

Treatment decisions about stomach and oesophageal cancers

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The main treatment for stomach and oesophageal cancer is surgery. Your doctor will discuss with you the best treatment for you. This will be with the advice of the multidisciplinary team.

Some people have chemotherapy and/or radiotherapy as their only treatment or as additional treatment following surgery (adjuvant therapy). Chemotherapy and radiotherapy can also be used before surgery (called neo-adjuvant therapy). Neo-adjuvant therapy aims to shrink the cancer before an operation and to destroy any cancer cells that may have spread away from the primary site.

People having treatment for oesophageal cancer may be advised to visit a dentist before treatment to make sure their teeth are in good condition to help prevent other infections.

Which health professionals will I see?

Your GP will arrange the first tests to assess your symptoms. If these tests do not rule out cancer, you will usually be referred to a gastroenterologist, who will arrange further tests and advise you about treatment options.

A multidisciplinary team will care for you. This may include:

- your gastroenterologist and gastrointestinal surgeon, who specialise in the diagnosis and treatment of diseases of the digestive system
- a medical oncologist to coordinate your chemotherapy treatment
- a radiation oncologist to coordinate your radiotherapy treatment
- a cancer nurse coordinator or clinical nurse consultant who supports you throughout treatment and liaises with other care providers
- a psychologist and a counselor to help you manage your feelings and cope with changes to your life as a result of cancer or treatment
- a dietitian to educate you about nutrition and diet
- a social worker who can help provide emotional support and practical assistance to you and your carers
- a speech pathologist who rehabilitates communication and swallowing disorders as required.

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