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A Short Note on Uterine Cancer and Treatment

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Description

Uterine cancer is the most prevalent type of cancer that affects a woman's reproductive system. Uterine cancer develops when healthy cells in the uterus alter and expand uncontrollably, generating a lump known as a tumor. A tumor might be malignant or noncancerous. A malignant tumor is one that can develop and spread to other parts of the body. A benign tumor can develop but will not spread to other sections of the body.

Noncancerous uterine disorders include

Fibroids: Benign tumors in the uterine muscle **Polyps:** Abnormal growths in the uterine lining

Endometriosis: A condition in which endometrial tissue, which normally lines the lining of the uterus, is detected on the exterior of the uterus or in other organs. Oncogenes are genes that help cells grow, reproduce, and stay alive.

Endometrial hyperplasia is a condition in which the number of cells and glandular structures in the uterine lining increases. Endometrial hyperplasia can contain normal or abnormal cells, as well as simple or complicated glandular structures. Endometrial hyperplasia with abnormal cells and complicated glands increases the chance of getting cancer in the uterine lining.

Risk factors

A risk factor is something that increases a person's likelihood of developing cancer. Although risk factors regularly influence cancer development, the vast majority do not cause cancer. Some people who have many risk factors never acquire cancer, whereas others who have no known risk factors do. Recognizing your risk factors and discussing them with your doctor may enable you to make more educated lifestyle and health-care decisions, perhaps lowering your cancer risk. A woman's chance of acquiring uterine cancer may be increased by the following factors:

Age: Uterine cancer is more common in women over the age of 50. The typical age of diagnosis is 60 years old. In women under the age of 45, uterine carcinoma is infrequent.

Obesity: Obese women have more abdominal fat, which generates more estrogen, a sex hormone that can raise the risk of uterine cancer.

Race: White women are much more likely than other races/ethnicities to acquire uterine cancer. However, Black women are more likely to be diagnosed with advanced uterine cancer.

Genetics: Uterine cancer may be inherited in families when colon cancer is inherited. Lynch syndrome, also known as Hereditary Non-Polyposis Colorectal Cancer (HNPCC), increases the risk of uterine cancer in women. All women under the age of 70 who develop endometrial cancer should have their tumor evaluated for Lynch syndrome, even if there is no family history of colon cancer or other malignancies.

Diabetes: Women with diabetes, which is frequently connected with obesity, maybe at a higher risk of developing uterine cancer.

Other types of cancer: Women having breast cancer, colon cancer, or ovarian cancer are at a higher risk of developing uterine cancer.

Tamoxifen: Women who use tamoxifen (Nolvadex) to prevent or treat breast cancer are more likely to acquire uterine cancer.

Tamoxifen's benefits often outweigh the chance of developing uterine cancer, but all women who are prescribed tamoxifen should consider their specific benefits and risks with their doctor. Radiation treatment

Radiation therapy

Women who have received radiation therapy in the pelvic region (the lower portion of the abdomen between the hip bones) for another cancer are more prone to get uterine cancer.

Diet/nutrition: Women who consume a lot of animal fat may be at a higher risk of developing uterine cancer.

Estrogen: Many of the risk factors listed below are linked to extended estrogen exposure and/or estrogen imbalance:

Women who began having periods before the age of 12 and/or went through menopause later in life. Making birth control tablets is a kind of prevention. Birth control tablets contain estrogen and progesterone, which are used cyclically to generate a monthly menstrual cycle. This minimizes the chance of uterine lining overgrowth, especially when used over a lengthy period of time.

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- Using a progestin-secreting Intrauterine Device (IUD), a type of birth control device.
- Taking into consideration the risk of uterine cancer before beginning HRT, particularly estrogen treatment alone.
- HRT with a combination of estrogen and progesterone may help reduce risk.
- Maintaining a healthy weight, ideally with a BMI of less than 25.
- If you have diabetes, appropriate disease management, such as checking blood glucose levels on a regular basis, can reduce your risk.

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