

GYNAECOLOGICAL CANCER

THE TRAUMA OF TERMINOLOGY

GYNAECOLOGICAL CANCER WHAT ARE THEY TALKING ABOUT??

- **CANCER – ABNORMAL MITOSIS (CELL DIVISION) OUTWITH NORMAL HOMEOSTATIC CONTROL WITH INVASION OF ADJACENT TISSUES (CELL-TISSUE-ORGAN)**
- **CARCINOMA – EPITHELIAL MALIGNANCY**
- **SARCOMA – CONNECTIVE TISSUE MALIGNANCY**
- **(THE SUFFIX 'OMA' IMPLIES A BENIGN PROCESS)**
- **TUMOUR = 'LUMP' OR MASS**
- **ULCER = BREAK IN THE EPITHELIUM (SKIN)**
- **NEOPLASIA = 'NEW GROWTH'**
- **POLYP = 'LUMP ON A STALK'**

GYNAECOLOGICAL CANCER DIAGNOSIS

- SYMPTOMS AND SIGNS
- Vulva: Abnormal lesion – ulcer, mass
- Cervix: Abnormal bleeding/discharge. Lesion – Ulcer, polyp, mass. Biopsy (from colposcopy clinic)
- Endometrium/uterus: Post menopausal bleeding, discharge, thickened endometrium
- Ovary: Abdominal distension, mass, ascites, GI symptoms. Complex ovarian cyst on ultrasound, raised CA 125

GYNAECOLOGICAL CANCER DIAGNOSIS

- INVESTIGATIONS
- Haematology – tumour markers
- Radiology – ultrasound, CT, MRI
- Cytology – ascites, washings, cyst aspirates (immunocytochemistry)
- Histology – Core/trucut biopsies, laparoscopic or open biopsies, excision biopsies

GYNAECOLOGICAL CANCER STAGING

- Vulva – Surgical staging, size of lesion, regional lymph node involvement
- Cervix – Pre-operative staging: EUA & MRI. Size of lesion, local extension of disease. Lymph node & distant metastases (PET CT scan)
- Endometrium – Surgical. Myometrial invasion, peritoneal washings, extra-uterine disease
- Ovary – Surgical + radiological + pathological. Pelvic, abdominal and extra-abdominal.

GYNAECOLOGICAL CANCER TREATMENT

- SURGERY - Curative or palliative, staging.
- Wide local excision
- Regional lymph node dissection - sampling/lymphadenectomy
- Resection margins
- Cytoreductive surgery

GYNAECOLOGICAL CANCER TREATMENT

- **RADIOTHERAPY** – External beam or brachytherapy
- Curative or palliative (radical radiotherapy)
- Fractionated dosage
- Brachytherapy – Cervical cancer, implants, needles, wires.
- Mode of action & side effects

GYNAECOLOGICAL CANCER TREATMENT

- **CHEMOTHERAPY**
- Cytotoxic chemotherapy, cell cycle
- Treatment cycles (usually 6 courses)
- Combination chemotherapy
- Side effects – N&V, D&V, alopecia, bone marrow suppression (anaemia, thrombocytopaenia, immunosuppression)
- Neutropaenic sepsis, the Nadir

GYNAECOLOGICAL CANCER OUTCOMES

- REMISSION – ABSENCE OF DISEASE AFTER TREATMENT (COMPLETE RESPONSE)
- RECURRENCE – NEW DISEASE AFTER A PERIOD OF REMISSION
- PERSISTENT DISEASE – PRESENCE OF DISEASE AFTER TREATMENT
- PARTIAL RESPONSE – REDUCTION IN DISEASE VOLUME
- PROGRESSIVE DISEASE – DISEASE PROGRESSION DESPITE TREATMENT
- MIXED RESPONSE – COMBINATION OF PARTIAL RESPONSE AND PROGRESSIVE DISEASE

GYNAECOLOGICAL CANCER PALLIATIVE CARE

- PAIN – ANALGESIA, NERVE BLOCK, RADIOTHERAPY
- NAUSEA & VOMITING – ANTI-EMETIC DRUGS
- WEIGHT LOSS/APPETITE SUPPRESSION – DIETETICS, STEROIDS, ENTERAL FEEDING
- CONSTIPATION – LAXATIVES, FLUIDS, ENEMATA
- BLEEDING – HORMONE THERAPY, CAUTERY, RADIOTHERAPY, INTERVENTIONAL RADIOLOGY
- INTESTINAL OBSTRUCTION – MEDICAL OR SURGICAL MANAGEMENT
- PRESSURE EFFECT OF METASTASES – RADIOTHERAPY
- PSYCHOLOGICAL AND SPIRITUAL SUPPORT