Following diagnosis of stomach (gastric) or oesophageal (gullet) cancer

Introduction

Your consultant will have explained to you that you have a cancer of the Upper Gastro-Intestinal tract (Upper G.I) affecting either your stomach or oesophagus (gullet). Being told you have cancer is naturally a shock to you and your family. During this time you may experience a wide range of emotions and may find it difficult to remember all you are told. The following written information is provided as a guide to what may happen, however your Consultant will discuss your individual treatment plan with you.

This leaflet will provide information about investigations you may have, treatments or procedures that may be recommended and what to expect next. Contact information for individuals who may be involved in your care are also included in this leaflet.
Investigations

Various investigations may be required to assess the extent (stage) of your cancer and your fitness levels to help plan the appropriate treatment for you. Details of the various investigations can be found below.

**Endoscopy**

A flexible tube with a camera is passed through the mouth, down the oesophagus into the stomach. Before this happens, a throat spray (local anaesthetic) is used to numb the back of the throat and sometimes sedation can also be given. Please note that you will need someone to take you home and stay with you that evening if you do have sedation. If there are any abnormal areas seen during the procedure, the Doctor will take a biopsy (tissue sample). The biopsy will be sent to the laboratory for examination and the results can take 1 to 2 weeks to come through.

Occasionally, the endoscopy and biopsies need to be repeated.

**Computerised Tomography (CT Scan)**

A detailed scan of your chest & abdomen will be performed in our Imaging (X-ray) department. You may be asked to drink some dye (contrast) before the procedure and also have an injection of dye whilst lying on the X-ray bed. The dye will enhance the scan images.

**Abdominal laparoscopy**

A short keyhole operation performed in theatre under general anaesthetic (GA). This involves a couple of small incisions being made in the abdomen so that a thin instrument with a camera can be passed inside the abdomen to examine the area of cancer and nearby structures. Occasionally, further biopsies are taken during this procedure. The abdominal laparoscopy is usually done as a day case procedure or may involve an overnight stay. You may feel sore for a couple of days following this procedure.

**Endoscopic Ultrasound Scan (EUS)**

This is similar to the endoscopy you have already had, however, the endoscope has an ultrasound probe attached to it. This allows an internal scan of your oesophagus to be performed, which can also assess the surrounding lymph nodes (glands).
PET SCAN (Positron emission tomography)
This is another type of scan used to assess the extent (stage) of cancer. A radioactive sugary substance is given to you via an injection. This substance is taken up by the area / areas of cancer and will light up on the scan images highlighting cancer activity.

You will need to travel to Cobalt imaging centre in Cheltenham to have this done (contact details can be found at the end of this leaflet in Further information section).

ECHO (Echocardiogram)
An ultrasound scan of the heart which gives information about how well your heart is working.

Pulmonary Function Test
A test of the lungs which gives information about how well your lungs are working. Occasionally, further investigations will be required such as, MRI scans, Ultrasound scan (USS), Bone scan or further biopsies. These will be discussed with you.

Following your investigations, the results will be discussed at the multi-disciplinary team meeting (MDT) which takes place every Thursday. This meeting is attended by surgeons, oncologists, physicians, pathologists, radiologists, specialist nurses, dietician, trials nurse and palliative care. The team will review your results and make a management plan on how to best treat / support your individual needs.

Treatments and procedures
The treatment/procedure recommended for you will depend on the location, size, type of cancer, whether it has spread to other parts of the body (secondary cancer/metastases) and also your general level of fitness. Your treatment may involve one or a combination of the following:

Chemotherapy
The use of anti-cancer (cytotoxic) drugs to destroy cancer cells. It may be used before surgery (neoadjuvant) to reduce the size of the cancer, after surgery (adjuvant) to reduce the risks of your cancer coming back or when surgery is not appropriate. Chemotherapy is usually given during an out-patient appointment, allowing you to go home the same day, although occasionally you may need to stay overnight. Chemotherapy is likely to be given into a vein (intravenously) and/or in tablet form.
You will be given written information about the chemotherapy planned for you once you have seen the Oncologist. An appointment will be made for you to meet the chemotherapy nurses who will give you additional information prior to starting treatment and to answer any further questions you may have.

You will be reviewed regularly with your Oncologist throughout your chemotherapy and have access to a 24 hour telephone helpline (telephone number can be found at the end of this leaflet).

**Radiotherapy**
The use of high energy rays to destroy cancer cells directed at specific areas of your body while doing as little harm as possible to normal cells. Radiotherapy can be given to shrink the tumour, improve symptoms and reduce or stop bleeding related to stomach cancers.

You will need a radiotherapy planning CT scan prior to starting your treatment where tiny marks (tattoos) will be placed on your skin to mark where the treatment needs to be directed, this can be a little uncomfortable.

If the cancer is in the upper part of your oesophagus, a mask (shell) may be made for you to wear to help ensure the right area is treated.

Treatment usually runs on consecutive week days through the length of your treatment for the recommended duration as discussed with the Oncologist. Each treatment lasts approximately 10 to 15 minutes.

**Surgery**
If your investigations indicate that it is possible to remove your cancer and that you are fit enough, then surgery will be discussed with you. The majority of patients will have chemotherapy prior to their surgery unless the investigations you had indicate very early stage cancer.

The Upper GI surgery is a major operation that is likely to require you to be in hospital between 8 to 14 days dependant on what type of surgery you are having. Your surgeon will discuss this with you and you will be given written information about your operation.

You will be encouraged to maintain your fitness levels and nutrition to the best of your ability. If you smoke, we would recommend that you stop. This is to help reduce your risks of complications following your operation. If you need help with this, please speak to the team looking after you.
Endoscopic resection (ER)
An endoscopic procedure performed using throat spray as a local anaesthetic and sedation. Instruments are passed down the endoscope and a deeper level of your oesophagus or stomach lining can be removed. This procedure is used to remove pre-cancer cells (dysplasia) & very early stage cancers only.

Radiofrequency Ablation (RFA)
An endoscopic procedure performed using throat spray as a local anaesthetic and sedation. An endoscope is passed down the oesophagus & heat energy is used to burn away the superficial abnormal (dysplastic) cells of your oesophagus to prevent the development of cancer cells.

Oesophageal stent
A stent is a hollow tube that can be placed in the oesophagus if you have swallowing difficulties to allow foods and liquids to pass through. The stent is inserted in to the oesophagus endoscopically and would require you to stay in hospital overnight. A dietician will meet with you to give dietary advice.

Dilatation
An endoscopic procedure performed with a local anaesthetic throat spray and sedation where the oesophagus can be stretched (dilated) to allow you to swallow more easily. This procedure is usually performed as a day case, though it is advised that you have an adult with you for the first night afterwards.

Supportive Care
The focus of supportive care is to improve your quality of life, addressing any issues you have with regard to symptoms, physical, psychological and social needs with the specialist input of community services.

What happens next?
Following completion of your treatment, you will have regular follow ups with your Surgeon or Oncologist, or both.
If you have any concerns in between your appointments, you should contact your keyworker (telephone number can be found at the end of this leaflet) or your own GP.
Nutrition

Your cancer or treatment is likely to cause some changes to your appetite and eating habits. You may have swallowing difficulties, a loss of appetite, weight loss, nausea and taste changes.

It is important to keep yourself as strong as possible to help you cope with any treatments you may have. Your Consultant, nurse specialist or GP can give you some advice, and you can also be referred to a dietician for specialist input if appropriate.

Some people find it helpful to reduce the portion sizes of their meals and increase the frequency of eating, such as having 3 small meals per day with 3 snacks in between their meals. The use of high calorie options can help prevent further weight loss, such as using full fat milk, cheese, chocolate, ice-cream and puddings etc. If swallowing is difficult, you will need to adapt your diet to soft or pureed foods. Nutrition supplements drinks are also available on prescription from either your GP or Consultant.

The use of medications to help with pain, nausea and acid reflux/indigestion can also be helpful.

Contact information

Surgeons
Mr Dwerryhouse Tel: 0300 422 6220
Mr Vipond Tel: 0300 422 6675
Mr Hewin Tel: 0300 422 6675
Mr Higgs Tel: 0300 422 4921
Professor Barr Tel: 0300 422 6679
Mr Wadley Tel: 0300 422 6679
Mr Goodman Tel: 0300 422 3417

Oncologists
Dr Elyan Tel: 0300 422 4017
Dr Candish Tel: 0300 422 4925
Dr Reed Tel: 0300 422 4925

Nurse Specialists
Gaynor Jones Tel: 0300 422 6674
Kelly Weir Tel: 0300 422 6222
Susan Hepplewhite Tel: 0300 422 3586
Dietician
Jennie Dawson Tel: 0300 422 6152
Fiona Brown Tel: 0300 422 4094

Clinical Trials Nurses
Tel: 0300 422 6886

Chemotherapy Helpline
Tel: 0300 422 3444

Further information

Car Parking
Patients attending Cheltenham Oncology Unit for treatment are entitled to free parking for the duration of the treatment. A parking permit will be given to you when you meet the chemotherapy nurse before starting your treatment. Reduced parking fees in Gloucester and Cheltenham Hospitals are considered in individual cases where:

- The patient has been in hospital for 14 days or more
- The patient has been in Department of Critical Care for 3 days or more
- After being in hospital for 3 days with a palliative (not curable) condition
- An out-patient with multiple appointments in 1 week.

Parking forms are available from the hospital ward, which have to be signed by the nurse in charge on the ward and the completed form taken to the parking shop which is situated at:

- Gloucester Royal Hospital, ground floor of multi-storey
  Open Monday to Friday (9:00am to 8:30pm) and Saturday
  (9:00am to 12:30pm). The Parking shop is closed on Sundays.
- Cheltenham General Hospital, Sandford Road
  Open Monday to Sunday (9:00am to 5:00pm).

Prescription Charges
You are entitled to free prescriptions if you have been diagnosed with cancer. A FP92A form needs to be completed which you can get from your hospital pharmacy and some GP surgeries.

This form must be signed by your GP or Consultant and sent to the address on the form. You should receive your exemption card within 2 weeks of receipt.
**Cobalt Imaging centre**
Linton House, Thirlestaine Road, Cheltenham, Glos, GL53 7AS
Tel: 01242 535 910 (Option 2)
Website: [www.cobalthealth.co.uk/diagnosticscans/patient-info/petct.aspx](http://www.cobalthealth.co.uk/diagnosticscans/patient-info/petct.aspx)

**Oesophageal Patients Association**
Former patients helping new patients. The group aims to help new patients and families cope with difficulties arising as a result of treatment, providing support and encouragement.

22 Vulcan House, Vulcan Road, Solihull, West Midlands, B91 2YJ

Helpline Tel: 0121 704 9860
Monday to Friday, 9:00am to 7:00pm
E-mail: [enquiries@opa.org.uk](mailto:enquiries@opa.org.uk)
Website: [www.opa.org.uk](http://www.opa.org.uk)

**Benefit Advice**
Having a cancer diagnosis can be expensive through a loss of income and additional travelling cost etc. There are a range of benefits available for people with cancer, and you are advised to contact a benefits adviser to see if you are eligible and to help with claims. This is a free, confidential service.

**Civica Welfare Benefits Surgery**
Health Information Room, The Atrium, Gloucester Royal Hospital

Every Wednesday, 10:00am to 1:00pm
Tel: 01452 396 979 or 01452 396 971

**An appointment is needed**

**Maggies**
A walk in centre which offers support, advice and information for anyone affected by cancer, all in a very peaceful, relaxed atmosphere. No appointment or referral needed. Refreshments are provided, free of charge. Situated close to Cheltenham Oncology Centre, The Lodge, Cheltenham General Hospital, College Baths Road, Cheltenham, GL53 7QB.

Tel: 01242 250 611
E-mail: [cheltenham@maggiescentres.org](mailto:cheltenham@maggiescentres.org)
Website: [www.maggiescentres.org](http://www.maggiescentres.org)
Citizens Advice Bureau
Gloucester & Tewkesbury
Tel: 01452 527 202
Stroud
Tel: 01453 759 954
Website: www.adviceguide.org.uk

Hospices
The word hospice conjures up many different thoughts. Modern hospice care is about helping people to live well throughout their illness and not about just supporting people at the end of life. The staff aim to meet the needs of the patients, their families and carers with the support and expertise of their multi-professional team, working in partnership with community care teams to support people at home, day centre facilities and some providing in-patient stay. There is a wide range of services to support physical, emotional, social and spiritual needs. Also available are a range of creative and complimentary therapies such as: reflexology, massage, acupuncture and aromatherapy.

Sue Ryder Hospice
Leckhampton Court, Church Road, Leckhampton,
Cheltenham, GL53 0QJ
Tel: 01242 230 199
Website: www.sueryder.org

Cotswold Care Hospice
Burleigh Lane, Minchinhampton, Gloucestershire, GL5 2PQ
Tel: 01453 886 868
E-mail- info@cotswoldcare.org.uk
Website: www.cotswoldcare.org.uk

Great Oaks – Dean Forest Hospice
The Gorse, Coleford, Gloucestershire, GL16 8QE
Tel: 01594 811 910
E-mail: clerical@great-oaks.org.uk
Website: www.great-oaks.org.uk

There are a range of community support services available and referrals can be made to support your day to day living for a range of issues, such as improving symptoms, provision of equipment or aids and financial advice.

Please discuss concerns with the team involved in your care or your GP so the appropriate referrals can be made.
FOCUS Cancer information & Support Centre
Within Cheltenham Oncology Centre,
Open Monday to Friday, 10:00am to 5:00pm
Tel: 0300 422 4414

Health Information Room
Reception Area, Gloucestershire Royal Hospital
Tel: 0300 422 8234

Macmillan Cancer Line
Freephone Tel: 0808 800 0000
Monday to Friday, 9:00am to 8:00pm
Website: www.macmillan.org.uk

Cancer Research UK
Tel: 0207 242 0200
Website: www.cancerresearchuk.org

Carers Gloucestershire
Tel: 01452 386283
Website: www.carersgloucestershire.org.uk