

An Overview of Uterine Cancer

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DESCRIPTION

Uterine cancer, also named womb cancer, refers to two forms of cancer that grow in the uterus' tissues. Endometrial cancer develops from the uterine lining, while uterine sarcoma develops from the uterus' muscles or support tissue. In the United States, endometrial cancer accounts for over 90% of all uterine malignancies. Changes in vaginal bleeding or pelvic pain are both signs of endometrial cancer. Unusual vaginal bleeding or tumours in the vagina are signs of uterine sarcoma.

Obesity, metabolic syndrome, type 2 diabetes, estrogen-only tablets, a history of tamoxifen usage, late menopause, and a family history of endometrial cancer are all risk factors for endometrial cancer. Prior pelvic radiation therapy is a risk factor for uterine sarcoma. An endometrial biopsy is usually used to diagnose endometrial cancer. Symptoms, a pelvic exam, and medical imaging may all point to a diagnosis of uterine sarcoma.

Endometrial cancer is caused by obesity, metabolic syndrome, type 2 diabetes, estrogen-only tablets, a history of tamoxifen use, late menopause, and a family history of endometrial cancer. Uterine sarcoma is connected to past pelvic radiotherapy. Endometrial cancer is usually identified with an endometrial biopsy. Symptoms, a pelvic exam, and medical imaging could all point to a uterine sarcoma diagnosis.

CONCLUSION

Uterine cancer and womb cancer can refer to a variety of cancers that develop in the uterus, including

Endometrial cancer

- Endometrial carcinomas develop from cells in the endometrium's glands (uterine lining). These include well-differentiated endometrioid adenocarcinoma, which is common and easily curable, as well as the more aggressive uterine papillary serous carcinoma and uterine clear-cell carcinoma.
- Uterine carcinosarcomas also known as malignant mixed mullerian tumours are rare endometrial cancers that display both glandular carcinomatous and stromal areas and develop characteristics.

Uterine sarcomas

- Leiomyosarcomas develop from the uterus' muscular layer (or myometrium). Note that leiomyosarcomas are not the same as uterine leiomyomas, which are benign uterine tumours.
- Endometrial stromal sarcomas arise from the endometrium's connective tissues, and they're significantly less common than endometrial carcinomas.

Treatment

Depending on the type of cancer and the stage of the tumour, uterine cancer treatment may vary. Minimally invasive surgery is preferred in the early stages. Surgery, radiation therapy, chemotherapy, hormone therapy, and targeted therapy are the five major treatments for endometrial cancer. Surgery, in which the uterus is removed *via* a total hysterectomy, is the most common treatment option for endometrial cancer. A salpingo-oophorectomy is a hysterectomy that includes the removal of the ovaries and fallopian tubes. In addition, hormone therapy that aims to stop cancer cells from growing could be utilized to treat endometrial cancer. Monoclonal antibodies, motor inhibitors, and signal transduction inhibitors are all examples of targeted therapy that act to selectively target cancer cells. The majority of women with endometrial cancer require surgery. The type of cancer you have and your overall health will determine your treatment approach. You may likewise get the accompanying medicines:

- Chemotherapy is a type of cancer treatment that involves the use of powerful chemicals to kill cancer cells.
- Radiation therapy is a type of cancer treatment that uses targeted radiation beams to kill cancer cells.
- Hormone therapy is a cancer treatment that involves the administration of hormones or the blocking of hormones.
- Immunotherapy is a therapy that helps your resistant framework's capacity to battle malignant growth.
- Targeted therapy is a type of cancer treatment that employs drugs to inhibit cancer cells from proliferating.

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