Treating Gallbladder Cancer
A Quick Guide

Contents
This is a brief summary of the information on ‘Treating gallbladder cancer’ from our website. You will find more detailed information on the website.

In this information there are sections on
- The stages of gallbladder cancer
- Statistics and outlook
- Types of treatment for gallbladder cancer
- Surgery
- Chemotherapy
- Radiotherapy
- What is advanced gallbladder cancer?
- Follow up for gallbladder cancer
- Gallbladder cancer research
- Questions for your doctor

You can view this information in a larger print on our website.

The stages of gallbladder cancer
What is staging?
Cancers are divided into stages, depending on how far they have grown. The two main ways of staging systems used in gallbladder cancer are the TNM system and number systems.

TNM stages of gallbladder cancer
TNM stands for ‘tumour, node, metastasis’. So TNM staging takes into account the size of the tumour (T), whether there is cancer in the lymph nodes (N), and whether cancer has spread to other parts of the body (M or metastasis).

Number stages of gallbladder cancer
There are 4 main stages in this system. Stage 1 means the cancer is only in the top layers of the tissues lining the gallbladder. Stage 2 means that it has grown through the muscle layer of the gallbladder and into the connective tissue underneath. In stage 3, the cancer may have grown through the wall of the gallbladder and may be in nearby lymph nodes. Stage 4 means the cancer is advanced. It may have grown into one of the main blood vessels leading into the liver or into 2 or more organs outside the liver. Or the cancer may have spread to lymph nodes or organs far away from the gallbladder. Some doctors also refer to stage 0, which is a very, very early stage of gallbladder cancer.

Your doctor may use a simpler 3 stage system to decide which treatment to give you. The 3 stages are localised, unresectable and recurrent gallbladder cancer.

Statistics and outlook for gallbladder cancer
Outlook means your chances of getting better. Your doctor may call this your prognosis. With gallbladder cancer, the likely outcome depends on how advanced the cancer is when it is diagnosed (the stage).

The statistics we use are taken from a variety of sources, including the opinions and experience of the experts who check every section of this website. They are intended as a general guide only. For the more
complete picture in your case, you’d have to speak to your own specialist.

We include statistics because people ask for them, but not everyone wishes to read this type of information. If you think you would like to have this information, then read on down the page. If you don’t want to read it or aren’t sure remember you can skip it, you can always come back to it.

How reliable are cancer statistics?
No statistics can tell you what will happen to you. Your cancer is unique. The same type of cancer can grow at different rates in different people. The statistics cannot tell you about the different treatments people may have had, or how that treatment may have affected their prognosis. There are many individual factors that will affect your treatment and your outlook.

Types of treatment for gallbladder cancer
Surgery is the main treatment for gallbladder cancer. But you may have radiotherapy or chemotherapy alone, together or along with surgery.

Surgery
There are a number of different operations that you may have for gallbladder cancer. The main operation is just to remove the gallbladder (a cholecystectomy). But which gallbladder operation you have will depend on where the cancer is and whether it has spread to surrounding tissue or other body organs.

Radiotherapy and chemotherapy
Radiotherapy is used in a number of ways to treat gallbladder cancer. You are most likely to have it alongside other treatments. Your doctor may suggest radiotherapy after surgery to try and kill off any cancer cells that might have been left behind. This is likely to be as part of a clinical trial. You may have chemotherapy if your cancer has come back, or has grown too far to treat successfully with surgery.

Palliative treatment
Palliative means treatment to control symptoms. This is not a cure, although it may slow your cancer down a bit. If your cancer has spread too far to be cured, or has come back after it was first treated, your doctor may suggest radiotherapy, chemotherapy or both.

Which surgery for gallbladder cancer?
The surgery you need to have depends on the stage of your cancer. There are a number of possible operations used to try to remove gallbladder cancer.

Simple cholecystectomy
You have your whole gallbladder removed in this operation, and nothing else. You may have a cholecystectomy using a laparoscope. This is called a laparoscopic cholecystectomy (keyhole surgery). Extended or open cholecystectomy
If the cancer has spread throughout your gallbladder, your surgeon will then remove your whole gallbladder, about 2.5 cm (1 inch) of liver tissue nearest to the gallbladder, and all the surrounding lymph nodes. This is done to try to remove any cancer in these surrounding tissues.

Radical gallbladder resection
If the cancer has spread outside your gallbladder to nearby lymph nodes, you will need a bigger operation. Your surgeon will remove some of the surrounding tissues and lymph nodes. You may need to have other organs removed such as the pancreas, duodenum or part of your bowel.

Surgery to relieve symptoms (palliative surgery)
Even if your gallbladder cancer cannot be cured, you may need surgery to relieve your symptoms.

Having your gallbladder cancer operation
When you go in to hospital for your gallbladder operation, your surgeon, anaesthetist, nurse, physiotherapist and dietician will all come and talk to you. The surgeon will explain the operation. Ask as many questions as you need to. It may help to make a list beforehand.

Immediately after your operation
To start with, you are likely to have tubes in place to give you fluids, drain the wound, and drain your urine. Your nurses will encourage you to get up and about
as soon as possible. This helps prevent blood clots and chest infections. A physiotherapist will teach you breathing and leg exercises to help with this too.

You are likely to have some pain for the first few days. Tell your doctor and nurses, who will work with you to find the right painkiller for you. After surgery to any part of the digestive system, the bowel usually stops working for a while. Until it starts up again, you will not be able to eat or drink anything. How long it will take for you to be able to eat and drink depends on how much surgery you have had.

Making progress
After a few days you will gradually begin to feel better, and start to be up and about. It is natural to feel tearful after this type of surgery. You will need lots of support from doctors and nurses, family and friends to make a full recovery.

What to ask your doctor about surgery for gallbladder cancer

• Why do I need an operation?
• Which type of operation should I have and why?
• Will the operation cure my cancer?
• What are the risks and benefits of having this operation?
• What are the long term effects of this operation?
• Are you a specialist in this type of surgery?
• How often do you operate on this type of tumour?
• Will I have pain after this operation?
• How will I breathe after my operation?
• How long will I have a drip after surgery?
• When will I be able to start eating again?
• Will I be able to eat and drink normally after this operation?
• Who will help me with my diet after the operation?
• What are the possible complications of this type of operation?
• Will I need any other treatment as well as surgery?
• Is there any treatment I can have instead of surgery?
• What will happen if I don’t have the operation?

About chemotherapy for gallbladder cancer
Chemotherapy uses anti cancer (cytotoxic) drugs to destroy cancer cells. You have them into a vein (intravenously), or as a tablet by mouth. Chemotherapy alone will not cure gallbladder cancer but specialists do use it in several different situations.

You may have chemotherapy to treat gallbladder cancer that has spread to other parts of the body (advanced cancer). Some small studies have shown that chemotherapy in combination with surgery or radiotherapy may help to control locally advanced gallbladder cancer for short periods.

Doctors are also researching chemotherapy before surgery in some patients to see if it helps to stop the cancer from coming back later. But we need more results from clinical trials to know if chemotherapy helps people to live longer.

Chemotherapy drugs for gallbladder cancer and their side effects

Chemotherapy drugs
Doctors often use a combination of chemotherapy drugs to treat gallbladder cancer. The drugs most commonly used together are gemcitabine and cisplatin. If you are unable to have this, your doctor may offer either gemcitabine, fluorouracil (5-FU) or capecitabine instead.

Side effects
All chemotherapy drugs have side effects. Which ones you get depends on the drugs and dose you have and your body’s individual reaction. Common chemotherapy side effects are:

• A fall in the number of blood cells
• Feeling sick
• Diarrhoea
• Sore mouth and mouth ulcers
• Hair loss or thinning
• Feeling tired and run down
If you are low on white blood cells, you are more at risk of picking up infections. If this happens, you will need antibiotics. Being low on red blood cells causes tiredness and breathlessness. You may need to have a blood transfusion or treatment with erythropoietin.

**What to ask your doctor about chemotherapy for gallbladder cancer**

- Why do you think I need to have chemotherapy?
- What will the chemotherapy do for me?
- How will the chemotherapy be given to me?
- What will the side effects be?
- What should I do if I am worried about a side effect?
- Is there a number I can call for advice or in an emergency?
- How long will the treatment last?
- How often will I have to come to the hospital?
- Is it possible to get help with fares or transport to and from the hospital?
- Is there anything I will have to do at home (for example change the chemotherapy bags in a pump)?
- Who can help if I can’t manage?
- Are there any long term effects of this treatment?
- Is there a clinical trial that is suitable for me?

**About radiotherapy for gallbladder cancer**

Radiotherapy for advanced gallbladder cancer

Radiotherapy uses high energy rays to kill cancer cells. You may have radiotherapy if it isn’t possible to completely remove your gallbladder cancer with surgery, because it has spread too far. The treatment will not cure the cancer, but it may help to shrink it or slow it down. Doctors are not completely sure how much benefit there is from this treatment. Results from more clinical trials are needed. You are likely to have radiotherapy in combination with chemotherapy.

**Radiotherapy after surgery**

Radiotherapy after surgery is called adjuvant therapy. Small studies have suggested this may help to stop your cancer coming back. You might have this treatment because your surgeon thinks there may be cancer cells left behind after your operation. Or cancer cells were found in the lymph nodes your surgeon took out when you had your surgery. You are likely to have this treatment only as part of a clinical trial.

**Radiotherapy to relieve symptoms**

You may have radiotherapy to relieve the symptoms of advanced gallbladder cancer. This is called palliative radiotherapy.

**Having radiotherapy for gallbladder cancer**

Only hospitals that are cancer centres have radiotherapy equipment so you may have to travel further than your local hospital. You go to the hospital for treatment once a day, from Monday to Friday. The length of your treatment will vary, depending on the type and size of your cancer and on the aim of the treatment.

On your first visit, you will lie under a large machine called a simulator. Your specialist will use this to work out exactly where to target your radiotherapy. The actual treatment only takes a few minutes. It does not hurt, and you will not be able to feel it. You must lie very still for the few minutes it takes to treat you. Having external radiotherapy does not make you radioactive.

**Side effects**

Radiotherapy generally causes tiredness, and sore, red skin in the treatment area. Other side effects depend on where (on your body) you are having the treatment. Radiotherapy to the abdomen (tummy) can cause sickness and diarrhoea. Speak to your doctor or radiographer for help if you are troubled by side effects.

**What to ask your doctor about radiotherapy for gallbladder cancer**

- Why are you recommending radiotherapy for me?
- Are there different types of radiotherapy?
- Which type will I be having?
• Are there any other types of treatment I could have?
• How will the treatment help me?
• What are the likely side effects?
• How long will they last?
• Is there anything I can do to help with side effects?
• Are there any long term or permanent effects?
• How often will I have to come to the hospital for treatment?
• Can I get help with fares to and from the hospital?
• Is there any transport available?
• Will I have to stay in hospital and if so, for how long?
• Is there a number I can ring if I am worried about anything when at home?

What is advanced gallbladder cancer?
Advanced gallbladder cancer means the cancer has spread from where it started in the gallbladder and/or it has come back some time after you were first treated. Even if your doctor can’t cure your cancer, there is treatment available to control your symptoms. This may also shrink the cancer and slow it down, even if it can’t get rid of it.

Possible treatment
Chemotherapy, radiotherapy and surgery can be used to treat advanced gallbladder cancer. If your gallbladder is blocked, having a drainage tube called a stent put in will help to relieve symptoms. Some drug treatments can control particular symptoms, for example pain or sickness. You may also be offered pain control with nerve blocks.

Deciding about treatment
It can be difficult to decide which treatment to try, or whether to have treatment at all, when you have an advanced cancer. Your doctor will discuss the options with you. It can be helpful to talk over difficult decisions with someone who is outside your circle of family and friends. There may be a counsellor or specialist nurse at the hospital you could chat to.

Drug treatment for advanced gallbladder cancer

Chemotherapy
Chemotherapy may help treat your symptoms by shrinking the cancer. This can help to relieve pain or a partially blocked bowel causing sickness. A number of chemotherapy drugs have been used in trials for gallbladder cancer.

Relieving a blockage
Your doctor may suggest a drainage tube called a stent for a blockage, either to partially clear it or bypass it. If you have a blocked bowel, a drug may help to control the symptoms, instead of surgery.

Controlling pain and sickness
The commonest cancer symptoms are pain and sickness. Both of these can be kept well under control with drug treatment. Steroids may also help you feel better and increase your appetite. Or you may have them to help control sickness, particularly when caused by chemotherapy.

Experimental drug treatment
There are a few experimental treatments being investigated for cancer of the gallbladder. Much of this is in the very early stages. Only people with advanced cancer who have tried all other treatment are included in the first phase of clinical testing.

Radiotherapy for advanced gallbladder cancer
Your doctor may suggest radiotherapy for advanced gallbladder cancer. But there is a maximum total dose of radiotherapy you can have to any part of the body. So if you had radiotherapy to your abdomen when you were first treated, you may not be able to have any more to the same place.

You can have radiotherapy to another part of your body if your cancer has spread. Your doctor may suggest a combination of chemotherapy and radiotherapy to try to shrink and slow your cancer down.

You may have radiotherapy to relieve symptoms if your cancer is advanced. Your cancer may be
blocking your bile duct, causing jaundice or pressing on nerves, causing pain. The treatment can shrink the cancer for a time and relieve symptoms. You usually have this type of treatment daily, as a short course over a few days.

**Surgery and stents for advanced gallbladder cancer**

If you get jaundice, your doctor will suggest putting in a tube, called a stent, to stop the build up of bile that is causing your symptoms. This is generally a simple procedure that can be done with either a local anaesthetic or a sedative. In some situations, a blockage in the digestive system may also be relieved with a stent.

If the simpler procedures do not work for any reason, your doctor may suggest surgery to bypass the blockage and so relieve jaundice. Or you may need an operation to bypass a blockage in your digestive system caused by your cancer. These are both quite major operations.

If you are considering whether to have major surgery, you may want to talk this over with your close family and friends, as well as your doctor and nurse. No one can say how much you will benefit from the operation. But you may make a good recovery and feel better for longer with surgery.

**Side effects from having a stent**

The commonest side effect is soreness at the site where the needle went in. This should only last a day or two. Another possible side effect is infection. You may need to take antibiotics for a few days after your stent goes in to try to prevent infection.

**Pain control for advanced gallbladder cancer**

Pain is a common symptom of advanced gallbladder cancer. The pain may not be near your gallbladder, but in other areas where the cancer has spread. This may be in your spine or abdomen. The main method of controlling pain is to use painkillers such as morphine. But there are other painkillers. And there are other ways of reducing pain.

Both chemotherapy and radiotherapy can be used to help control pain. If you have pain that is difficult to treat, you may be offered a nerve block. This is a way of killing or numbing a nerve to stop it causing pain. There are also many other ways you and your family can help control your pain. These include relaxation, breathing, massage, and hot and cold packs.

Pain control is a complex area of medicine. There are nurses and doctors who are highly skilled in managing people’s pain. You really do need their advice and help. Whatever you take, make sure your doctor and nurse know. If it isn’t working, tell them. With the right prescription, it should be possible for just about everyone to be pain free at least when they are at rest, if not all the time.

**What to ask your doctor about treating advanced gallbladder cancer**

- Is my cancer too advanced to be cured?
- How can you tell?
- Can my cancer be controlled with treatment?
- What treatments are available?
- Will the treatment shrink the cancer, or slow it down?
- What are the side effects of the treatment?
- For how long will the treatment work?
- Are there any experimental treatments or trials I could try?
- Could you arrange for me to have a second opinion?
- What happens if I decide not to have the recommended treatment?
- Is there a counsellor here I could talk things through with?
- Will I be in pain?
- What can you offer to control pain?
- Is there a specialist nurse to help us with pain and other symptoms?
- Is there anyone who can give us financial advice?
- Are there any state benefits I can claim?
Follow up for gallbladder cancer

What happens during check ups
After your treatment has finished, your doctor will want you to have regular check ups. At check ups, your doctor may examine you. Your doctor will also ask you how you are feeling and whether you have had any symptoms or are worried about anything. At some visits, you may have blood tests, X-rays, or scans.

If you are having difficulty with your diet then you may want to come back to the hospital to see a dietician. You can arrange this through your specialist or nurse when you attend the outpatients’ clinic.

Worrying about your appointments
Many people find their check ups quite worrying. If you are feeling well and getting on with life, a hospital appointment can bring all the worry about your cancer back to you. You may find it helpful to tell someone close to you how you are feeling. If you are worried or notice any new symptoms between appointments, tell your doctor as soon as possible. You don’t have to wait until your next appointment.

It is quite common nowadays for people to have counselling after cancer treatment. To find out more about counselling, look in the ‘coping with cancer’ section of our website.

Gallbladder cancer research
All treatments must be fully researched before they can be adopted as standard treatment for everyone. This is so that we can be sure they work better than the treatments we already use. And so we know they are safe.

First of all, treatments are developed and tested in laboratories. Only after we know that they are likely to be safe to test are they tested in people, in clinical trials. Unfortunately, there are not that many trials for gallbladder cancer treatment in the UK as it is not a common cancer in this country.

There is research going on looking into new tests, combining treatments, chemotherapy, biological therapies and photodynamic therapy.

What to ask your doctor about treating gallbladder cancer

• What can you tell me about the stage of my cancer?
• What type of treatment do I need?
• If you are not sure about the stage, when will you know?
• How do you tell the stage of the cancer?
• What written information can you give me about these treatments?
• Is there any choice of treatments?
• Should I have any treatment before surgery?
• Should I have any other treatment after surgery?
• What are the risks and benefits of these treatments?
• What are the side effects?
• How can I help to reduce the side effects?
• How often will I have to come to the hospital for treatment?
• Is there any transport available?
• Is it possible to have any help with the cost of fares to the hospital?
• How long will the treatment last?
• Can I have a second opinion?
• Are there any experimental treatments or trials that might help me?
• Is there a counsellor here I could talk things through with?
• How often will you see me when my treatment is finished?
• What will happen at my follow up appointments?
• What should I do if I am worried between appointments?
• What pain control can you offer me?
• Do I have to have morphine, or are there other ways of controlling pain?
Treating Gallbladder Cancer – A Quick Guide

For more information, visit our website http://www.cruk.org/cancerhelp

You will find a wide range of detailed, up to date information for people affected by cancer, including a clinical trials database that you can search for trials in the UK. Our information is based on the best current scientific evidence and reviewed regularly by leading clinicians and experts in health and social care.

For answers to your questions about cancer call our Cancer Information Nurses on 0808 800 4040 9am till 5pm Monday to Friday.

Adapted from Cancer Research UK’s Patient Information Website CancerHelp UK in October 2012. CancerHelp UK is not designed to provide medical advice or professional services and is intended to be for educational use only. The information provided through CancerHelp UK and our nurse team is not a substitute for professional care and should not be used for diagnosing or treating a health problem or disease. If you have, or suspect you may have, a health problem you should consult your doctor. Copyright Cancer Research UK 2012. Cancer Research UK is a registered charity in England and Wales (1089464), Scotland (SC041666) and in the Isle of Man (I103)