatment?

