

GLOSSARY OF TREATMENT TERMS (referenced from the training manual prepared by the American College of Surgeons Commission on Cancer)

Abdominal-perineal resection: Surgical procedure used in the treatment of colorectal cancer that requires a combined approach through the abdomen and the perineum. Complications include ureteral injury, urinary dysfunction, urinary tract infections, sexual dysfunction, perineal and abdominal wound infections, and stomal complications.

Adjuvant therapy: A therapy that aids another, such as chemotherapy, after surgery.

Allogenic bone marrow transplantation: Transplanting bone marrow from one person to another person who is of the same tissue type.

Amputation: The removal of a limb or other appendage or outgrowth of the body.

Anti-oncogenes: Genes having the ability to regulate growth and inhibit carcinogenesis.

Antrectomy: Excision of the antrum.

Autologous bone marrow transplantation: Transplanting the patient's own bone marrow after ablative treatment.

BCG: Bacille Calmette Guerin vaccine, a tuberculosis vaccine, containing living, avirulent, bone-strain tubercle bacilli. It is administered by a special technique using a multiple puncture disk and is used in immunotherapy for the treatment of cancer, particularly malignant melanoma and bladder cancer.

Bilobectomy: Removal of two lobes.

Bilroth I: Pylorectomy with end-to-end anastomosis of the upper portion of the stomach to the duodenum.

Bilroth II: Partial gastric resection with closure of duodenal stump and gastrojejunostomy.

Biospy: Removal and examination, usually microscopic, of tissue from the living body. Biopsies are done to determine whether a tumor is malignant or benign.

- ❖ **Excisional:** The entire lesion is removed by surgical cutting
- ❖ **Incisional:** Biopsy of a selected portion of a lesion
- ❖ **Needle aspiration:** Biopsy in which tissue is obtained by application by suction through a needle attached to a syringe
- ❖ **Punch:** A type of incisional biopsy
- ❖ **Shave:** A type of incisional biopsy since the tumor is rarely totally removed

Brachytherapy: Radiation from a source placed within the body or a body cavity.

Cecectomy: Excision of the cecum.

Cecocolostomy: Surgical anastomosis of the cecum and the colon.

Cecoileostomy: Surgical anastomosis of the ileum to the cecum.

Cervicectomy: Excision of the cervix utero.

Cholecystectomy: Excision of the gallbladder.

Cholecystojejunostomy: Surgical anastomosis of the gallbladder and jejunum.

Colectomy: Excision of the colon or a portion of it.

Colony-stimulating factor (CSF): Soluble protein factors that stimulate division and maturation of bone marrow stem cells. All CSFs are named a function of the cell most responsive to the factor (e.g., granulocyte colony-stimulating factor or GCSF).

Coloproctectomy: Surgical removal of the colon and rectum.

Colposcopy: The process of examining the vagina and cervix by means of a speculum and a magnifying lens; procedure used for the early detection of malignant changes on the cervix/vaginal cuff.

Conization: The removal of a “cone” of tissue, as a partial excision of the cervix. This can be done with a scalpel or electrocautery; the scalpel technique preserves the histologic elements of the tissue better.

Continent urinary reservoir (Continent ileal reservoir): Also called the “kock pouch”; a surgical procedure which provides an intra-abdominal pouch that stores urine and has two nipple valves that maintain continence and prevent ureteral reflux.

Craniotomy: Any surgical operation on the cranium.

Cryoprostectomy: Destruction of the prostate by the application of extreme cold.

Cryosurgery: The destruction of tissue by application of extreme cold.

Cystectomy: Excision of the urinary bladder or a part of it.

Debulking: Surgery to reduce tumor burden to aggregates of 2 cm. Or less; improves the response to postoperative chemotherapy.

Duodenostomy: Surgical formation of a permanent opening into the duodenum.

Endoscopic retrograde cholangiopancreatogram (ERCP): A procedure consisting of a combination of retrograde cholangiography and transhepatic cholangiography used to visualize all portions of the biliary tree.

Enterectomy: An excision of a portion of the intestine.

Esophagectomy: An excision of a portion of the esophagus.

Esophagocoloplasty: An excision of a portion of the esophagus and its replacement by a segment of the colon.

Esophagoenterostomy: A surgical formation of an anastomosis between the esophagus and the small intestine.

Esopagogastrectomy: An excision of the esophagus and the stomach.

Esophagoscopy: Direct visual examination of the esophagus with an esophagoscope.

Fulguration: Destruction of living tissue by electric sparks generated by a high-frequency current.

Gastrectomy: excision of all (total) or a portion (partial or subtotal) of the stomach.

Glossectomy: Excision of all or a portion of the tongue.

Gray: The SI (Système International d'Unités) unit of absorbed radiation dose, defined as the transfer of 1 joule of energy per Kg of absorbing material. 1 Gray = 100 rads.

Hartmann's operation: Resection of a portion of the colon, with the proximal end of the colon brought out as a colostomy and the distal stump or rectum being closed.

Hemicolectomy: Excision of approximately half of the colon.

Hepatectomy: Excision of all or a portion of the liver.

Hysterectomy: Surgical removal of the uterus.

- ❖ Abdominal: performed through the abdominal wall
- ❖ Modified radical (type 2): removal of the uterus, a portion of the parametrium and mobilization of the water.
- ❖ Radical or Wertheim procedure (type 3): removal of the uterus and excision of the pelvic lymph nodes with wide lateral excision of the parametrial and paravaginal supporting structures.
- ❖ Simple (type 1): removal of the uterus
- ❖ Subtotal: the cervix is left in place
- ❖ Total (pan): the uterus and cervix are completely excised
- ❖ Vaginal: performed through the vagina

Ileal conduit: A surgical procedure that uses a segment of the ileum for the diversion of urinary flow from the ureters.

Ileocolectomy: Excision of the ileum and part of the colon.

Ileocostomy: Surgical anastomosis of the ileum to the colon.

Immunotherapy: Passive immunization of an individual by administration of performed antibodies actively produced in another individual (serum or gamma globulins). The term has also come to include the use of immunopotentiators, replacement of immunocompetent tissue (bone marrow), and infusion of specially-treated white blood cells.

Intensification therapy (also called reintensification therapy): This therapy has been proposed to prevent the return of the leukemic cell population. After one year of sustained, complete remission, the person undergoes the same intensive induction therapy as in the initial treatment period. The objective is bone marrow depression. After recovery of the bone marrow depression, the person continues on maintenance therapy for another year.

Interferons: Natural glycoproteins released by cells invaded by viruses or certain infectious agents; acts as a stimulant to noninfected cells, causing them to synthesize another protein with antiviral capabilities. Interferons are divided into these subsets, with each originating from a different cell and having distinctive chemical and biologic properties:

- ❖ **Alpha:** produced by leukocytes in response to a viral infection
- ❖ **Beta:** produced by fibroblasts in response to a viral infection
- ❖ **Gamma:** produced by lymphoid cells in culture that are stimulated by a mitogen

Interleukin-2: A glycoprotein produced by helper T-cells that is an essential factor in the growth of T-cells and seem to induce the production of interferon. It is used as an anti-cancer drug in the treatment of a wide variety of solid tumors.

Intrathecal chemotherapy: Cytotoxic drugs injected into the cerebrospinal fluid (CSF), thus bypassing the blood-brain barrier.

Intravesical chemotherapy: Chemotherapy administered via a foley catheter for the treatment of bladder cancer. The foley is then usually clamped for a period of time and then emptied. This procedure delivers a high local concentration to the tumor area. Patients receiving this therapy require life-long cystoscopic surveillance for recurrent disease.

Jejunostomy: Surgical creation of a permanent opening between the jejunum and the surface of the abdominal wall.

Laminectomy: Excision of the lamina.

Laryngectomy: Partial or total removal of the larynx.

Laryngopharyngectomy: Excision of the larynx and pharynx.

LEEP: Loop Electrosurgical Excision Procedure uses an electrical current passed through a thin wire loop to act as a knife to excise tissue.

Limp perfusion: Used in the treatment of malignant melanoma, where certain chemotherapeutic drugs (usually L-phenylalanine and DTIC) are instilled into the affected extremity by arterial perfusion. A pump system counteracts the normal arterial pressure, permitting a steady state of infusion, allowing the drugs to have the greatest effect at the disease site. Usually performed after surgical removal of the bulk of the tumor mass.

Lingulectomy: Excision of the lingula of the left lung.

Lumpectomy: (tylectomy) Excision of only the local lesion in carcinoma of the breast.

Lymphadenectomy: Excision of one or more lymph nodes.

Lymphadenectomy: The film produced by lymphangiography, which is an x-ray of the lymphatic channels after introduction of a contrast medium.

Mandibulectomy: Excision of the mandible.

Mastectomy: Surgical removal of breast tissue.

- ❖ **Extended radical:** supraradical mastectomy; surgical removal of the interpal mammary chain of lymph nodes, the entire involved breast, the underlying chest muscle, and the lymph nodes in the axilla.
- ❖ **Halstead radical:** surgical en bloc removal of the entire involved breast, the underlying chest muscles, and the lymph nodes in the axilla
- ❖ **Modified radical:** surgical removal of the entire involved breast and many lymph nodes in the axilla. The underlying chest muscles are removed in part or are left in place after removal of axillary lymph nodes
- ❖ **Partial:** removal of the tumor along with varying amounts of surrounding normal tissue (also called segmental, tylectomy, or quadrantectomy)
- ❖ **Simple(total):** surgical removal of the entire involved breast with or without the underlying chest muscles; an axillary lymph node dissection is not done
- ❖ **Subcutaneous:** excision of the breast tissue with preservation of overlying skin, nipple, and areola

Neck dissection: Excision of lymph nodes in neck area.

- ❖ **Modified radical neck:** the same lymph nodes are removed as in a radical neck dissection; however one or more non-lymphatic structures are preserved
- ❖ **Radical neck dissection:** includes the removal of all ipsilateral cervical lymph node groups (i.e., lymph nodes from levels I through V or submental, submandibular, cranial jugular, medical jugular, caudal jugular, dorsal cervical nodes along the accessory nerve and supraclavicular) and removal of the spinal accessory nerve, internal jugular vein and sternocleidomastoid muscle
- ❖ **Selective neck dissection:** preserves one or more lymph node groups routinely removed in a radical neck dissection

Nephrectomy: Surgical removal of a kidney and usually Gerota's fascia, perinephric fat; renal vein, and appropriate lymph nodes.

Nephroureterectomy: Removal of the kidney and ureter.

Omentectomy: Excision of all or part of the omentum.

Ommaya Reservoir: This device is a subcutaneous cerebrospinal fluid (CSF) reservoir that is implanted surgically under the scalp and provides access to the CSF through a burr hole in the scalp. Drugs are injected into the reservoir with a syringe, and the domed reservoir is then depressed manually to mix the drug within the CSF. This device eliminates the need for multiple lumbar punctures in the repeated administration of intrathecal chemotherapy.

Oophorectomy: Excision of one or both ovaries; also called ovariectomy.

Orchiectomy: Surgical removal of one or both testes.

Pancreatectomy: Excision of the pancreas.

Pancreaticoduodenostomy: Anastomosis of the pancreatic duct to a different site on the duodenum.

Pancreaticogastrostomy: Anastomosis of the pancreatic duct to the stomach.

Pancreaticojejunostomy: Anastomosis of the pancreatic duct to the jejunum

Pancreaticoduodenectomy: Excision of the head of the pancreas and the adjacent portion of the duodenum.

Parotidectomy: Excision of a parotid gland.

Pelvic exenteration: Surgical removal of all reproductive organs and adjacent tissue.

- ❖ **Anterior:** includes the bladder, distal ureters and genital organs with their ligamentous attachments and pelvic lymph nodes
- ❖ **Extended:** includes pelvic blood vessels or bony pelvis
- ❖ **Posterior:** includes the rectum and rectosigmoid with ligamentous attachments and pelvic lymph nodes
- ❖ **Total:** includes removal of all pelvic contents and pelvic lymph nodes. A radical hysterectomy, pelvic lymph node dissection, removal of the bladder, distal ureters and genital organs with their ligamentous attachments.

Pharyngectomy: Excision of part of the pharynx.

Pharyngolaryngectomy: Excision of the pharynx and larynx.

Photodynamic therapy: A photosensitizing drug is exposed to specific wavelengths of light in the presence of oxygen. When this reaction occurs, the normally innocuous photosensitizing drug becomes cytotoxic via an activated species of oxygen known as singlet oxygen. These drugs are preferentially retained by tumor cells.

Pneumonectomy: Excision of lung tissue.

- ❖ **Lobectomy:** excision of a single lobe
- ❖ **Partial:** excision of less than the entire lung
- ❖ **Total:** excision of the entire lung

Proctectomy: Excision of the rectum.

Proctectomy: Excision of the rectum and lower colon.

Prostatectomy: Excision of the prostate

Quadrantectomy: Removal of one-fourth of the tissue.

Rectosigmoidectomy: Excision of the rectosigmoid colon; also called a proctosigmoidectomy.

Salpingo-oophorectomy: Excision of the fallopian tube and ovary.

Sigmoidectomy: Excision of the sigmoid colon.

Sigmoidoscopy: Direct examination of the interior of the sigmoid colon.

Splenectomy: Excision of the spleen.

Stereotactic surgery: A surgical technique used in neurology in which precise localization of the target tissue is possible through use of three-dimensional coordinates. Also known as stereotaxic surgery.

Thermal ablation: Destruction of tissue with heat.

Thyroidectomy: Excision of the thyroid gland.

- ❖ **Subtotal:** more than two-thirds of the gland is removed
- ❖ **Total:** the entire gland is removed

Total abdominal hysterectomy with bilateral salpingectomy and oophorectomy (TAHBSO): Total removal of the uterus and the cervix performed through the abdominal wall rather than the vaginal route; in addition, the fallopian tubes and the ovaries are removed bilaterally.

Trachelectomy: Excision of the uterine cervix.

Transurethral resection of prostate (TURP): Removal of a portion of the prostate gland by means of an instrument passed through the urethra. This procedure removes only enlarged prostatic tissue, as in benign prostatic hypertrophy. Normal prostatic tissue and the outer capsule are left intact.

Tylectomy: Lumpectomy.

Ureterosigmoidostomy: A surgically-created anastomosis of one or both ureters to the sigmoid colon. In this form of diversion of urinary flow, there is no need for an appliance because the urine flows into the colon which acts as a kind of reservoir.

Vulvectomy: Excision of the vulva.

TREATMENT

1. An excisional biopsy is considered definitive cancer therapy. YES NO
2. A patient undergoes a fulguration of a rectal tumor in January and then a low anterior resection of the tumor in March. The date definitive cancer therapy commenced is January. YES NO
3. If a splenectomy is performed during a staging laparotomy for Hodgkin's disease and the spleen is path positive, is the splenectomy part of the first course of therapy?
 YES NO
4. If a patient had a carcinoma in situ of the cervix diagnosed by D&C in March followed by a hysterectomy in April, is the D&C part of FCOT? YES
 NO
5. If a patient had invasive carcinoma of the cervix diagnosed by D&C in March followed by a hysterectomy in April, is the D&C part of FCOT? YES
 NO
6. A patient has surgery in My Hospital for breast cancer, adjuvant chemotherapy in the local oncologist's office, and radiation in YourHospital. What is included in MyHospital for treatment? Is there more treatment I should be looking for?