

Esophageal Cancer



Basic description

Esophageal cancer can occur anywhere along the lining of the esophagus. It's relatively uncommon in the United States, and the rates of esophageal cancer have been fairly stable in this country for many years.

Symptoms of esophageal cancer generally do not appear until the disease is advanced. As the tumor grows, the most common symptom is difficulty swallowing. Cancer of the esophagus can also cause chest pain or burning and frequent choking on food. Because of these problems, weight loss is common. Signs of more advanced cancer include pain while swallowing, hoarseness, hiccups, pneumonia, and high calcium levels.

Opportunities

Prevention Avoiding tobacco and excessive alcohol use can substantially reduce the risk of esophageal cancer. Getting regular physical activity, staying at a healthy weight throughout life, and eating a healthy, balanced diet with at least 2½ cups of vegetables and fruits every day may also help prevent this disease. Some studies have found that the risk of cancer of the esophagus is reduced in people who regularly take aspirin or other nonsteroidal anti-inflammatory drugs, such as ibuprofen.

Detection Screening people at average risk for esophageal cancer isn't recommended. Individuals with risk factors for esophageal cancer may be advised to undergo certain tests that can detect the cancer at an early stage, when it's most treatable. The most common test is an upper endoscopy. People at risk are also advised to report possible symptoms of esophageal cancer right away.

Treatment Surgery, chemotherapy, and radiation therapy are used (often in combination) to treat cancer of the esophagus. When combined with other treatments, surgery can help to ease symptoms and extend or improve the patient's quality of life.

Who is at risk?

Gender Men have esophageal cancer at rates more than 3 times greater than women, primarily due to men's greater use of tobacco and alcohol.

Age People older than age 65 have the greatest risk for cancer of the esophagus. Less than 15% of people diagnosed are younger than 55.

Other risk factors

- **Tobacco and alcohol use.** Tobacco use is responsible for many esophageal cancers. Although alcohol isn't as strong a risk factor as smoking, the combination of smoking and drinking increases a person's risk much more than either by itself.
- **Obesity.** The risk of developing this cancer is higher in obese men and women.
- **Esophageal conditions.** People with long-standing reflux or people with Barrett esophagus are at sharply increased risk.
- **Diet.** A diet that is low in vegetables and fruits may increase the risk for esophageal cancer.

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Quality-of-life issues

From the time of diagnosis, the quality of life for every cancer patient and survivor is affected in some way. They may be affected socially, psychologically, physically, and spiritually.

The concerns that patients and survivors most often express are fear of recurrence; chronic and/or acute pain; sexual problems; fatigue; guilt for delaying screening or treatment, or for doing things that may have caused the cancer; changes in physical appearance; depression; sleep difficulties; changes in what they are able to do after treatment; and the burden on finances and loved ones. Specific quality-of-life issues associated with esophageal cancer include the inability to eat solid food, guilt associated with a history of tobacco and alcohol use, and end-of-life issues due to the low survival rate.

Esophageal cancer in the United States: 2015 estimates

- New cases: 16,980
- Deaths: 15,590
- 5-year relative survival rate for localized stage: 40%
- 5-year relative survival rate for all stages combined: 18%

Bottom line

Cancer of the esophagus usually is diagnosed at a late stage and therefore has a poor outlook for survival. The risk of this kind of cancer can be reduced by stopping – or never starting – tobacco use and by moderating alcohol use. Screening endoscopy for people at high risk for this cancer can help increase early detection rates.



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