Appendix Cancer

What is the appendix?
The **appendix** is a pouch-like tube. It is attached to the cecum. The cecum is the first part of the large intestine or colon. The appendix is about 4 inches long. It is part of the gastrointestinal (GI) tract. It is thought to have no special function in the body. Surgical removal of the appendix causes no health problems.

What is appendix cancer?
Cancer starts when normal cells change and grow out of control. They form a mass called a tumor. This cancer is also called appendiceal cancer.

Types of Appendix Cancers:
- **Malignant Carcinoid**—A carcinoid tumor starts in the cells that make hormones. A few of these cells are found in almost every organ of the body. An appendix carcinoid tumor most often occurs at the tip of the appendix. Over half of appendix tumors are carcinoids. Most carcinoids are small. Many can be treated with surgery.
- **Mucinous Cystadenocarcinoma and Pseudomyxoma Peritonei (PMP)**—These make up 20% of appendix cancers. This type of tumor makes a jelly-like substance called mucin. It can fill the belly cavity.
- **Colonic-Type Adenocarcinoma**—These make up 10% of appendix cancers. It occurs at the base of the appendix. This type looks and acts like colorectal cancer.
- **Signet Ring Cell Adenocarcinoma**—This type is very rare. It is more aggressive and difficult to treat.

Is this a common cancer?
Cancers of the appendix are rare. There are less than 1,000 cases per year.

What are the risk factors?
- Smoking tobacco
- Gender: Women are more likely to get carcinoids
- Family history of appendix cancers
- Age: Average age when found is over 40
- Certain health conditions

What are the symptoms?
People with appendix cancer may have some or none of these symptoms:
- Appendicitis
- Fluid in the belly (ascites)
- Bloating/Increase in the size of the belly
- Pain in the belly or pelvis
- Changes in bowel function
What is the prognosis?
The prognosis (chance of recovery) depends on:
- The stage when it is found.
- If the cancer has spread.
- If the cancer is a new diagnosis or has come back.
- Your overall health.

How is it diagnosed?
- **History and physical exam**: A review of symptoms, health habits, past illnesses and treatments.
- **Biopsy**: The removal of a small amount of tissue that is checked under a microscope. This can help determine where the cancer came from. Often it is found by accident during surgery for appendicitis.
- **CT scan**: A series of computerized pictures of the inside of the body. This is taken after drinking or injecting into a vein special dye.
- **MRI**: This uses a magnet, radio waves and a computer to take pictures of the inside of the body.

How is appendix cancer staged?
The stage describes a cancer’s growth or spread. This helps to decide what kind of treatment is best. It can also help predict prognosis. One tool doctors use to describe the stage is the **TNM** system. **Tumor (T)** - How large is the tumor? Where is it located? **Node (N)** - Has the tumor spread to the lymph nodes? **Metastasis (M)** - Has the cancer spread to other organs in the body?

Appendix cancer can be described by stage:
- **Localized**: Cancer is found in the appendix, colon, rectum, small intestine and/or stomach only.
- **Regional**: Cancer has spread to nearby tissues or lymph nodes.
- **Metastasis**: Cancer has spread to other parts of the body.

How is it treated?
The most common treatment for appendix cancer is surgery to take out the tumor and surrounding tissue. Types of surgery include:
- **Appendectomy**: Take out the appendix.
- **Hemicolecotomy**: Take out a part of the colon next to the appendix.
- **Debulking Surgery**: This may be done in later stages of appendix cancer. The surgeon takes out as much of the tumor “bulk” as possible. This may be followed by chemotherapy. If the cancer makes mucous, much of the mucous is taken out. This often helps the bloating.

**Chemotherapy**
This is the use of drugs to slow or kill the cell’s growth.

**Local/Intraperitoneal Chemotherapy**
This is done by a surgeon after a debulking surgery. Chemotherapy is heated and put into the belly cavity. This is called **HIPEC**. The chemotherapy is given through a tube. The tube is taken out when it is done.

**Systemic Chemotherapy**
Chemotherapy is injected intravenously (IV). It enters the bloodstream to reach cancer cells throughout the body. This is called systemic chemotherapy.

**Radiation Therapy**
Rarely used for appendix cancer. This treatment uses high energy x-rays or other types of radiation. This slows the cell’s growth or kills the cells.
Clinical Trials
You may have the chance to take part in a clinical trial. Clinical trials are controlled research studies. They are voluntary. They find out if new cancer treatments are safe and effective. They may find better treatments for cancer than the standard treatments.

Follow-up Tests
During your treatments you will need blood tests and scans. These tell us how well the treatment is working. These tests help guide decisions to keep going, stop, or change treatments. This is called restaging.

Blood tests and scans will be done from time to time after you finish your treatments. They can show if your condition has changed or the cancer has recurred or come back.

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