UTERINE CANCER

SYMPTOMS TO TELL YOUR DOCTOR

- Abnormal vaginal bleeding, spotting or discharge
- Vaginal bleeding after menopause
- Pain or difficulty when emptying the bladder
- Pain during sex
- Pain in pelvic area

WHAT YOU SHOULD KNOW

The uterus (or womb), part of a woman’s reproductive system, is a hollow organ where a baby grows during pregnancy. Endometrial cancer, which begins in the lining of the uterus, is a type of uterine cancer.

ARE YOU AT RISK?

Women with these risk factors may be more likely to develop uterine cancer:

- Abnormal overgrowth of the uterine lining. Also called endometrial hyperplasia, this condition may cause heavy menstrual periods, bleeding between periods and bleeding after menopause. Hyperplasia is not cancer, but can sometimes develop into cancer.
- Obesity
- High blood pressure
- Diabetes
- Reproductive and menstrual history, if any of the following apply:
  - Never had children
  - First menstrual period before age 12
  - Menopause after age 55
- History of taking estrogen alone (without progesterone) for menopausal hormone therapy
- History of taking tamoxifen, a drug prescribed to treat or prevent breast cancer
- History of radiation therapy to the pelvis
- Family history of uterine cancer, such as a mother, sister or daughter with the disease
- Family or personal history of Lynch syndrome, a genetic condition that increases risk for multiple cancer types, including uterine and colorectal cancer

Endometrial cancer is HIGHLY CURABLE.

The majority of patients are diagnosed with early stage disease, which has a five-year survival rate of more than 97%.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Median age of diagnosis.

62 years old

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.

Endometrial cancer is most frequently diagnosed among women age 55-64.
WHY ROSWELL PARK FOR UTERINE CANCER?

✅ **We set the standards.** Our experts serve on boards of the National Comprehensive Cancer Network (NCCN) that create the guidelines that specify the best way to prevent, detect and treat specific types of cancer. Roswell Park’s Peter Frederick, MD, FACOG, Director of Minimally Invasive Surgery, serves on the NCCN Uterine Cancer guidelines panel.

✅ **Nationally recognized.** Roswell Park is a National Cancer Institute-designated Comprehensive Cancer Center, the only one in the state outside of New York City.

✅ **A multidisciplinary care approach** by our team of board-certified gynecologic and radiation oncologists with a focus on optimal survival and quality of life for patients with all types and stages of gynecologic cancer.

✅ **Treatment options unavailable elsewhere,** such as photodynamic therapy, regional chemotherapy, immunotherapy and clinical trials.

✅ **Holistic and comprehensive supportive care** to focus on you, not just your cancer. Services including music, art and pet therapy, acupuncture, massage, spiritual care, patient retreats, support groups, and more.

---

African American women have higher mortality from endometrial cancer. Several factors may play a role — being diagnosed at a later stage, having other medical problems, disparities in treatment and genetic differences that are related to more aggressive tumors.

---

REDUCE YOUR RISK

The following are considered protective factors that reduce risk for uterine cancer:

- Pregnancy and breastfeeding
- Taking oral contraceptives
- Being physically active
- Eating a balanced diet

---

MEET OUR DOCTORS

1. Stacey Akers, MD, FACOG
   Gynecologic Oncology

2. Peter Frederick, MD, FACOG
   Director, Minimally Invasive Surgery, Gynecologic Oncology

3. Shashikant Lele, MD, FACOG
   Clinical Chief, Gynecologic Oncology

4. Katherine Mager, MD
   Gynecologic Oncology

5. David Mattson, Jr., MD
   Director, GYN Radiation

6. Adekunle Odunsi, MD, PhD, FRCOG, FACOG
   Deputy Director
   Chair, Gynecologic Oncology
   Director, Center for Immunotherapy

7. Emese Zsiros, MD, PhD, FACOG
   Gynecologic Oncology

---

GET A 2nd OPINION

If you have a cancer diagnosis, you need a second opinion. We can arrange for our gynecologic oncologists to review your scans and pathology and schedule a consultation.

Why it matters — in about 10% of cases we review, the diagnosis is changed, impacting your treatment options, decisions and the way forward.