

COMMON CANCER TERMINOLOGY

Consumer & Community Representatives

HEALTH SERVICE

Accreditation: The process by which a private or public agency evaluates and recognises an institution as fulfilling applicable standards. The determination that an institution meets these standards is also referred to as accreditation of the program or institution.

Cancer consumer organisations: Independent organisations which provide the view of people affected by cancer

Cancer control: An integrated and coordinated approach to reducing cancer incidence, morbidity and mortality through prevention, early detection, treatment, rehabilitation and palliation.

Cancer support group: A cancer support group is made up of people who meet regularly about common issues and provide emotional and practical support to one another.

Clinical pathway: Multidisciplinary plans of best clinical practice for specified groups of patients with a particular diagnosis, that aid in the coordination and delivery of high quality care.

Clinical practice guidelines: Evidence-based guidelines developed to help health care professionals and patients make decisions about screening, prevention or treatment of a specific health condition.

Community: The broad range of stakeholders with an interest in health services. This includes individual consumers, organisations and groups, health professionals and specific populations.

Comprehensive cancer centre: a cancer centre which can offer all treatments and multidisciplinary teams for most cancers.

Consumer: An individual who uses or is a potential user of health services, including the family and carers of patients and clients.

Medicare: A national, Government-funded scheme that covers all Australians to help them afford medical care, by subsidising the cost of personal medical services.

Multidisciplinary care: An approach combining the knowledge, skills and expertise of a range of organisations and professionals, whereby all members of the team liaise and cooperate together with the patient to diagnose, treat and manage the condition to the highest possible standard of care.

Multidisciplinary team or MDT: A group of health professionals from different disciplines, who meet to discuss relevant treatment options and develop an individualised treatment plan for each patient.

Pharmaceutical Benefits Schedule (PBS): The PBS Schedule lists all of the medicines available to be dispensed to patients at a Government-subsidised price. The Schedule is part of the wider Pharmaceutical Benefits Scheme managed by the Department of Health and Ageing and administered by Medicare Australia.

Population health: The health of groups, families and communities. Populations may be defined by locality, biological criteria such as age or gender, social criteria such as socio-economic status, or cultural criteria.

Population screening: The process of looking for disease in a defined population that has no obvious symptoms.

HEALTH PROFESSIONALS

Allied health professionals: Specially trained and/or licensed health care workers, other than medical practitioners, nurses, dentists. For example, social workers, physiotherapist, radiotherapists and psychologists.

Cancer Nurse Coordinator: A nurse with specialist and expert training in cancer care who facilitates patient-centred cancer care, and continuity of care throughout the patient's cancer journey.

Genetic Counsellor: A health professional who provides advice and counselling for individuals with a family history of cancer.

Lead Clinician: A clinician member of an area-wide, site-specific clinical group who takes responsibility for the group's coordination and operation. This clinician need not necessarily be the most professionally or academically senior member of the group. (Source: NSW Health (2003) A Clinical Service Framework for Optimising Cancer Care in NSW)

Medical Oncologist: A doctor who specialises in diagnosing and treating cancer using chemotherapy, hormonal therapy, and biological therapy. A medical oncologist often is the main health care provider for someone who has cancer. A medical oncologist also gives supportive care and may coordinate treatment given by other specialists.

Medical Physicist: Scientific specialist who establishes implements and monitors processes that allow optimal treatment using radiation, taking account of the radiation protection of patients and others.

Occupational Therapist: A health professional who specialises in helping people to do things that will enhance their ability to participate in everyday life through particular activities or by modifying the environment to better support participation.

Oncologist: A doctor who specialises in treating cancer. Some oncologists specialise in a particular type of cancer treatment, e.g. Medical oncologist, radiation oncologist, surgical oncologist.

Palliative care specialist / palliative care teams: A palliative care team may involve a consultant, a nurse and volunteers. The team works with your specialist, general practitioner and community nurse to help you with control of pain and other symptoms you may have, and give emotional support to you and your family or carers. Your need for palliative care can be assessed in your home, hospital or palliative care unit.

Pathologist: A doctor who diagnoses and characterises diseases by examining cells, tissue or fluid removed from the body.

Physiotherapist: A health professional who specialises in promoting movement and exercise after treatment.

Psychologist: A health professional who specialises in providing emotional support and managing emotional difficulties such as anxiety, distress and depression.

Psychiatrist: A doctor who specialises in diagnosing and managing mental illness.

Radiation Oncologist: A medical practitioner who specialises using radiotherapy in the treatment of patients with cancer.

Radiation Therapist: A health professional who assists in planning and giving radiotherapy

Radiologist: A health professional who examines mammograms, ultrasounds and other imaging results and may perform biopsies or help locate cancers prior to surgery.

Social Worker: a health professional who specialises in providing emotional support, counselling and advice about some practical and legal matters.

DISEASE TERMINOLOGY

Acute disease: Symptoms or signs that begin and worsen quickly; not chronic.

Carcinoid: A slow-growing type of tumour usually found in the gastrointestinal system (most often in the appendix), and sometimes in the lungs or other sites. Carcinoid tumours may spread to the liver or other sites in the body, and they may secrete substances such as serotonin or prostaglandins, causing carcinoid syndrome.

Chronic disease: A disease that has one or more of the following characteristics: permanent, leaves residual disability, is caused by non-reversible pathological alteration, requires special training of the patient for rehabilitation, or may be expected to require a long period of supervision, observation or care.

Distant metastasis: Refers to cancer that has spread from the original (primary) tumour to distant organs or distant lymph nodes. Also known as distant cancer.

Early-stage cancer: Cancer that is early in its growth, and may not have spread to other parts of the body. What is called early stage may differ between cancer types.

Familial cancer: Cancer that occurs in families more often than would be expected by chance. These cancers often occur at an early age, and may indicate the presence of a gene mutation that increases the risk of cancer. They may also be a sign of shared environmental or lifestyle factors.

Germ cell tumour: A type of tumour that begins in the cells that give rise to sperm or eggs. Germ cell tumours can occur almost anywhere in the body and can be either benign or malignant.

Grade: A term used to describe how abnormal cancer cells look under a microscope and how quickly the tumour is likely to grow and spread. Grading systems are different for each type of cancer.

High grade: When referring to cancerous and precancerous growths, a term used to describe cells that look abnormal under a microscope. These cells are more likely to grow and spread quickly than low-grade cancerous and precancerous growths.

Late-stage cancer: A term used to describe cancer that is far along in its growth, and has spread to the lymph nodes or other places in the body.

Lesion: An area of abnormal tissue. A lesion may be benign (noncancerous) or malignant (cancerous).

Localised: Restricted to the site of origin, without evidence of spread.

Low-grade: When referring to cancerous and precancerous growths, a term used to describe cells that look nearly normal under a microscope. These cells are less likely to grow and spread quickly than high-grade cancerous or precancerous growths.

Lymphoedema: Swelling of the subcutaneous tissues caused by obstruction of the lymphatic drainage. This results from fluid accumulation and may arise from surgery, radiation or the presence of a tumour in the area of the lymph nodes.

Lymphoma: Cancer that begins in the cells of the immune system. There are 36 different subtypes of lymphoma.

Malignancy: A cancerous tumour that can invade and destroy nearby tissue and spread to other parts of the body.

Metastasis: The spread of cancer from one part of the body to another. A tumour formed by cells that have spread is called a 'metastatic tumour', 'metastasis' or 'secondary cancer'. The metastatic tumour contains cells that are like those in the original (primary) tumour. The plural form of metastasis is metastases.

Recurrence: Cancer that has come back (recurred), usually after a period of time during which the cancer could not be detected. The cancer may come back at the same site as the original (primary) tumour or in another part of the body. Also called recurrent cancer.

Stage: the extent of a cancer in the body. Staging is usually based on the size of the tumour, whether lymph nodes contain cancer, and whether the cancer has spread from the original site to other parts of the body.

TREATMENTS

Adjuvant therapy: Treatment given in addition to initial (primary) treatment. For example, chemotherapy, radiation therapy and hormonal therapy.

Algorithm: An algorithm is a series of finite instructions. It is a method in which a series of defined instructions for completing a task well, when given an initial state (eg cancer type or stage), proceed through a well-defined series of successive states, eventually terminating in an end state.

Alternative therapies: Treatments used instead of conventional (standard) treatments.

Ambulatory care: Health services provided without the patient being admitted to hospital. Also called outpatient care.

Biopsy: Sampling of a small piece of tissue for laboratory analysis.

Biomarker: A biological molecule found in blood, other body fluids, or tissues that is a sign of a normal or abnormal process, or of a condition or disease. A biomarker may be used to see how well the body responds to a treatment for a disease or condition. Also called molecular marker and signature molecule.

Biological therapy: Therapies that work with a patient's immune system to kill cancer cells or help control side effects of other treatments.

Brachytherapy: A type of radiotherapy where radioactive seeds are implanted to treat tumours.

Chemoprevention: The use of drugs, vitamins, or other agents to try to reduce the risk of, or delay the development or recurrence of, cancer.

Chemotherapy: Treatment with drugs that kill cancer cells.

Combined modality treatment: The integration of two or more forms of treatment to combat cancer, i.e. radiation and surgery, radiation and chemotherapy or surgery, radiation and chemotherapy.

Complementary therapies: A range of approaches to care provision aimed at enhancing quality of life, including (but not limited to) relaxation therapy, music, art, prayer, visualisation, guided imagery, massage, aromatherapy and dietary therapies, and other socialisation programs aimed at good health. Also called Integrative medicine.

CT Scan: A series of detailed pictures of areas inside the body taken from different angles; the pictures are created by a computer linked to an x-ray machine. Also called CAT scan, computed tomography scan, computerized axial tomography scan, and computerized tomography.

Debulking: Surgical removal of as much of a tumour as possible. Debulking may increase the chance that chemotherapy or radiation therapy will kill all the tumour cells. It may also be done to relieve symptoms or help the patient live longer. Also called tumour debulking.

Follow-Up: Monitoring a person's health over time after treatment. This includes keeping track of the health of people who participate in a clinical study or clinical trial for a period of time, both during the study and after the study ends.

Genetic profile: Information about specific genes, including variations and gene expression, in an individual or in a certain type of tissue. A genetic profile may be used to help diagnose a disease or learn how the disease may progress or respond to treatment with drugs or radiation.

Hormonal therapy: Drugs that kill or slow the growth of cancer cells by altering the production or activity of hormones in the body. Typically used in the treatment of breast and prostate cancer.

Integrative medicine: See complementary therapies

Linear accelerator: Machinery that produces beams of X-rays or high-energy electrons that are focused onto a tumour within the body. Also known as a linac.

Margin: The edge or border of the tissue removed in cancer surgery. The margin is described as 'negative' or 'clear' when the pathologist finds no cancer cells at the edge of the tissue, suggesting that all of the cancer has been removed. The margin is described as 'positive' or 'involved' when the pathologist finds cancer cells at the edge of the tissue, suggesting that all of the cancer has not been removed.

MRI: A procedure in which radio waves and a powerful magnet linked to a computer are used to create detailed pictures of areas inside the body. These pictures can show the difference between normal and diseased tissue. MRI makes better images of organs and soft tissue than other scanning techniques, such as computed tomography (CT) or x-ray. MRI is especially useful for imaging the brain, the spine, the soft tissue of joints, and the inside of bones. Also called magnetic resonance imaging, NMRI, and nuclear magnetic resonance imaging.

Nomogram: A nomogram is a graphical calculating device intended as a general purpose device designed to perform a specific calculation with tables of values effectively built in. In cancer, nomograms are used to predict things like survival time based on individual patient characteristics.

Palliative care: The active total care of patients whose disease is not responsive to curative treatment. Control of pain, of other symptoms, and of psychological, social and spiritual problems is paramount. The goal of palliative care is to achieve the best quality of life for patients and their families.

Pathology: The branch of medicine concerned with diagnosing the disease, especially its histology, biochemistry or cytology.

PET scan: A procedure in which a small amount of radioactive glucose (sugar) is injected into a vein and a scanner is used to make detailed, computerized pictures of areas inside the body where the glucose is used. Because cancer cells often use more glucose than normal cells, the pictures can be used to find cancer cells in the body. Also called positron emission tomography scan.

Psychosocial support: The culturally sensitive provision of psychological, social and spiritual care.

Radiotherapy: The use of high-energy radiation from x-rays, gamma rays, neutrons, protons, and other sources to kill cancer cells and shrink tumours. Radiation may come from a machine outside the body (external-beam radiation therapy), or it may come from radioactive material placed in the body near cancer cells (internal radiation therapy). Systemic radiotherapy uses a radioactive substance, such as a radiolabeled monoclonal antibody, that travels in the blood to tissues throughout the body. Also called irradiation and radiation therapy.

Sentinel node biopsy: Removal and examination of the sentinel node(s) (the first lymph node(s) to which cancer cells are likely to spread from a primary tumour). To identify the sentinel lymph node(s), the surgeon injects a radioactive substance, blue dye, or both near the tumour. The surgeon then uses a scanner to find the sentinel lymph node(s) containing the radioactive substance or looks for the lymph node(s) stained with dye. The surgeon then removes the sentinel node(s) to check for the presence of cancer cells.

Synoptic pathology reporting: The synoptic report arranges pathology information in a logical way that acts as a checklist for pathologists and provides managing clinicians with ready access to the most important pathology information.

Ultrasound: A procedure in which high-energy sound waves (ultrasound) are bounced off internal tissues or organs and make echoes. The echo patterns are shown on the screen of an ultrasound machine, forming a picture of body tissues called a sonogram. Also called ultrasonography.

Targeted therapy: Drugs that block or slow the growth of cancer cells by interfering with or blocking particular molecules or receptors involved in cancer development.

Treatment protocol: A treatment plan or outline. In clinical trials, a protocol is the plan for using an experimental procedure or treatment.

EPIDEMIOLOGY

Cancer incidence: The number of new cases of cancer occurring in a defined population during a given period.

Cancer mortality: Deaths from cancer in a defined population during a specified period. It may be used to denote numbers or rates.

Cancer prevalence: The number of people alive on a certain date in a population who have been previously diagnosed with cancer. It includes new cancers (incidence) and pre-existing cancers and represents the number of people both newly diagnosed and surviving.

Cases: These are individual cancers. A person may have more than one cancer, giving rise to multiple cases in the same person. Second cases in one person are counted only if they are of different cell type or originate in a different organ.

Central Cancer Registry: Central Cancer Registry: Also known as a population-based cancer registry. Central cancer registries collect incidence and survival data on all cancer patients who reside in a defined geographical area or who are diagnosed and/or treated for cancer in a geographical area. Population based cancer registries are essential for assessing the extent of cancer burden in a specific geographic area.

Clinical Cancer Registry (ClinCR): Cancer information system that allows for the monitoring of the quality of care and outcomes for cancer patients and their carers.

Cohort: A group of individuals who share a common trait, such as birth year. In medicine, a cohort is a group that is part of a clinical trial or study and is observed over a period of time.

Crude rate: An estimate of the proportion of a population that is diagnosed with (or dies from) cancer during a specified period. It is usually expressed per 100,000 people in the population per year.

Disease-free survival: The length of time after treatment for a specific disease during which a patient survives with no sign of the disease. Disease-free survival may be used in a clinical study or trial to help measure how well a new treatment works.

Epidemiology: The study of the patterns, causes, and control of disease in groups of people.

Hazard ratio: A measure of how often a particular event happens in one group compared to how often it happens in another group, over time. In cancer research, hazard ratios are often used in clinical trials to measure survival at any point in time in a group of patients who have been given a specific treatment compared to a control group given another treatment or a placebo. A hazard ratio of one means that there is no difference in survival between the two groups. A hazard ratio of greater than one or less than one means that survival was better in one of the groups.

Incidence: The number of new cases of a disease diagnosed each year.

Incidence rate: The number of cancer cases recorded per 100,000 population.

Indicators (or benchmarks): Measures which help quantify the achievement of a result. For example, to measure child health, the rate of low birth-weight babies, or the rate of emergency room accidents may be used as indicators.

Minimum dataset or MDS: A dataset implemented by Cancer Institute NSW that describes cancer type, stage, treatment and quality of care for each cancer patient but does not provide detailed information specific to individual tumour types.

Morbidity: A disease or the incidence of disease within a population. Morbidity also refers to adverse effects caused by a treatment.

Mortality rate: Number of cancer deaths recorded per 100,000 population.

Overall survival: The percentage of people with a particular disease who are alive after a specified period of time. Often quoted in periods of 5-years.

Risk:

1. Relative risk: A way of comparing risk in two groups of people. For example the risk of cancer coming back in people treated with a particular drug compared with those who do not receive treatment.

2. Absolute risk: The risk of developing a disease over a particular time period. This is the way most people consider risk – e.g. 27 per cent risk means a chance of 27 out of 100. Relative risk sounds much higher and can be confusing when “translated” to absolute risk. Much used by the media and researchers to make their findings appear stronger.

Prevalence rate: Number of people living with a diagnosis of cancer per 100,000 population.

ANATOMY/BIOLOGY

Carcinogen: Any substance that causes cancer.

Cytology: The study of cells and cellular changes

Histology: The study of tissues and cells under a microscope.

Lymph node: A rounded mass of lymphatic tissue that is surrounded by a capsule of connective tissue. Lymph nodes filter lymph (lymphatic fluid), and they store lymphocytes (white blood cells). They are located along lymphatic vessels. Also called lymph gland.

Lymph: The clear fluid that travels through the lymphatic system and carries cells that help fight infections and other diseases. Also called lymphatic fluid.

Oncology: The science of the treatment of malignant cancers, either with surgery, radiotherapy, chemotherapy or combinations of these modalities.

Sentinel (lymph) node: The first lymph node to which cancer is likely to spread from the primary tumour. When cancer spreads, the cancer cells may appear first in the sentinel node before spreading to other lymph nodes.

COMMON ACRONYMS

ACRRM: Australian College of Rural and Remote Medicine

AGITG: Australian Gastro-intestinal Trials Group (*a co-operative group sponsoring clinical trials in gastro-intestinal cancers*)

AHS: Area Health Service

ALLG: Australasian Leukaemia and Lymphoma Group (*a co-operative group sponsoring clinical trials in haematological cancer*)

ALTG: Australian Lung Cancer Trials Group (*a co-operative group sponsoring clinical trials in lung cancer*)

ANZBCTG: Australia New Zealand Breast Cancer Trials Group (*a co-operative group sponsoring clinical trials in breast cancer*)

ANZCHOG: Children's Haematology and Oncology Group (*a co-operative group sponsoring clinical trials in childhood cancer*)

ANXCTR: Australian & NZ Clinical Trials Register

ANZGCTG: Australia New Zealand Germ Cell Trials Group (*a co-operative group sponsoring clinical trials in germ cell cancers*)

ANZGOG: Australia New Zealand Gynaecological Oncology Group (*a co-operative group sponsoring clinical trials in gynaecological cancers*)

ANZMTG: Australia and New Zealand Melanoma Trials Group (*a co-operative group sponsoring clinical trials in melanoma*)

APUG: Australian Prostate and Urogenital Group (*a co-operative group sponsoring clinical trials in urogenital cancer*)

ASSG: Australian Sarcoma Study Group (*a co-operative group sponsoring clinical trials in sarcomas*)

AYA: Adolescent and Young Adult

BCC: Border Cancer Collaboration

CanNET: The Cancer Service Networks National Demonstration Program.

CCA: Cancer Council Australia

CCNSW: The Cancer Council NSW

CI: Coordinating Investigator (of a research project)

CI-SCAT: Cancer Institute NSW Standard Cancer Treatments (*a Cancer Institute NSW website providing clinicians with evidence based cancer chemotherapy protocols*).

ClinCR: Clinical Cancer Registry

COGNO: Cooperative Trial Group for Neuro-oncology (*a co-operative group sponsoring clinical trials in brain tumours*)

COSA: Clinical Oncological Society of Australia

CNSA: Cancer Nurses Society of Australia

CSDMs: Cancer Service Development Managers

CT: Computerised Tomography

CTN: Cancer Trials Network (*a partnership between the Cancer Council NSW and the Cancer Institute NSW*)

CVN: Cancer Voices NSW

DACS: Director of Area Cancer Services

EOI: Expression of Interest

GMCT: Greater Metropolitan Clinical Taskforce (*an autonomous organisation established by NSW Health to promote clinician and consumer involvement in planning and health service delivery*)

GSAHS: Greater Southern Area Health Service

GWAHS: Greater Western Area Health Service

HNEAHS: Hunter New England Area Health Service

HREC: Human Research Ethics Committee

LINAC: Linear Accelerator (*a device used to deliver therapeutic radiation*)

MBS: Medicare Benefits Scheme

MDC: Multidisciplinary care

MOGA: Medical Oncology Group of Australia

MRI: Magnetic resonance imaging

NBOCC: National Breast and Ovarian Cancer Centre

NCAHS: North Coast Area Health Service

NCCI: North Coast Cancer Institute

NHMRC: National Health and Medical Research Council

NSCCAHS: Northern Sydney Central Coast Area Health Service

NSWOG: NSW Oncology Group

PBS: Pharmaceutical Benefits Schedule

PET: Positron Emission Tomography

PI: Principal Investigator (of a research project)

PMF: Patient Management Framework

PoCoG: Psycho-oncology Cooperative Research Group (*a co-operative group sponsoring clinical trials in psycho-oncology and quality of life*)

PSA: Prostate Specific Antigen (*a chemical found in the blood which can signal the presence of prostate cancer*)

RACGP: Royal Australian College of General Practitioners

RACP: Royal Australasian College of Physicians

RACS: Royal Australasian College of Surgeons

RANZCOG: The Royal Australian and New Zealand College of Obstetricians and Gynaecologists

RANZCR: Royal Australian and New Zealand College of Radiologists

RCPA: The Royal College of Pathologists of Australia

RNSH: Royal North Shore Hospital

RPA: Royal Prince Alfred Hospital

SAH: Sydney Adventist Hospital

SESAHS: South Eastern Sydney Illawarra Area Health Service

SSWAHS: Sydney South West Area Health Service

SWAHS: Sydney West Area Health Service

TROG: Trans-Tasman Radiation Oncology Group (*a co-operative group sponsoring clinical trials in radiotherapy*)

TGA: Therapeutic Goods Administration

VMO: Visiting Medical Officer