

ADENOCARCINOMA: Malignant cancer that starts in the glandular tissue.

ADENOMA: A benign growth starting in the glandular tissue.

ALTERNATIVE THERAPY: An unproven therapy that is used in place of standard and proven medical treatment. Excerpt from The American Cancer Society Website: "Some alternative therapies are known to cause harmful or even life-threatening side effects. With others, the main danger is that the patient may lose the chance to benefit from standard treatment. The American Cancer Society recommends that patients thinking about using any alternative or complementary therapy discuss it first with a member of their health care team to be sure that they know all their options."

ANTI-EMETIC: A drug that relieves nausea and vomiting.

ANTIOXIDANTS: Compounds that inhibit oxidation and neutralize free radicals. Some vitamins, such as vitamins C and E are antioxidants. Antioxidants that are found in foods are thought to reduce the risk of some cancers, BUT taking certain antioxidants as supplements has been linked to higher cancer risk in some people and may reduce the efficacy of certain chemotherapy agents.

BENIGN: Refers to a tumor that is not invasive or does not spread.

BIOPSY: Taking a piece of tissue of a tumor (or sometimes the entire tumor) for diagnosis or treatment purposes. This technique provides tissue architecture.

CANCER: Abnormal cell growth. A group of cells that grow out of control.

CARCINOMA: Malignant cancer that starts in skin or tissues that line the inside or cover the outside of internal organs.

CHEMOTHERAPY: Use of drugs to kill cells.

COMPLEMENTARY THERAPY: A non-standard treatment used along with standard medical treatment. May help relieve certain symptoms of cancer, relieve side effects of standard cancer therapy, or improve a patient's sense of well-being. Examples include acupuncture and/or herbs.

EDEMA: Swelling caused by fluid buildup in body tissues.

END-STAGE OR TERMINAL: When a cancer is no longer treatable and will soon lead to death.

FINE NEEDLE ASPIRATE: Using a small needle to obtain a small sample from a tumor for diagnostic purposes. This technique provides cells only and does not give tissue architecture but is relatively low-risk, non-invasive, and typically does not require sedation or anesthesia (depending on location).

GRADE: How aggressive a tumor looks under the microscope. Grading is done by a pathologist who looks at sample tissue from the biopsy. Grade is often an indication of how a tumor will behave.

“MEDIAN” SURVIVAL TIME: When a population is evaluated statistically, there are a number of ways the central tendency of the group can be evaluated. The median is the value at which 50% of the group falls above and 50% of the group falls below. This is a little different from the average of the group, though more people are familiar with this term. When one evaluates median survival times one is looking at a 50% chance of surviving longer than the median (and a 50% chance of surviving less than the median).

MALIGNANT: Refers to a tumor that is invasive or has a tendency to spread. An aggressive tumor.

METASTASIS: A medical term for spread of cancer at a site away from the site where it first developed (i.e. spread to a different part of the body).

NADIR: Commonly refers to the lowest point that a patient’s blood cell count will reach as a side effect of chemotherapy.

PROGRESSION/ PROGRESSIVE DISEASE: Growth or worsening of the cancer.

RADIOTHERAPY: Use of x-rays to kill cells.

RELAPSE: When the cancer returns after a period in remission.

REMISSION: This means a patient has no signs or symptoms of cancer and evidence of it cannot be found on exam or diagnostic tests.

SARCOMA: A malignant cancer that develops from the connective tissues that support and connect the body, such as bone, fat, cartilage, and muscle.

STAGE: Extent of how advanced the cancer is, is based on whether or not it has spread to other parts of the body.