

Winning the War on Women's Cancer *Gynecologic Cancer Treatment*

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6 Week Course Agenda

- I. Introduction to Women's Cancers
- II. Genetics of Gynecologic Cancers
- III. Gynecologic Cancer Surgery
- IV. Gynecologic Cancer Prevention
- V. Gynecologic Cancer Treatment
- VI. Sexual Health & Survivorship

Treatment philosophies in Gynecologic Oncology

- Why
- What
- Who
- When
- Toolkit
- Risk vs harm

Why do we treat?



Why do we treat?

- Extend life
- Improve quality of life
- Maintain quality of life

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Why do we treat?

- To give Hope

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Why do we treat?



To give Hope

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Why do we treat?



Hope has different forms

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Why do we treat?



To find a safe harbor

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Why do we treat?



Hope for dignity and peace

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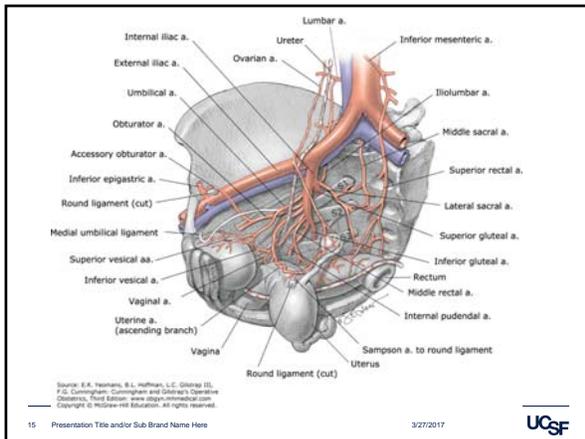


Guidance philosophy



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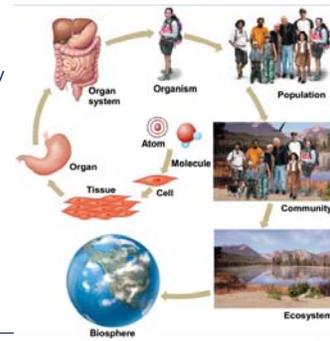
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Who/what do we treat?

▪ Ranges from DNA to the community



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What/who do we treat?

- DNA
- Cell
- Microenvironment
- Tissue
- Organ
- Person
- Family members
- Community



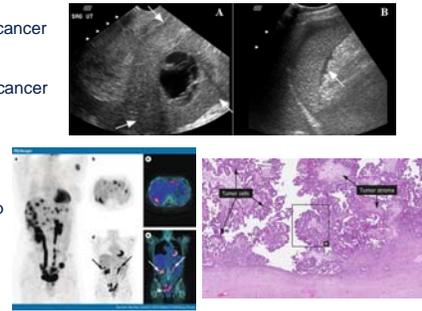
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When do we treat?

- Suspected cancer
- Diagnosed cancer
- Recurrence
- Palliation
- Survivorship



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Toolkit



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Toolkit

- Surgery
- Chemotherapy
- Radiation
- Biologics (including hormones)
 - Immune modulation
- Doctor/patient relationship
- Advocacy and education
- Research

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Risk vs Harm



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6 Broad Categories of Treatments

- I. Surgery (already discussed)
- II. Radiation
- III. Cytotoxic chemotherapy
- IV. Targeted treatments
 - I. Agents that inhibit blood vessels
 - II. Agents that take advantage of damaged genes in cancer
- V. Immunotherapy

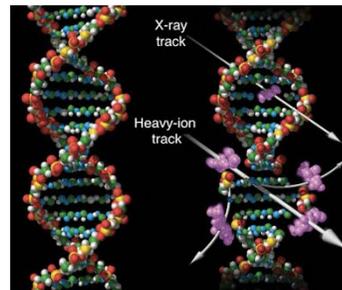
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How does Radiation work?



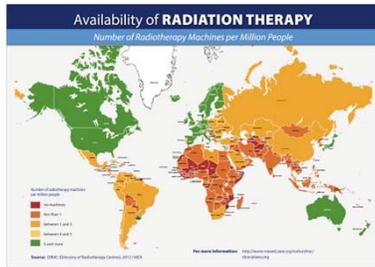
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How does Radiation work?



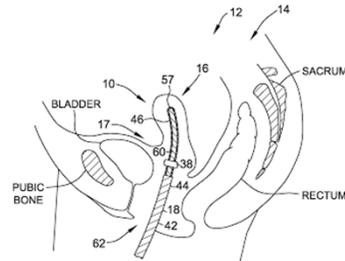
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How does Radiation work?



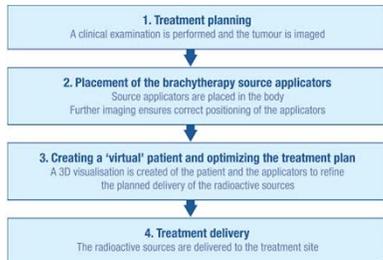
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Targeted radiation (brachytherapy)



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How does Radiation work - brachytherapy?



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Radiation Toxicities (early)

TABLE 1. Acute Toxicities of Pelvic Radiation

| Toxicity | Symptoms | Diagnosis | Treatment |
|-----------------------|-----------------------------|---|--|
| GI (β-6 mc) | | | |
| Enteritis | Diarrhea, tenesmus, mucus | If severe, CT; consider C diff testing | Early changes (frequent loose stools, rect watery): encourage oral fluids, opium, low fiber diet; for diarrhea (if episodes/d), imodium, check electrolytes, consider IV fluids; for diarrhea (if 4-8 episodes/d, noct), 1-2 x weekly IV fluids; for diarrhea (refractory), DTD drops, regular IV fluids, consider hospitalization |
| Proctitis | Rectal bleeding | Sigmoidoscopy or proctoscopy | Topical hydrocortisone/pramoxine, steroid enemas, butyrate enemas, sucralfate enemas |
| Hemorrhoids | | Physical examination with visual inspection | Asaapher/diosone topical (mixed 1:1); oral pain regimen if severe |
| GU (β-6 mc) | | | |
| Cystitis | Dysuria, frequency, urgency | Assess for UTI | Antibiotics if infectious source; pyridium/bupropfen if non-infectious, consider anticholinergic agents for obstructive symptoms |
| Hematologic | | | |
| Anemia | | Hematocrit <30 mg/dL, ANC <500/μL | Consider transfusion of packed erythrocytes |
| Thrombocytopenia | | Platelets <40 mg/μL | Infection risk precautions Consider holding radiation; transfuse platelets if count <10 × 10 ⁹ /L |
| Dermatologic (β-6 mc) | | | |
| Dermatitis | Pruritis, tenderness | | Moisturizing creams, Sitz bath, Domeboro soaks, antibiotics, antifungal agents |
| Desquamation | Pain, wound drainage | | Nonadherent hydrogel (Xeroform), or silver nylon dressing pads |

Abbreviations: ANC, absolute neutrophil count; C, diff, *Clostridium difficile*; CT, computed tomography; DTD, diluted tincture of opium; GI, gastrointestinal; GU, genitourinary; IV, intravenous; UTI, urinary tract infection.

Cancer December 15, 2014

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Radiation Toxicities (early)

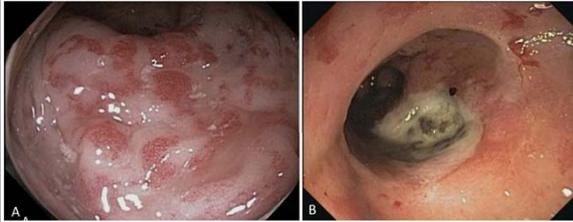


Figure 2. (Left) Rectal proctitis and (Right) ulceration are shown (courtesy of Dr. John Saltzman).

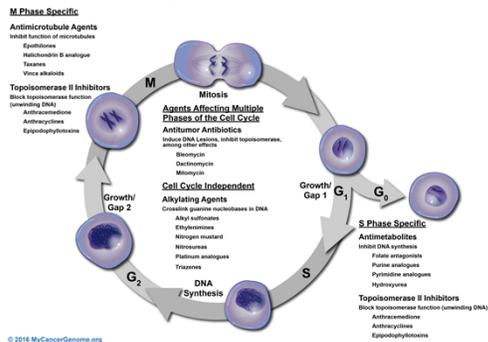
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Radiation Toxicities (late)



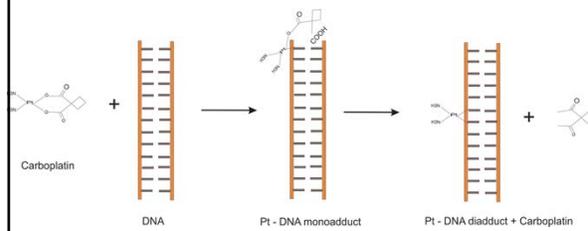
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Chemotherapy: how does it work?



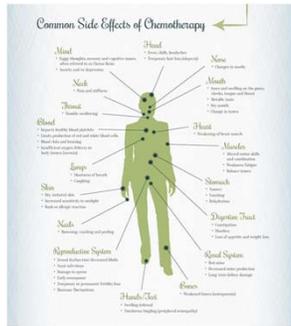
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Chemotherapy: how does it work?



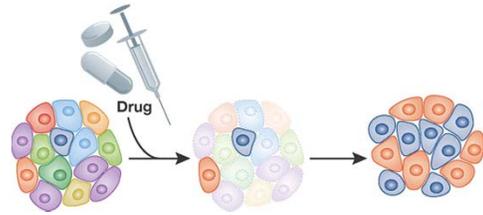
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Chemotherapy: toxicities



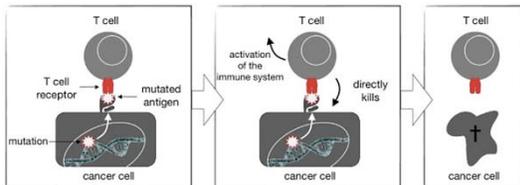
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Why does cancer come back after chemotherapy?



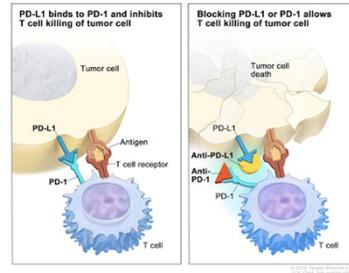
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Immunotherapy: how does it work?



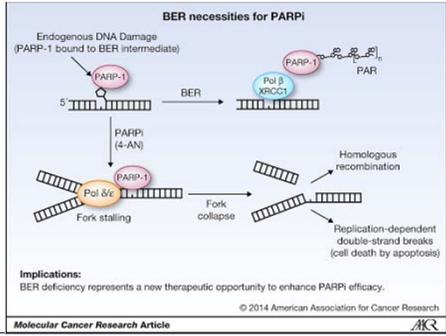
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Immunotherapy: how does it work?



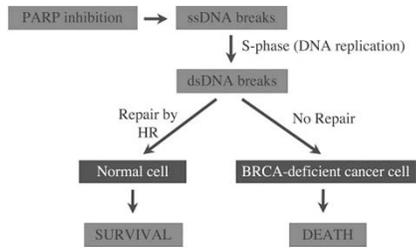
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Targeted therapy: how does it work?



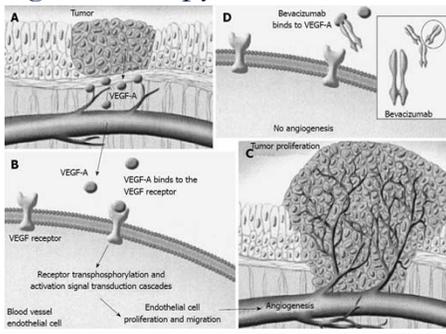
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Targeted therapy: how does it work?



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Targeted therapy: how does it work?



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