

Stomach Cancer

Information for people with cancer

This information should not be used to diagnose yourself or in place of a doctor's care.

The stomach is a muscular, J-shaped organ in your upper abdomen. It is part of the digestive system.

The stomach releases acid and enzymes to break down and digest food. It also squeezes the food which helps with digestion.

Stomach cancer is also called gastric cancer.

Diagnosis and Staging

What are the signs and symptoms of stomach cancer?

- Mild pain in your stomach area that is worse when you eat.
- Nausea (feeling queasy) or vomiting.
- Heartburn or indigestion.
- Loss of appetite.
- Bloating, especially after meals.
- Black stools (poop) or stools like look like tar.
- Fatigue (extreme tiredness) or weakness.
- Weight loss you cannot explain.

If you have any signs or symptoms that you are worried about, please talk to your family doctor or nurse practitioner.

How is stomach cancer diagnosed?

Tests that may help diagnose stomach cancer include:

- **Blood tests:** to look for anemia (low iron in your blood).

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- **Endoscopy:** an endoscope is a flexible, lighted tube with a small camera on the end. A doctor puts the endoscope into your mouth, down your esophagus and into your stomach. A doctor will use the camera to look at your stomach. The doctor may take a small tissue sample from your stomach.
- **Biopsy:** a doctor removes a small piece of tissue from your stomach. A pathologist looks at the tissue under a microscope to see if there is cancer in the tissue.
- **CT (computed tomography) scan:** to see the tumour and if the cancer has spread to other parts of your body.
- **Laparoscopy:** a laparoscope is a long, thin tube with a light and a video camera (laparoscope) on the end. It is put into your abdomen (the space that your stomach and intestines are in) through a small cut (typically in your belly button). The laparoscope lets your doctor see if the cancer has spread within the abdomen and to take biopsy (piece of tissue).

For more information on tests used to diagnose cancer, see our Screening and Diagnosis pathfinder: bccancer.libguides.com/pathfinder-screening

What are the types of stomach cancer?

- **Adenocarcinomas:** 90-95% (90-95 out of 100) of stomach cancers. Start in the gland cells that line the inside of the stomach.
- **Gastric lymphoma:** 4% (4 out of 100) of stomach cancers. These are usually non-Hodgkin lymphomas. For more information about non-Hodgkin lymphoma: www.bccancer.bc.ca/health-info/types-of-cancer/blood-lymphoid/hodgkin-lymphoma
- **Carcinoid Tumour:** 3% (3 out of 100) of stomach cancers. These start in the hormone-making cells of the stomach.
- **Gastrointestinal Stromal Tumour (GIST):** A rare kind of stomach cancer that starts in the cells in the wall of the stomach.

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Stomach cancer:

- Most often starts in the lower part of the stomach, closest to the small intestine.
- Has often spread at the time of diagnosis.
- Commonly spreads to the gastrointestinal organs, lungs, bones, uterus, and ovaries.

Over 50% (50 out of 100) of **early-stage** cases of stomach cancer can be cured.

What are the stages of stomach cancer?

Staging describes the cancer. Staging is based on how much cancer is in the body, where it was first diagnosed, if the cancer has spread and where it has spread to.

The stage of the cancer can help your health care team plan your treatment. It can also tell them how your cancer might respond to treatment and the chance that your cancer may come back (recur).

Stomach cancer staging:

Stage 1A: Tumour (cancer growth) is only in the inner layer of the stomach wall.

Stage 1B has one of the following:

- Tumour is in the inner layer of the stomach wall and has spread to 1 to 6 lymph nodes.
- Tumour has spread to the outer muscle layer of the stomach wall, but has not spread to the lymph nodes or other organs.

Stage 2 has one of the following:

- Tumour is in the inner layer of the stomach and has spread to 7 to 15 lymph nodes or other organs.
- Tumour has spread to the outer muscle layer of the stomach wall and has spread to 1 to 6 lymph nodes.
- Tumour has grown through the stomach wall, but has not spread to any lymph nodes or other organs.

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Stage 3A has one of the following:

- Tumour has spread to the outer muscle layer of the stomach and has spread to 7 to 15 lymph nodes, but not to other organs.
- Tumour has grown through the stomach wall and has spread to 1 to 6 lymph nodes, but not to other organs.
- Tumour has spread to nearby organs, but has not spread to any lymph nodes or distant organs.

Stage 3B: Tumour has grown through the stomach wall and has spread to 7 to 15 lymph nodes.

Stage 4 has one of the following:

- Cancer has spread to distant organs.
- Cancer has spread to more than 15 lymph nodes.
- Cancer has spread to nearby organs and to at least 1 lymph node.

For more information on staging, see our About Cancer page:

bccancer.bc.ca/health-info/types-of-cancer/about-cancer

What are the grades of stomach cancer?

The grade of the cancer describes how different the cancer cells look from normal cells and how fast the cancer cells are growing. A pathologist will give the cancer a grade after looking at the cells under a microscope.

Stomach cancer can be grade 1, 2, 3 or 4. The lower the number, the lower the grade.

Low grade: cells are abnormal but look a lot like normal cells. Low grade cancers usually grow slowly and are less likely to spread.

High grade: cells are abnormal and do not look like normal cells. High grade cancers usually grow more quickly and are more likely to spread.

Treatment

What is the treatment for stomach cancer?

Cancer treatment may be different for each person. It depends on your particular cancer. Your treatment may be different from what is listed here.

Surgery

- Offers the best chance of a cure. Surgery will be different depending on the type and stage of your cancer.
- **Subtotal gastrectomy:** part of the stomach, nearby lymph nodes, and parts of other tissues or organs near the cancer are removed.
- **Total gastrectomy:** the entire stomach, nearby lymph nodes, and the lower part of the esophagus or upper part of the small intestine are removed.
- If the cancer has spread, parts of other organs may be removed. This can include the liver, spleen, pancreas or colon.

Radiation Therapy (high energy x-rays that kill or shrink cancer cells)

- Can help control bleeding caused by stomach cancer.
- Can sometimes help shrink the cancer if it is causing digestion issues, like a blockage in your digestive tract.
- Can be used to help treat pain.
- Patients who had surgery for their cancer may still have radiation therapy.
- For more information about radiation therapy go to:
bccancer.bc.ca/our-services/treatments/radiation-therapy

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Systemic Therapy (chemotherapy)

- Treatment that includes chemotherapy, targeted agents or immunotherapy.
- Given orally (by mouth) or intravenously (a needle attached to a tube is put into your vein to give the treatment).
- If your cancer is being treated with surgery, you will have systemic therapy before and after surgery.
- If you have already had surgery, you may have systemic therapy after the surgery.
- If the cancer has spread to other organs, systemic therapy may help but it will not cure your cancer.
- For more information about systemic therapy go to:
[bccancer.bc.ca/our-services/treatments/systemic-therapy-\(chemotherapy\)](https://bccancer.bc.ca/our-services/treatments/systemic-therapy-(chemotherapy))

Laser Treatment

- May be used to treat bleeding or a blockage in an organ.

What is the follow-up after treatment?

- Follow-up testing and appointments are based on your type of cancer.
- After treatment, you may return to the care of your family doctor or specialist for regular follow-up. If you do not have a family doctor, please talk to your BC Cancer health care team.
- The BC Cancer Life after Cancer page has information on issues that cancer survivors may face: bccancer.bc.ca/lifeaftercancer

More Information

What causes stomach cancer and who gets it?

These are some of the risk factors for this cancer. Not all of these risk factors may cause this cancer, but they may help the cancer start growing.

- Being over the age of 50.
- Stomach cancer is twice as common in men as it is in women. [See note below, Statistics].
- Smoking and using tobacco.
- Eating lots of foods that are pickled, smoked or salted.
- An infection with *Helicobacter pylori*.
- Pernicious anemia (you cannot absorb vitamin B12).
- Previous stomach surgery for benign (not cancer) ulcers or other disorders increases the risk of stomach cancer 15 or 20 years after the surgery.
- Having atrophic gastritis (inflammation of part of the stomach).
- Chronic reflux of bile into the stomach.
- Family history of stomach cancer.
- People with inherited disorders such as
 - Familial Adenomatous Polyposis (FAP)
 - Hereditary Nonpolyposis Colorectal Cancer (HNPCC)
 - Hereditary diffuse gastric cancer

Statistics

- B.C. Statistics: www.bccancer.bc.ca/health-info/disease-system-statistics/statistics-by-cancer-type

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- Canada Statistics: www.cancer.ca/en/cancer-information/cancer-type/stomach/statistics/?region=bc

Note: Available statistics do not have information about the inclusion of transgender and gender diverse participants. It is unknown how these statistics apply to transgender and gender diverse people. Patients are advised to speak with their primary care provider or specialists about their individual considerations and recommendations.

Can I help prevent stomach cancer?

- **Eating healthy, nutritious foods can lower your cancer risk.**
 - Follow Canada’s Food Guide: www.canada.ca/en/health-canada/services/canada-food-guides.html
 - Visit the BC Cancer Food Choices and Cancer Prevention page: www.bccancer.bc.ca/health-info/prevention/food-choices.
- **Eat lots of vegetables and fruit.**
- **Do not eat too many pickled, smoked or salted foods.**
- **Do not smoke or use tobacco.** Support is available to help you successfully quit.
 - Visit the BC Cancer Tobacco and Cancer Prevention page: www.bccancer.bc.ca/health-info/prevention/tobacco
- If you have a *Helicobacter pylori* infection, you should be on “triple therapy”. This is a combination of antibiotics and antacid treatments.
- Make sure your food is properly refrigerated and properly prepared so you do not get food poisoning.

Is there screening for stomach cancer?

There is no screening program for stomach cancer.

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If you have a family history of stomach cancer, you should talk with your doctor. People with a strong family history of stomach cancer should be tested. There is more information on genetic testing from our Hereditary Cancer Program page: www.screeningbc.ca/Hereditary/default.htm

Where can I find more information?

- If you have questions about stomach cancer, please talk to your health care team.
- Our librarians can help you find the information you need. Visit our Library page: bccancer.bc.ca/our-services/services/library
- BC Cancer Library Stomach Cancer pathfinder: bccancer.libguides.com/pathfinder-stomach
- Canadian Stomach Cancer Foundation: mygutfeeling.ca
- Debbie's Dream Foundation - Curing Stomach Cancer: debbiesdream.org
- Managing Your Symptoms: www.bccancer.bc.ca/health-info/coping-with-cancer/managing-symptoms-side-effects
- Emotional support: www.bccancer.bc.ca/health-info/coping-with-cancer/emotional-support