

Hormone Therapy

Hormone therapy is a cancer treatment that blocks the oestrogen hormone. Oestrogen stimulates the growth of endometrial cancer cells. Removing or blocking the action of oestrogen can stop the cancer cells from growing.

Targeted Therapy

All cells including cancer cells need blood vessels to sustain and grow. By giving a treatment that targets against a protein that helps new blood vessels to form, cancer cells will not be able to grow and die. Targeted therapy is usually given with chemotherapy in the treatment of endometrial cancer.

Immunotherapy

Immunotherapy are medications that harness the body's own immune system and allow it to recognise and destroy cancer cells. Immunotherapy is used in the treatment of selective group of endometrial cancer.

Screening and Prevention

There is no routine screening test for endometrial cancer. It is therefore important to be vigilant of symptoms and see a doctor for early detection if symptomatic.

To lower the risk of developing endometrial cancer, it would be advisable to modify the risk factors:

- Exercise regularly
- Maintain a healthy weight
- Discuss options of hormone replacement therapy with your doctor
- Talk to your healthcare specialist if you have a strong family history of cancer

What Kind of Support is Available?

CanHOPE is a non-profit cancer counselling and support service provided by Parkway Cancer Centre, Singapore. CanHOPE consists of an experienced, knowledgeable and caring support team with access to comprehensive information on a wide range of topics in education and guidelines in cancer treatment.

CanHOPE provides:

- Up-to-date cancer information for patients including ways to prevent cancer, symptoms, risks, screening tests, diagnosis, current treatments and research available.
- Referrals to cancer-related services, such as screening and investigational facilities, treatment centres and appropriate specialist consultation.
- Cancer counselling and advice on strategies to manage side effects of treatments, coping with cancer, diet and nutrition.
- Emotional and psychosocial support to people with cancer and those who care for them.
- Support group activities, focusing on knowledge, skills and supportive activities to educate and create awareness for patients and caregivers.
- Resources for rehabilitative and supportive services
- Palliative care services to improve quality of life of patients with advanced cancer.

The CanHOPE team will journey with patients to provide support and personalised care, as they strive to share a little hope with every person encountered.



CanHOPE Counsellors contact:
Cancer counselling hotline:
(65) 6738 9333
Email: enquiry@canhope.org
www.canhope.org

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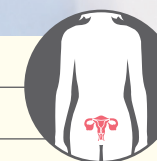


Endometrial Cancer

A type of cancer that begins in the uterus

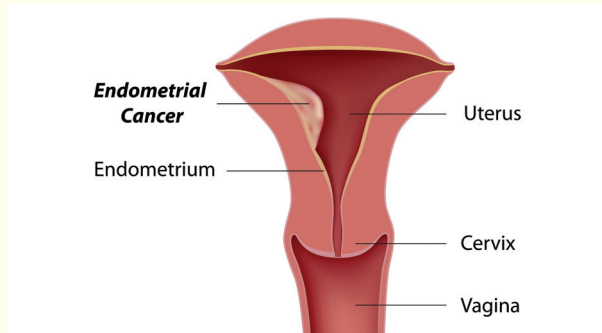


www.parkwaycancercentre.com



What is Endometrial Cancer?

Endometrial cancer, also known as uterine cancer is a type of cancer that begins in the uterus. The uterus is a hollow, pear shaped pelvic organ where the development of a baby takes place. Endometrial cancer begins in the layer of cells that form the lining (endometrium) of the uterus.



What are the Risk Factors for Endometrial Cancer?

Endometrial cancer is most commonly diagnosed in women in their 50s and 60s, when they have undergone menopause.

The growth of the cancer cells is usually stimulated by oestrogen, which is a hormone produced by the ovaries as well as fat cells in the body. A woman's risk of developing endometrial cancer is increased by prolonged stimulation and exposure to oestrogen. These include conditions and situations such as:

- Obesity
- Have few or no children
- More years of menstruation (early menstruation or late menopause)
- Irregular ovulation patterns in conditions such as polycystic ovary syndrome
- Diabetes
- Hormone replacement therapy with oestrogen

Women taking certain hormonal drugs to treat or prevent breast cancer have an increased risk of developing endometrial cancer.

Some inherited conditions can increase the risk endometrial cancer. One of these conditions, hereditary nonpolyposis colorectal cancer (HNPCC), also known as Lynch syndrome, is caused by a genetic mutation that is passed from generation to generation. If an individual has this syndrome, there is an increased risk of other cancers, including endometrial cancer.

Symptoms

Endometrial cancer is often detected at an early stage because it presents as abnormal vaginal bleeding, especially bleeding after menopause.

Other signs and symptoms of endometrial cancer include:

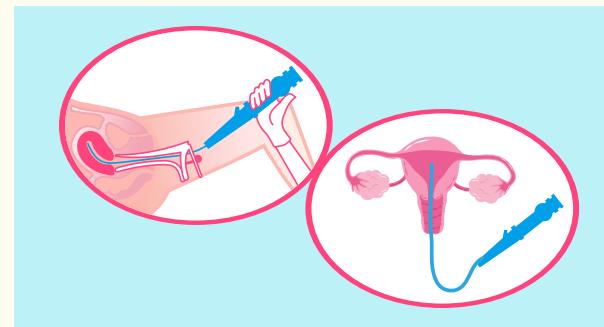
- Bleeding between periods
- Abnormal vaginal discharge which may be watery, blood-tinged or brownish and foul smelling
- Pelvic pain
- An enlarged pelvic mass
- Unexpected weight loss
- Pain during sexual intercourse, bleeding after sexual intercourse

Diagnosis

Clinical examination: Your doctor will ask about symptoms, risk factors, family history and perform a physical and pelvic examination

Ultrasound: Ultrasound scans use high-frequency sound waves to create images of the gynaecological organs. A wand-like device called a transducer is inserted into your vagina. Your doctor will see if there is any mass in the uterus, and assess the thickness of the endometrium.

Hysteroscopy: This involves the insertion of a small thin, lighted tube through the vagina and cervix into your uterus. This allows the doctor to examine the cervix, the inside and the lining of the uterus.



Endometrial biopsy: This involves removing tissue from the uterine lining for analysis. This can be done in your doctor's office. If insufficient tissue is obtained, a small procedure called dilatation and curettage (D&C) will be recommended. In this procedure, the uterine lining tissue is scraped and sent for analysis. This is usually done in an outpatient setting.

Staging

Staging is a term that describes how far cancer has spread. After the diagnosis of endometrial cancer is established, your doctor will need to assess the extent of cancer which include blood tests and scans to determine the extent of the disease. The scans may include CT (computed tomography) scan or PET (positron emission tomography) scan.

Stages of endometrial cancer include:

- **Stage I:** Cancer is confined inside the uterus.
- **Stage II:** Cancer has extended from the uterus to the cervix.
- **Stage III:** Cancer has extended beyond the uterus but has not involved the rectum and bladder. It has also involved the pelvic lymph nodes.
- **Stage IV:** Cancer has spread beyond the pelvic region and extended to other organs such as the bowel or bladder, or has spread to other organs such as the distant lymph nodes, liver, lung and bones.

The lower the stage at diagnosis, the higher the chance of cure and long term survival.

Treatment

Endometrial cancer is treated with surgery, radiation therapy, chemotherapy, hormonal therapy, targeted therapy and immunotherapy. Depending on the stage and type of the cancer, you may need more than one type of treatment.

Surgery

Surgery is often performed for early endometrial cancer. The extent of surgery is dependant on the stage of presentation.

Radiotherapy

Radiation therapy is the use of high energy X-rays or radiation to kill cancer cells.

Chemotherapy

Chemotherapy are medicines which are either injected or taken orally to treat cancers. They enter the bloodstream and work by interfering with the ability of cancer cells to grow and divide. In endometrial cancer, chemotherapy can be given before or after surgery to treat cancer that has not spread to distant organs. It is also used in treating cancer which has spread to other organs or tissues.