

What types of treatment are available?

Current treatment of esophageal cancer typically involves chemotherapy, radiation therapy, and surgery. Treatment choices depend on the stage and location of the tumor. Radiation and/or chemotherapy may be given before or after the surgery. If surgery is not possible, the cancer may be treated with chemotherapy and radiation or radiation alone.

I'm afraid of chemotherapy. Should I even try it?

Your oncologist is the best source of information about side effects. Everyone is an individual and has a different reaction to treatments. Many people continue to lead active lives while on chemo, thanks to drugs that may be prescribed to counter some of the side effects.

What will it be like?

There are many different types of chemo drugs. Some take many hours to administer, some only a few moments. Some are in pill form, some are given by continuous infusion. Most cancer centers have a chemo treatment area with comfortable chairs, TV, and even computers and CD players. It is best to have someone go with you to your treatment. Your companion will be able to get drinks for you and bring back food if you prefer restaurant take-out to hospital food. Although most people feel fine right after chemo, you may also want your companion to drive.

The information contained here was originally compiled by Steve Preston, a long-term survivor of EC, and Carol Preston and Judie Noonan, caregivers.

The ECAA hopes that this information will help you generate questions for your doctor and facilitate communication.

How does the doctor know if my treatment is working?

Most patients undergo frequent blood tests. These tell your oncologist if your red blood cells, white blood cells, and platelets are becoming dangerously low. Test that measure substances in the blood called tumor markers may be done, although for EC, tumor markers are not as helpful as they are for other cancers such as colon cancer. If the levels of a marker go up or down, they may be reflecting how the tumor is responding to treatment. In addition to blood test, most doctors order periodic CT scans; a type of imaging test which gives the doctor a picture of the tumor. The doctor who reads the scan can measure the size of the tumor to assess whether it is shrinking.

I'd like to talk to other people who have, or have had, the disease.

There is a very active online community of EC patients, survivors, and caregivers. To find out more, go to:

<http://listserv.acor.org/archives/ec-group.html>

You can always get help and advice from our members, go to:

www.ecaware.org

Your doctor or the support staff at your cancer center may know of patients or survivors locally who are willing to talk to you.



I Have Esophageal Cancer

What Do I Do Now?



Advice from the Esophageal Cancer Awareness Association (ECAA)

www.ecaware.org

Phone: 1-866-370-3222



My doctor told me I have cancer

What do I do now?

First of all, seek a second opinion. Sometimes you feel that you should not question your doctor, but diagnosis of this disease and decisions on its treatment are complex. Before you start treatment, have another doctor review the diagnosis and the treatment plan. Most doctors welcome a second opinion and will encourage you and assist you to obtain one. Most insurance carriers will pay for a second opinion.

How do I get a second opinion?

Gastric and esophageal cancers are not as common as other cancers. Therefore it is important to contact a major cancer center for an opinion. Finding a doctor with experience in this type of cancer is vital. You may be assigned a team of doctors that include an oncologist, a surgeon, a gastroenterologist, and a radiation oncologist. They will examine you, review your records, perform tests, and make recommendations about your case.

I can't remember what the doctor said to me.

It's important to take a family member or friend with you to all appointments to listen to what is being said. Ask that person to take notes so you can refer to them later. It is wise to take a list of your questions with you as well. It is understandable that you are upset and fearful with this news. Having someone with you will help.

What will I need?

Keep copies of your medical records, including all test results, copies of x-rays, and copies of scans. Having your own copies will make certain that the records are available for the second opinion.

What is squamous cell carcinoma?

Squamous cell carcinoma is a type of tumor comprising flattened cells that look like the cells from the surface of the skin or the lining of the mouth. This type of carcinoma is most commonly found in the upper or middle part of the esophagus.

What is adenocarcinoma?

Adenocarcinoma is a type of tumor comprising cells that look like the cells found in glands in internal organs, such as salivary glands or the pancreas. This type of carcinoma is most commonly found in the lower part of the esophagus.

Squamous cell and adenocarcinoma are the two most common types of esophageal cancer, but other types exist. The type of tumor often plays a role in the choice of treatment.

The doctor said I need a "port." What is that?

A portacath or port is a device implanted in your chest close to your shoulder and directly connected to a blood vessel. The port allows direct access to the bloodstream so that chemo can be administered there, avoiding damage to the veins in your arms. Installing the port requires minor surgery and it is painless once installed.

What is a Stage?

There are generally four stages of cancer. For EC:

Stage 1: The cancer is confined to the inside layer of the esophagus and has not spread even to local lymph nodes.

Stage 2: The cancer has extended deeper into the wall of the esophagus and may be found in local lymph nodes.

Stage 3: The cancer has extended deeper into the wall of the esophagus is found in local lymph nodes.

Stage 4: The cancer has spread to more distant lymph nodes or to other organs such as the liver or lung.

Please note that this is a very generalized description of staging – for more detail refer to our web site www.ecaware.org

This is an informational brochure provided by the ECAA. It not meant to provide medical advice or take the place of medical opinion.

Talk to your doctor. Good communication between doctor and patient is one of the most powerful weapons against this disease.