## Les principes généraux sur le cancer

## PROGRAMME NATIONALE DE FORMATION DU PERSONNEL MEDICAL EN CANCEROLOGIE MAI 2017









## Objectifs de présentation

#### A la fin de cette séance, les participants seront capable de:

- définir le cancer
- Comprendre l'épidémiologie de base du cancer
- Comprendre le pronostic du cancer et les facteurs qui l'influencent
- Décrire l'approche générale pour le diagnostic du cancer
- Appréciez les principales différences entre les cancers pédiatriques et adultes
- Appréciez les principales différences entre les cancers solides et liquides

## Objectifs de presentation

Définir le cancer

## C'est quoi le cancer?

 Commençant par une prolifération clonale de cellules anormales
 Les clones sont des cellules identiques avec maquillage génétique

Les cellules sont anormales et leur croissance est dérégulée. Les cellules continuent à proliférer sans s'arrêter

Les cellules ont la capacité de métastaser (Voyage à d'autres sites dans le corps loin de la tumeur primaire)

## Comment se développe le cancer?

#### Carcinogenèse en plusieurs étapes

Pour la plupart des cancers, la cellule cancéreuse s'accumule un certain nombre de modifications génétiques (mutations, délétions, amplifications) au fil du temps qui se traduisent par: L'indépendance de signaux d'inhibition de croissance favorisant la croissance externe et la réplication cellulaire Evasion de l'apoptose (mort cellulaire) Mise en place de l'angiogenèse (recrutement de nouveaux vaisseaux sanguins pour la croissance

# Le cancer n'est pas une simple maladie...

- Le cancer est un groupe de maladies heterogeniques
- Beaucoup d'agents peuvent causer le cancer mais pour beaucoup de cancers on ne connait pas leur cause A number of different agents cause cancer, but for many cancers we don't know the cause
- Le traitement et le pronostic sont variable et dependent du type de cancer en cause

#### 1) Toxines



- Tabac: cancer des poumons, cancer de la tête et du coup, cancer de la vessie
- Asbestos: mesothelioma
- Radiation et chimiotherapie: acute myelogenous leukemia, cancer du sein, cancer des poumons

#### 2) Infections



- HPV: cancer du col, cancer de la tete et du cou
- Hepatitis B & C: cancer du foie
- Epstein-Barr Virus: Lymphome de Burkitt, cancer nasopharynx
- H. Pylori: cancer de l'estomac,
   lymphome gastrique

3) Hormones



- □ oestrogen: cancer du sein menstruation
- Cancer des testicules (undescended testicle)

risque



4) Autres facteurs de — 

Cancer colorectal- ? Diète

5) Inherited genetic predisposition



BRCA 1 and 2 for breast cancer

Several genes for colorectal cancer

□ Trisomie 21 for acute leukemia

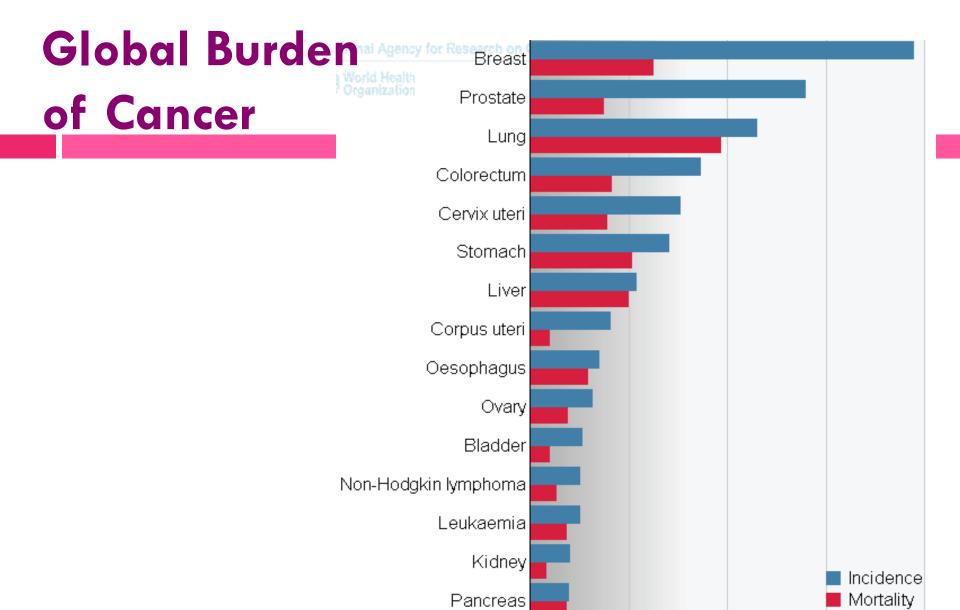
6) Acquired genetic mutations



- Tumor suppressor genes –
   lose their function during oncogenesis
- Proto-oncogenes –
   enhanced function in
   cancer cells, often promote
   cell replications
- DNA repair genes no
   longer work in cancer cells

## Objectifs de présentation

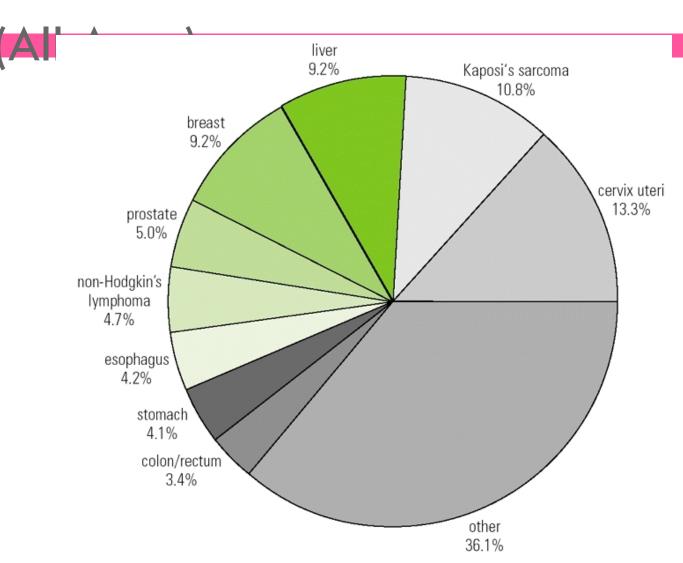
Comprendre l'épidémiologie de base du cancer



ASR (W) rate per 100,000

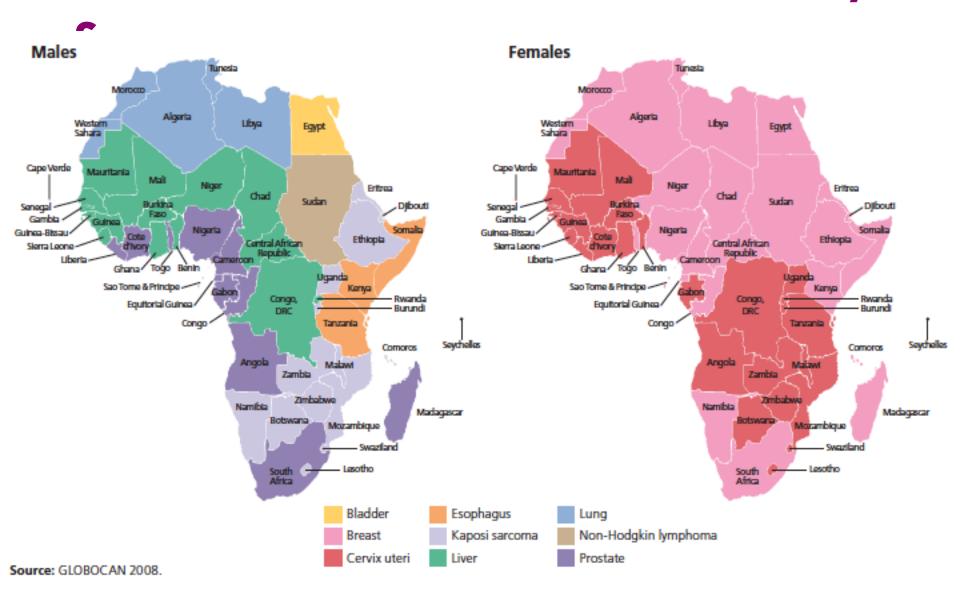
Source: Globocan 2008

## Major Cancer Types in Sub-Saharan Africa



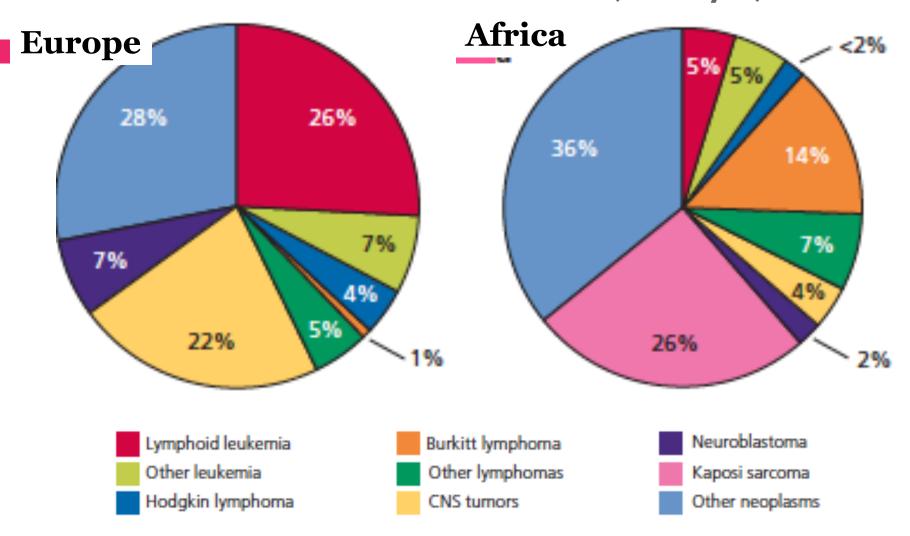
Source: Adapted from Ferlay et al. 2004.

## Most Common Cancers in Africa, by



Global Cancer Facts & Figures, 2<sup>nd</sup> Edition, ACS

#### Distribution of Cancers in Children (< 15 yrs)



Global Cancer Facts & Figures, 2<sup>nd</sup> Edition, ACS

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- c) Understand cancer prognosis and factors that influence it
- d) Describe general approach to diagnosing cancer
- Appreciate the key differences between pediatric and adult cancers
- Appreciate the key differences between liquid and solid cancers

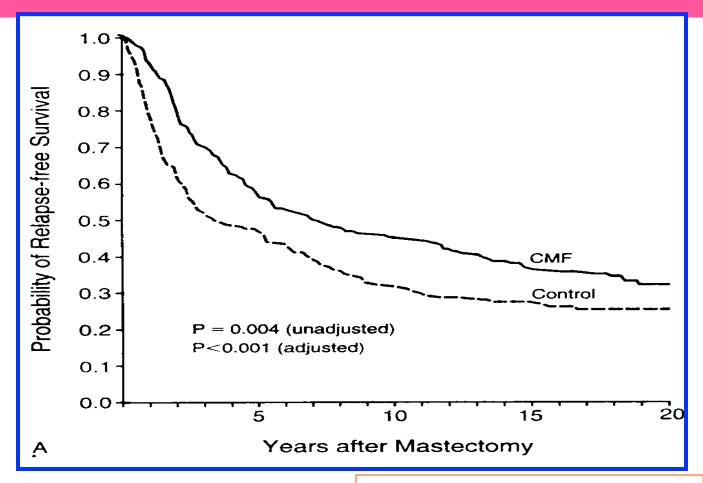
## What is prognosis?

- Prognosis: the patient's chances for survival and cure
  - What are the patient's chances of survival without treatment?
  - O How can treatment improve the quality or length of the patient's life?

## How is prognosis measured?

- Estimates based on groups of patients whose situations are most similar to that of an individual patient
- Prognosis can be measured by:
  - 5 year survival rate: what proportion (%) of patients will still be alive 5 years after diagnosis
  - Median survival: how long (months) 50% of patients survive

## Breast Cancer - The Original Milan CMF Adjuvant Trial



Bonadonna, NEJM 1995;332:901

# What factors influence a patient's prognosis?

Cancer type and stage

Patient's age, general health (functional status),
 and response to treatment

All cancers: genetic make-up of the cancer

### Performance Status (PS)

Patients with a poor PS usually have large tumor burden and respond poorly to therapy – one of the most predictive signs of ultimate prognosis.

#### **ECOG PERFORMANCE STATUS**

- **o** Fully active, normal function
- 1 Able to walk and carry out light house and work duties; BUT restricted in strenuous activities
- **2** Able to walk, out of bed more than 50% of waking hours, can perform self-care activities independently.
- **3** Confined to bed or chair more than 50% of waking hours
- 4 Completely disabled and confined to bed or chair. Cannot carry out any self-care.
- **5** Dead

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## Pathology Diagnosis

#### □Why is a pathology diagnosis important?

□ It is important to confirm diagnosis through pathology as many clinical findings cannot make the distinction between one cancer type and another or between cancer and a non-cancerous disease.

#### For example:

- ■Head and Neck cancer vs Lymphoma vs TB
- Gastric adenocarcinoma vs GIST vs abdominal lymphoma
- Acute myelogenous leukemia (AML) vs acute lymphoblastic leukemia (ALL)

## Pathology Diagnosis

#### Why is a pathology diagnosis important?

- Helps you diagnose accurately and develop an effective treatment plan – treatment MUST be tailored for specific cancer, and varies greatly from cancer to cancer
- Cancer treatment is not benign, and its effectiveness varies depending on the type of cancer

## How is a tissue biopsy taken?

#### Surgical excisional biopsy

• Open procedure, so higher risk and harder to arrange

#### Fine needle aspirate (FNA)

- Easy to perform
- Technically much more difficult to process
- Often gives insufficient tissue for certain diagnoses and special stains

## Ultrasound guided core needle biopsy

- Way to obtain a good sample of tissue
- Ultrasound guides you to area of tumor that is not necrotic and away from critical structures

#### Blood smear/bone marrow biopsy

• For the leukemias or cancers that spread to the bone marrow

## Staging

#### • What is staging?

 The process of determining the spread and curability of the disease (is it metastatic?)

#### • Why is staging important?

Helps determine prognosis and treatment plan

## Staging

#### What are examples of staging?

- Early Stage Locally Advanced Metastatic Disease
- Stage I Stage II Stage IV
- Low risk Standard risk High risk

## How do we stage cancer?

- Physical Exam
- Labs
  - NFS (CBC), liver function tests, alkaline phosphatase, creatinine
- Imaging
  - Chest x-ray, liver ultrasound +/- CT
  - Imaging of other parts of the body if symptoms are suggestive (e.g. spine)
- Other
  - Sometimes lumbar puncture (for cancers that readily spread to CNS)

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### Cancer in Children vs Adults I

	PEDIATRIC CANCERS	OVERLAPPING	ADULT CANCERS
Tynes	<ul><li>•ALL</li><li>•Burkitt's</li><li>•Wilm's tumor</li><li>•Rhabdomyosarcoma</li><li>•Osteosarcoma</li><li>•Neuroblastoma</li></ul>	•Lymphomas •CML	<ul><li>Lung</li><li>Breast</li><li>Cervical</li><li>Liver</li><li>Stomach</li><li>AML</li></ul>

#### Cancer in Children vs Adults II

	PEDIATRIC CANCERS	ADULT CANCERS
Characteristics	<ul> <li>Rarely caused by environmental or lifestyle factors (like smoking, HPV, Hepatitis B)</li> <li>Generally more curable</li> </ul>	<ul> <li>Often caused by environmental or lifestyle factors, therefore amenable to risk factor reduction</li> <li>Less curable particularly when in an advanced stage</li> </ul>

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## Hematologic (LIQUID) Cancers

Definition

Cancers of the blood and lymphatic system

# Feature

- Less complex genomically
- Treated mostly with systemic therapy
- Advanced stage disease often curable with systemic therapy

# **xamples**

- Lymphomas (Burkitt's, non-Hodgkin's, Hodgkin's)
- Leukemias (ALL, AML, CML, CLL)
- Plasma cell disorders (Multiple myeloma)

## Epithelial (SOLID) Cancers

<u>xamples</u>

Features

'All other cancers' or 'cancers that cause tumors'

- Complex genomically
- Only curable when detected early and with treatment that includes surgery
- Advanced stage disease mostly NOT curable

  - Lung
- Ovarian

- Breast
   Head and neck
   Pancreatic
- Cervical
   Gastric
  - Colo-rectal

- Esophageal

## Summary

- Cancer represents a significant burden of disease all around the world, including in Haiti
- Cancer prognosis is influenced by many factors, including cancer type and stage and patient's performance status
- Accurate diagnosis, most often requiring pathology, is crucial to determining appropriate treatment
- There are notable differences in childhood vs adult cancers, and liquid vs solid cancers