

Hypopharyngeal Cancer

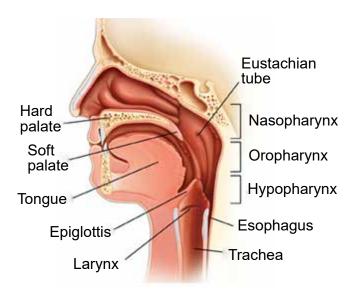


Hypopharyngeal cancer is a disease in which malignant (cancer) cells form in the tissues of the hypopharynx

The hypopharynx is the bottom part of the pharynx (throat). The pharynx is a hollow tube about 5 inches long that starts behind the nose, goes down the neck, and ends at the top of the trachea (windpipe) and esophagus (the tube that goes from the throat to the stomach). Air and food pass through the pharynx on the way to the trachea or the esophagus.

Most hypopharyngeal cancers form in squamous cells, the thin, flat cells lining the inside of the hypopharynx. The hypopharynx has 3 different areas. Cancer may be found in 1 or more of these areas.

Hypopharyngeal cancer is a type of head and neck cancer.



Copyright © 2018 The StayWell Company, LLC

Anything that increases your risk of getting a disease is called a risk factor. Having a risk factor does not mean that you will get cancer; not having risk factors doesn't mean that you will not get cancer. Talk with your doctor if you think you may be at risk. Risk factors include the following:

- Smoking tobacco
- Chewing tobacco
- Heavy alcohol use
- Eating a diet without enough nutrients
- · Having Plummer-Vinson syndrome

Signs and symptoms of hypopharyngeal cancer include a sore throat and ear pain

These and other signs and symptoms may be caused by hypopharyngeal cancer or by other conditions. Check with your doctor if you have any of the following:

- A sore throat that does not go away
- Ear pain
- A lump in the neck
- Painful or difficult swallowing
- A change in voice

People with oral cavity cancer should have their treatment planned by a team of doctors who are expert in treating head and neck cancer

Depending on the stage of the cancer and treatment needs, a number of health professionals may provide care:

- · Head and neck surgeon
- Medical Oncologist
- Radiation oncologist
- Dentist
- · Speech therapist
- Dietitian
- · Psychologist
- Rehabilitation specialist
- · Plastic surgeon

Tests that examine the throat and neck are used to help detect (find) and diagnose hypopharyngeal cancer

The following tests and procedures may be used:

Physical exam of the throat

CT scan (CAT scan): A procedure that makes a series of detailed pictures of areas inside the body, taken from different angles. The pictures are made by a computer

linked to an x-ray machine. A dye may be injected into a vein or swallowed to help the organs or tissues show up more clearly. This procedure is also called computed tomography, computerized tomography, or computerized axial tomography.

PET scan (positron emission tomography scan):

A procedure to find malignant tumor cells in the body. A small amount of radioactive glucose (sugar) is injected into a vein. The PET scanner rotates around the body and makes a picture of where glucose is being used in the body. Malignant tumor cells show up brighter in the picture because they are more active and take up more glucose than normal cells do. A PET scan and CT scan may be done at the same time. This is called a PET-CT.

MRI (magnetic resonance imaging): A procedure that uses a magnet, radio waves, and a computer to make a series of detailed pictures of areas inside the body. This procedure is also called nuclear magnetic resonance imaging (NMRI).

Barium esophagogram: An x-ray of the esophagus. You drink a liquid that contains barium (a silver-white metallic compound). The liquid coats the esophagus and x-rays are taken.

Endoscopy: A procedure used to look at areas in the throat that cannot be seen with a mirror during the physical exam of the throat. An endoscope (a thin, lighted tube) is inserted through the nose or mouth to check the throat for anything that seems unusual. Tissue samples may be taken for biopsy.

Biopsy: The removal of cells or tissues so they can be viewed under a microscope to check for signs of cancer.

Certain factors affect prognosis (chance of recovery) and treatment options

Prognosis (chance of recovery) depends on the following:

- The stage of the cancer (whether it affects part of the hypopharynx, involves the whole hypopharynx, or has spread to other places in the body).
 Hypopharyngeal cancer is usually detected in later stages because early signs and symptoms rarely occur.
- · Your age, gender, and general health
- The location of the cancer
- · Whether you smoke during radiation therapy

Treatment options depend on the following:

- The stage of the cancer
- Keeping your ability to talk, eat, and breathe as normal as possible
- Your general health

People who have had hypopharyngeal cancer are at an increased risk of developing a second cancer in the head or neck. Frequent and careful follow-up is important.

After hypopharyngeal cancer has been diagnosed, tests are done to find out if cancer cells have spread within the hypopharynx or to other parts of the body

The process used to find out if cancer has spread within the hypopharynx or to other parts of the body is called staging. The information gathered from the staging process determines the stage of the disease. It is important to know the stage of the disease in order to plan treatment. The results of some of the tests used to diagnose hypopharyngeal cancer are often also used to stage the disease.

There are three ways that cancer spreads in the body

Cancer can spread through tissue, the lymph system, and the blood:

- **Tissue.** The cancer spreads from where it began by growing into nearby areas.
- **Lymph system.** The cancer spreads from where it began by getting into the lymph system. The cancer travels through the lymph vessels to other parts of the body.
- **Blood.** The cancer spreads from where it began by getting into the blood. The cancer travels through the blood vessels to other parts of the body.

Cancer may spread from where it began to other parts of the body

When cancer spreads to another part of the body, it is called metastasis. Cancer cells break away from where they began (the primary tumor) and travel through the lymph system or blood.

The metastatic tumor is the same type of cancer as the primary tumor. For example, if hypopharyngeal cancer spreads to the lung, the cancer cells in the lung are actually hypopharyngeal cancer cells. The disease is metastatic hypopharyngeal cancer, not lung cancer.

Stages used for hypopharyngeal cancer:

Stage 0 (Carcinoma in Situ)

In stage 0, abnormal cells are found in the lining of the hypopharynx. These abnormal cells may become cancer and spread into nearby normal tissue. Stage 0 is also called carcinoma in situ.

Stage I (1) - Stage IV (4)

Hypopharyngeal cancer can be staged either Stage I (1) through Stage IV (4), Stage I being the least advanced and Stage IV the most advanced.

There are different types of treatment for people with hypopharyngeal cancer

Different types of treatment are available for people with hypopharyngeal cancer. Some treatments are standard (the currently used treatment), and some are being tested in clinical trials. A treatment clinical trial is a research study meant to help improve current treatments or obtain information on new treatments for those with cancer. When clinical trials show that a new treatment is better than the standard treatment, the new treatment may become the standard treatment. You may want to think about taking part in a clinical trial. Some clinical trials are open only to those who have not started treatment.

Three types of standard treatment are used:

Surgery

Surgery (removing the cancer in an operation) is a common treatment for all stages of hypopharyngeal cancer. The following surgical procedures may be used:

- **Laryngopharyngectomy:** Surgery to remove the larynx (voice box) and part of the pharynx (throat).
- **Partial laryngopharyngectomy:** Surgery to remove part of the larynx and part of the pharynx. A partial laryngopharyngectomy prevents loss of the voice.
- **Neck dissection:** Surgery to remove lymph nodes and other tissues in the neck.

After the doctor removes all the cancer that can be seen at the time of the surgery, some people may be given chemotherapy or radiation therapy after surgery to kill any cancer cells that are left. Treatment given after the surgery, to lower the risk that the cancer will come back, is called adjuvant therapy.

Radiation therapy

Radiation therapy is a cancer treatment that uses highenergy x-rays or other types of radiation to kill cancer cells or keep them from growing. The way the radiation therapy is given depends on the type and stage of the cancer being treated.

Radiation therapy may work better in people who have stopped smoking before beginning treatment. External radiation therapy to the thyroid or the pituitary gland may change the way the thyroid gland works. A blood test to check the thyroid hormone level in the body may be done before and after therapy to make sure the thyroid gland is working properly.

Chemotherapy

Chemotherapy is a cancer treatment that uses drugs to stop the growth of cancer cells, either by killing the cells or by stopping the cells from dividing. When chemotherapy is taken by mouth or injected into a vein or muscle, the drugs enter the bloodstream and can reach cancer cells throughout the body (systemic chemotherapy). The way the chemotherapy is given depends on the type and stage of the cancer being treated.

Follow-up tests may be needed

Some of the tests that were done to diagnose the cancer or to find out the stage of the cancer may be repeated. Some tests will be repeated in order to see how well the treatment is working. Decisions about whether to continue, change, or stop treatment may be based on the results of these tests.

Support is available for coping with changes that may have happened as a result of cancer treatment. Your healthcare team can offer ideas as well as a plan of care for long-term follow-up.

Clinical trials

Clinical trials are done to find out if new cancer treatments are safe and effective or better than the standard treatment.

People who take part in a clinical trial may receive:

- The standard drugs alone or
- The standard drugs plus the new treatment being studied

Taking part in a clinical trial helps improve the way cancer will be treated in the future. Even when clinical trials do not lead to effective new treatments, they often answer important questions and help move research forward.

Many of today's standard treatments for cancer are based on earlier clinical trials.

Ask if there is a clinical trial right for you.

Some clinical trials only include people who have not yet received treatment. Other trials test treatments for those whose cancer has not gotten better. There are also clinical trials that test new ways to stop cancer from coming back or reduce the side effects of cancer treatment.

To learn more about hypopharyngeal cancer

- American Cancer Society https://www.cancer.org/
- National Cancer Institute https://www.cancer.gov/
- National Comprehensive Cancer Network
 Guidelines for Patients
 https://www.nccn.org/patients/guidelines/cancers.aspx
- MedlinePlus https://medlineplus.gov/

Common questions

What does the pathology report say?

What is the stage of my cancer?

What are my goals for treatment?

What are my treatment choices?

What kind of support services are available for me about finances, emotions, spiritual questions, etc.?

My Health Care Team	Contact Information
Surgeon:	
Medical Oncologist:	
Radiation Oncologist:	
Primary Care Doctor:	
Navigator:	
Nurse:	
Registered Dietitian Nutritionist:	
Other:	
Other:	
Other:	
Other:	

Notes

