

Uterine cancer

The uterus (womb) is part of the female reproductive system. It is shaped like an upside down pear and sits inside the pelvis. It is in the uterus that a fertilised egg grows into a baby.

Over 470 Victorian women are diagnosed with cancer of the uterus every year. Most of these women are over the age of 50 years. Cancer of the uterus is also known as cancer of the womb, uterine cancer, endometrial cancer and cancer of the lining of the womb.

Different types

Most cases of cancer of the uterus are cancers of the uterus lining (endometrium), though some cancers grow in the muscle layers of the uterus. The different types of uterine cancer include:

- **Adenocarcinoma of the endometrium** – around 85 per cent of women diagnosed with cancer of the uterus have this form. An adenocarcinoma is a cancer that starts in the glandular tissue.
- **High risk cancers** – less common types of cancer (such as adenosquamous carcinoma, papillary serous carcinoma and clear cell carcinoma) are more likely than others to spread around the body.
- **Endometrial hyperplasia** – sometimes women develop a thick uterus lining which can cause heavy periods. Some types of endometrial hyperplasia may later become precancerous.

Causes

The exact cause of cancer of the uterus is not known. Some things seem to put women at more risk including:

- Endometrial hyperplasia
- Menopause, never having children or being infertile
- Being overweight
- High blood pressure and diabetes
- A family history of endometrial, breast or bowel cancer
- Being on oestrogen hormone therapy without progesterone
- Being on tamoxifen or anastrozole for treatment of breast cancer. If you are either of these medications, you should discuss this risk with your doctor.
- Uterine cancer is not caused by sexual activity and cannot be passed on this way.

Remember, most women who have known risk factors do not get cancer of the uterus. Many women who do get cancer of the uterus have none of these risk factors.

Symptoms

The most common symptoms of uterine cancer are:

- Unusual bleeding
- Watery, bloody discharge from the vagina which can sometimes be smelly.

Less common symptoms include bloating and discomfort in the abdomen and pain during sex. If the cancer is very advanced, other symptoms may be present such as tiredness, loss of weight and constipation.

Unusual bleeding or discharge can happen before and after menopause. It is usually not due to cancer of the uterus. However, all women with unusual bleeding or discharge should see their doctor for a check-up.

Diagnosis

The tests used to diagnose cancer of the uterus include:

- **Physical examination** – to check the abdomen for swelling.
- **Transvaginal ultrasound** – allows the doctor to look at the size of the ovaries, uterus and thickness of the endometrium.
- **Biopsy** – removing some tissue so it can be looked at under a microscope. This can be done in several ways including having a dilatation and curettage (D&C).
- **X-rays and other scans** – such as computed tomography (CT) scan or magnetic resonance imaging (MRI).
- **Blood tests** – to check your general health and help make decisions about your treatment.

Treatment

Most cancers of the uterus are diagnosed early and treated before the cancer has spread. Treatment options include:

- **Surgery** – this is the first and most important treatment for almost all women with womb cancer. This means removing the uterus (hysterectomy), the fallopian tubes and/or the ovaries. If cancer has invaded the muscle walls of the uterus, the lymph nodes inside the pelvis and abdomen will be removed. If cancer has spread to the cervix (neck of the womb), a small part of the upper vagina and the cervix are also taken out.
- **Radiotherapy** – this might be external (using a machine to direct x-rays at the part of the body needing treatment) or internal, with a radioactive implant placed close to the cancer. It may be given alone or before or after surgery.
- **Hormone therapy** – since cancer of the uterus is sensitive to hormones, oestrogen-blocking drugs might be used as a treatment if the cancer comes back or has spread.
- **Chemotherapy** – involving anti-cancer drugs that kill cancer cells by stopping them from multiplying. This is sometimes given to help control advanced stage uterine cancers.

All treatments can have side effects. Your medical team will discuss these with you before you begin treatment.

Where to get help

- Your doctor
- Specialist gynaecologist
- The Cancer Council Victoria, Cancer Helpline Tel. 131 120
- Multilingual Cancer Information Line, Victoria - see the CCV website for contact details

Things to remember

- Cancer of the uterus (womb) is one of the most common gynaecological cancers in women.
- Cancer of the uterus lining (endometrium) is the most common form.
- Cancer of the uterus has a very high cure rate.

This page has been produced in consultation with, and approved by:

Cancer Council Victoria

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