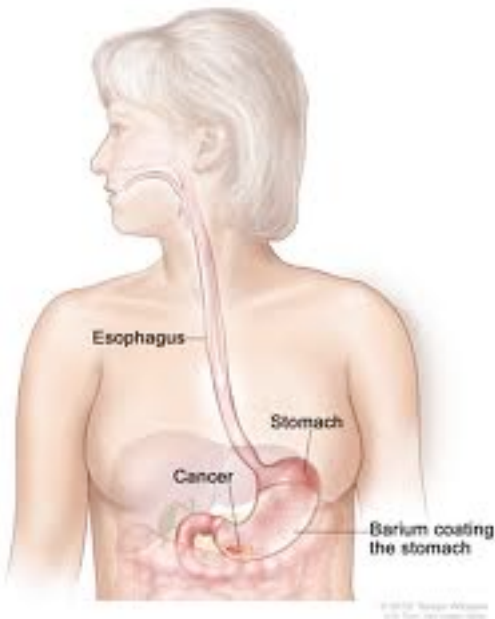


Treating Cancers of the Upper Gastrointestinal Tract

FACTS ABOUT ESOPHAGEAL AND STOMACH CANCERS

- In 2012, approximately 16,980 Americans will be diagnosed with esophageal cancer. Another 21,520 men and women will be diagnosed with stomach cancer.
- Risk factors vary for each site and may include age, gender, family history, diet, activity level, alcohol consumption and tobacco use. Talk to your doctor about understanding your risk factors.
- Screening is not generally recommended for these types of cancers. However, individuals with a history of Barrett's esophagus may have endoscopic exams with biopsies for screening.



TREATING ESOPHAGEAL AND STOMACH CANCERS

Radiation therapy is often used in

conjunction with surgery and chemotherapy to treat esophageal and stomach cancers.

- Often, the primary treatment for stomach cancer, also called gastric cancer, is surgery. The need for surgery varies based on the extent and the stage of the disease at the time of diagnosis. Radiation and chemotherapy are often used after surgery for gastric cancer, depending on the location and stage of your cancer.
- Esophageal cancer can be treated either by surgery or by combining radiation with chemotherapy. Sometimes, radiation and/or chemotherapy is given before surgery for esophageal cancer.
- Radiation may also be used, with or without chemotherapy, to relieve pain in more advanced disease.

UNDERSTANDING RADIATION THERAPY

- Radiation therapy, sometimes called **radiotherapy**, is the careful use of radiation to treat cancer safely and effectively.
- Cancer doctors called **radiation oncologists** use radiation therapy to cure cancer, control cancer growth, or relieve symptoms such as pain or bleeding.
- Radiation therapy works within cancer cells by damaging their ability to multiply. When these cells die, the body naturally eliminates them.
- Healthy cells are also affected by radiation, but they can repair themselves in ways cancer cells cannot.

Treating Cancers of the Upper Gastrointestinal Tract

EXTERNAL BEAM RADIATION THERAPY

External beam radiation therapy involves a series of daily outpatient treatments that accurately deliver radiation to the area needing therapy. The radiation beam usually comes from a machine called a linear accelerator.

- Before beginning treatment, you will be scheduled for a **simulation** to map out the area to be treated. This will involve having X-rays and/or a CT scan. Landmarks placed on your skin (often tiny tattoos) allow the radiation therapists delivering your treatments to precisely position you each day.
- To minimize side effects, the treatments are given gradually over about five to six weeks, five days a week (Monday through Friday). This allows your doctors to get enough radiation into your body to kill the tumor cells while giving healthy cells time to recover each day.
- Technical terms that may be mentioned for cancer treatments include **three dimensional conformal radiation therapy (3-D CRT)**, **intensity modulated radiation therapy (IMRT)** or **image guided radiation therapy (IGRT)**. Your radiation oncologist can provide more information about these different techniques.

POSSIBLE SIDE EFFECTS

Side effects of radiation therapy are limited to the area being treated. Side effects are not the same for all patients. Talk with your doctor and treatment team about any new symptoms or side effects you may experience during

treatment.

- Radiation therapy to the abdomen may cause an upset stomach, more frequent bowel movements, occasionally with diarrhea or abdominal cramping, or a sensation of bloating.
- Patients receiving treatment to the esophagus may experience difficulty or pain with swallowing.
- Patients may experience fatigue and a decreased appetite.
- Skin irritation may occur, including redness, tanning or dryness. Talk with your doctor or nurse about taking care of your skin during treatment.
- It is likely you will receive chemotherapy in addition to radiation therapy. The side effects from the chemotherapy will depend on the drugs being prescribed and how often you are to receive them. Ask your medical oncologist about chemotherapy side effects you may experience.
- Treatment side effects can often be controlled with medications or changes in your diet. Tell your doctor or nurse if you experience any of them, so they can assist you with the symptoms you are experiencing.

Completing treatment and recovery can be challenging. Seek out help from support groups and friends ahead of time. If you have a support network in place before and during treatment, it will be easier to get through side effects since people you can count on will be around to help you. If you need additional support, let your doctor and nurse know.