

ESOPHAGEAL CANCER Info Sheet



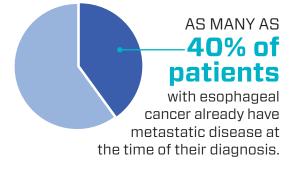
THAN WOMEN TO DEVELOP ESOPHAGEAL CANCER



more likely than nonsmokers to develop esophageal cancer

QUIT SMOKING? YES, YOU CAN!

Call the New York State
Quitline at **1-866-NY-QUITS**(1-866-697-8487) or visit
www.nysmokefree.com for
guidance, support and cessation aids.



WHAT YOU SHOULD KNOW

Part of your digestive system, your esophagus is the 9- to 10-inch tube that food and liquids move through from your mouth to your stomach. Esophageal cancer usually begins in the cells of the lining of the esophagus and can spread outward as it grows. Two main types of esophageal cancer include:

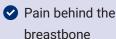
- Squamous cell carcinoma which typically begins in the middle or upper part of the esophagus
- Adenocarcinoma which usually begins at the bottom of the esophagus, near the stomach

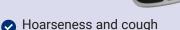
SYMPTOMS TO TELL YOUR DOCTOR

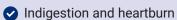


Painful or difficulty swallowing

Weight loss









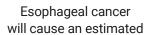
22,070

NEW CASES diagnosed every year



MEDIAN AGE of diagnosis:

69



16,256 deaths this year











AM I AT RISK? The following factors may increase your chance for developing esophageal cancer:

- Older age. Most people are over age 65 at diagnosis.
- Being male. Men have a greater risk than women.
- Smoking and other tobacco use doubles the risk.
- Heavy alcohol use, more than 2 drinks per day for men and 1 per day for women.
- Unhealthy lifestyle, including eating a poor diet and being overweight or obese.
- Chronic acid reflux, or gastroesophageal reflux disease (GERD) that damages the esophagus.
- ✓ Infection with human papillomavirus (HPV).

- ☑ Barrett's esophagus, a condition where the cells that line the lower part of the esophagus become damaged, usually by long-term acid reflux. This condition is a greater risk factor for esophageal cancer than acid reflux alone.
- Personal history of cancer of the lung, mouth or throat.
- Having swallowed lye (a chemical found in some cleaning fluids).
- Other conditions, such as tylosis, a genetic disorder; or achalasia, where muscles at the lower end of the esophagus cannot relax properly.

About 1in 132 men will develop esophageal cancer About 1in 455 women will develop esophageal cancer

WHY ROSWELL PARK FOR ESOPHAGEAL CANCER?

- Nationally recognized. We are among a select group of comprehensive cancer centers designated by the National Cancer Institute and the state's only one outside of New York City.
- ✓ Multidisciplinary care by a team of gastroenterologists, surgical oncologists, thoracic surgeons, medical and radiation oncologists, interventional endoscopists, plus psychologists, dieticians, physical therapists and others to provide comprehensive and integrated care under one roof.
- ◆ A leader for minimally invasive surgery, including endoscopic, robotic and laparoscopic surgery, plus other options such as radiofrequency ablation, photodynamic therapy and coagulation procedures.
 We have the largest experience with minimally invasive surgery for esophageal cancer in New York State.
- Expert care for Barrett's esophagus. Our specialists offer advanced endoscopic treatment and management of this condition, considered a precursor for esophageal cancer.
- ▼ The latest treatments many available only through clinical trials are important options for people with esophageal cancer.

MEET OUR DOCTORS

Surgical Oncology

Moshim Kukar, MD, FACS
 Zachary Stiles, DO, MS

Thoracic Surgery

3. Todd Demmy, MD, MBA, FACS 4. Mark Hennon, MD, FACS 5. Patrick Seastedt, MD, MBA, FACS











Medical Oncology

- 6. Christos Fountzilas, MD, FACP
- 7. Anuradha Krishnamurthy, MBBS
- 8. Kannan Thanikachalam, MBBS

Gastroenterology, Endoscopy

9. Sehrish Jamot, MD









The Roswell Park Care Network offers our high-quality cancer care, closer to home. For a full list of our suburban locations, visit RoswellPark.org/locations.



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

WHY IT MATTERS

In about 11 to 18% of the cases we review, the diagnosis is changed, impacting your treatment options, decisions and the way forward.