



## DOCTOR DISCUSSION GUIDE

# Managing Esophageal Cancer

If you've been diagnosed with esophageal cancer, you and your doctor will need to work closely together to optimize your treatment and help you take control of your symptoms. Asking the right questions during your conversation will help you know what to expect and how to better navigate your condition. Familiarize yourself with these common terms before your appointment to help facilitate your discussion.

## Vocabulary to Know

Your doctor might mention these common terms. Here's what they mean.

<b>Barrett Esophagus</b>	A condition when cells in the lower esophagus become abnormal, which can later lead to esophageal cancer. It is typically caused by frequent or excessive gastric reflux (heartburn).
<b>Esophagoscopy</b>	To diagnose esophageal cancer, doctors often perform an esophagoscopy to look for tumors or other signs of cancer. This procedure is done by inserting an instrument called an esophagoscope—a long tube with a lens and light—in through the nose or mouth to help doctors see inside the esophagus. In some cases, samples of tissue are removed to be checked for cancerous or precancerous cells.
<b>Squamous Cell Carcinoma</b>	Also called epidermoid carcinoma, this type of esophageal cancer is when the cancer starts in the thin, flat cells that line the esophagus (or squamous cells).
<b>Adenocarcinoma</b>	A type of esophageal cancer where the cancer cells start in the glandular cells—the cells in the lining of the esophagus that make fluids like mucus. It usually shows up in the lower section of the esophagus, closer to the stomach.
<b>Endoscopic Mucosal Resection (EMR)</b>	For pre-cancer or very early-stage esophageal cancer, doctors sometimes perform an EMR (sometimes called just ER) instead of surgery. During this procedure, doctors remove the cancerous or precancerous cells using an endoscope—a tube-like device that has a light and lens to make it easier to see inside the esophagus. The endoscope has a small tool on the end to extract the affected areas.
<b>Esophagectomy</b>	An esophagectomy is when a portion of the esophagus is surgically removed to get rid of cancerous cells and nearby tissue. It is the most common way esophageal cancer is treated in the United States.
<b>Esophageal Stent</b>	Because larger tumors can cause a blockage in the esophagus, doctors will sometimes use a flexible tube (called an esophageal stent) to open up a pathway for food and liquids to pass through on their way to the stomach. This allows people with advanced esophageal cancers to still swallow.



## Questions to Ask

These questions will help start a conversation with your doctor about how to best manage your esophageal cancer.

### About Symptoms

- Are you sure my symptoms are being caused by esophageal cancer and not something else?
- What changes to my symptoms should I expect if the treatment isn't effective?

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### About Causes & Risk Factors

- Is there anything in my health history that made me more likely to get esophageal cancer?
- What changes can I make to my diet or lifestyle to reduce my chances of the esophageal cancer coming back after treatment?

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### About Diagnosis

- What were the results of the esophagoscopy? Can you help me understand what they mean?
- What stage is the esophageal cancer? How does that affect my treatment options or prognosis?

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### About Treatment

- Can the cancer be entirely removed by surgery? Why or why not? What does that mean for my prognosis?
- Would you recommend chemotherapy or chemoradiation to treat the esophageal cancer? If so, what are the pros and cons of the treatment?
- Can you recommend programs to help me quit drinking or smoking?
- What lifestyle or nutritional changes can I make to help the treatment be more effective?

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### About Coping

- In addition to treatment to kill or remove the cancer cells, would you also recommend nutritional support or other forms of palliative care?
- Would you be able to recommend any support groups specifically for people who have been diagnosed with esophageal cancer?

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