

ASHLEY OLIVER *of Manhattan, Illinois*

Radiotherapy Improves Quality of Life for Mother of Two with Colorectal Cancer



Colorectal cancer is the third most common type of cancer in both men and women in the United States. Long considered a disease of the elderly, more and more cases are being diagnosed in individuals younger than 50, many years before the recommended age for undergoing a colonoscopy. Treatment for colorectal cancer can be complicated in patients whose cancer is situated closer to the rectum than the colon (often referred to as rectal cancer). Thankfully, there is an effective form of treatment that not only shrinks tumors — making them easier to remove — but also lowers the risk of cancer coming back after surgery.

That treatment is radiotherapy, or radiation therapy, and in Ashley Oliver's case, her six-week course of treatment enabled her doctors to shrink her tumor to undetectable levels and ultimately preserve her quality of life.

THE DIAGNOSIS

Ashley's symptoms began shortly after her 30th birthday. An active mother of two young girls, she suspected something was not quite right following repeated bouts of stomach pain and physical exhaustion. After several months her symptoms became more persistent and severe, as often happens as rectal cancer progresses. A colonoscopy nearly a year after her symptoms first began confirmed the diagnosis.

"Following my diagnosis I was scared – afraid I wouldn't be able to do all of the things I loved to do. I wondered how I would be able to do things with my children, such as swimming, playing outside, and going to the beach. It was a very upsetting time," Ashley says.

"I was nervous and apprehensive about my ability and strength to endure treatment, but I think radiotherapy was a great option for me and would afford me the best possible outcome and quality of life."



DISEASE & TREATMENT

Colorectal cancer is cancer that develops in the tissues of the colon and/or rectum.¹

Colorectal cancer usually develops slowly, over a period of 10 to 20 years.² Most begin as a noncancerous growth called a polyp that develops on the inner lining of the colon or rectum.³

Approximately 5%, or 1 in 20, Americans will be diagnosed with cancer of the colon or rectum in their lifetime.⁴

Screening reduces colorectal cancer mortality both by decreasing the incidence of disease and by increasing the likelihood of survival.⁵

Treatment of rectal cancer depends on how deeply the cancer has invaded the rectal wall and surrounding lymph nodes, however radiotherapy – which uses high-energy rays or particles to destroy cancer cells – has proved to be an effective form of treatment for this particular type of cancer.⁶

Different forms of radiotherapy may be used to treat rectal cancers to help shrink the tumor and keep it from coming back.⁷

According to the American Cancer Society, nearly 40,000 cases of rectal cancer are expected to be diagnosed in 2016.⁸

THE TREATMENT: RADIOTHERAPY

Rectal cancer is the growth of abnormal cancerous cells in the lower part of the colon that connects the anus to the large bowel. According to the American Cancer Society, nearly 40,000 cases of rectal cancer are expected to be diagnosed in 2016. Treatment of rectal cancer depends on how deeply the cancer has invaded the rectal wall and surrounding lymph nodes; however, radiotherapy — which uses high-energy rays or particles to destroy cancer cells — has proved to be an effective form of treatment for this particular type of cancer.

Different forms of radiotherapy may be used to treat rectal cancers, oftentimes before surgery, to help shrink the tumor and keep it from coming back. For Ashley, treatment began with six weeks of radiation and low-dose chemotherapy. Each radiation therapy treatment took approximately 15 minutes to complete. Ashley responded extremely well to the treatment and in fact, the radiation treatments shrunk her tumor to an almost undetectable size, enabling her doctors to preserve most of her rectum during surgery and ultimately her quality of life.

“I was nervous and apprehensive about my ability and strength to endure treatment, but I think radiotherapy was a great option for me and would afford me the best possible outcome and quality of life,” said Ashley.

1. Cancer Treatment Centers of America, from: http://www.cancercenter.com/colorectal-cancer/learning/?source=GOOGLPPC&channel=paid+-search&c=paid%2520search%3AGoogle%3ANon+Brand%3AExact%3ANon+Brand%3ECancer+Type%3A+Colorectal%3AExact&k_click-id=a95b859d-a359-4d66-9dff-883c9018d575

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3. Stryker SJ, Wolff BG, Culp CE, Libbe SD, Ilstrup DM, MacCarty RL. Natural history of untreated colonic polyps. *Gastroenterology.* 1987;93: 1009-1013.

4. National Cancer Institute. DevCan: Probability of Developing or Dying of Cancer Software, Version 6.7.0; Statistical Research and Applications Branch, National Cancer Institute, 2005.

5. American Cancer Society, from: <http://www.cancer.org/cancer/colonandrectumcancer/detailedguide/colorectal-cancer-prevention>

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7. IBID.

8. American Cancer Society, from: <http://www.cancer.org/cancer/colonandrectumcancer/detailedguide/colorectal-cancer-key-statistics>