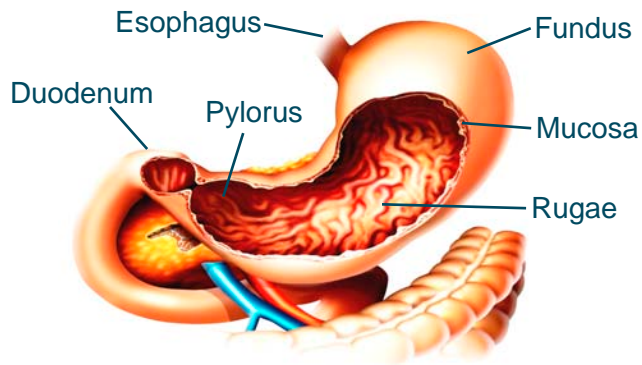


What is it?

Gastric Cancer, also known as stomach cancer, forms in the tissues lining the stomach



Risk Factors

No one knows the exact cause of stomach cancer, but some factors may put you at higher risk. These include:

- ➔ Age—You can get gastric cancer at any age, but may be more likely after the age of 70
- ➔ Poor diet consisting of eating foods which are smoked, salted, or pickled
- ➔ Lack of physical activity
- ➔ Obesity
- ➔ Smoking
- ➔ Family History
- ➔ Infection called H. pylori (Helicobacter pylori) which causes inflammation and ulcers
- ➔ Long-term inflammation of the stomach
- ➔ Having had part of the stomach removed

What Should I Discuss with My Healthcare Provider?

- What can I do to decrease my chances of getting stomach cancer?
- How do you check for stomach cancer?
- How often should I have checkups?
- Is my cancer HER2+?
- What stage is my stomach cancer?
- What are my treatment options?
- What are some possible side effects of treatments?



Want to Learn More?

Gastric Cancer Fund
www.gastriccancer.org

National Cancer Institute
www.cancer.gov

Men's Health Network
www.menshealthnetwork.org

What is Gastric Cancer?



Gastric cancer, which includes cancer of the gastroesophageal junction (GeJ), is the **4th most commonly diagnosed cancer** and **2nd leading cause of cancer-related deaths** worldwide.

Each year in the U.S., an estimated **13,000 men** and **8,000 women** are diagnosed with stomach cancer. Most are over 70 years old.

It is estimated that over **10,000 people die** from gastric cancer each year.

More than **64,000 Americans** are currently living with gastric cancer.

An estimated **989,000 new cases** of stomach cancer are diagnosed each year worldwide.

Symptoms

Early gastric cancer often has no symptoms, but some symptoms include:

- Discomfort or pain in the stomach area
- Difficulty swallowing
- Nausea and vomiting
- Unexplained weight loss
- Feeling full or bloated after a small meal
- Vomiting blood or having blood in the stool

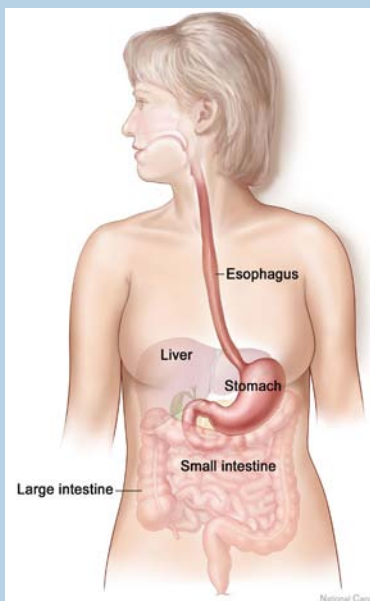
Detection

If you have any previously mentioned risk factors or symptoms, you can discuss them with your healthcare provider at your next visit.

Physical exam: The provider feels the abdomen for fluid or swelling. They will also check for swollen lymph nodes.

Endoscopy: Your provider uses a thin, lighted tube (endoscope) to look in the stomach by passing it through the mouth and esophagus. The endoscope can be used to remove tissue for testing.

Biopsy: A pathologist uses a microscope to check the tissue sample for cancer cells. A biopsy is the only sure way to know if cancer cells are present.



Treatment Options

There are a few different options to slow down the growth of gastric cancer, including:

➔ Traditional Therapy

- Radiation therapy uses high energy rays to kill or shrink cancer cells.
- Chemotherapy uses chemicals or drugs to destroy cancer cells.

➔ Targeted Therapy

Targets cells with specific proteins (such as the HER2+ receptors) for treatment.

➔ Surgical Removal

Depending on the cancer location, the surgeon may remove the whole stomach or only the part that has the cancer.

Early detection is challenging due to lack of symptoms in early stages

HER2-positive (+)

You should know that HER2+ stomach and GeJ cancers are aggressive.

HER2 are proteins found on cell surfaces. HER2+ means that stomach cancer cells have too many HER2 receptors on their surfaces. These receptors send signals that cause cells to grow and divide faster, creating more HER2+ cancer cells.

There are two types of tests used for detection of HER2+ gastric cancer:

- FISH (Fluorescence In Situ Hybridization)
- IHC (ImmunoHistoChemistry)

Although this cancer is rare, 22% of stomach cancers are of the HER2+ type. Upon diagnosis of stomach cancer, a healthcare provider should determine how to proceed with treatment for HER2+.

Healthcare providers may choose to treat HER2+ gastric cancer with a drug called Herceptin, which specifically targets HER2+.

