

WHAT YOU SHOULD KNOW ABOUT

Metastatic Colorectal Cancer

Learning the basics of metastatic colorectal cancer

If you or a family member has been diagnosed with metastatic colorectal cancer (mCRC), this brochure will provide information to help you learn about the disease and help you focus on what matters most to you. Whether you have colorectal cancer or are helping to care for a loved one who was diagnosed with the disease, you are taking a positive step by learning about mCRC and taking an active role in its treatment.

On the next pages, you will find information about mCRC and suggestions about how to speak with your health care team. Remember, always discuss any questions you may have with your doctor and health care team, and keep this resource on hand to refer back to as you gather important information throughout your journey.



Your treatment glossary:

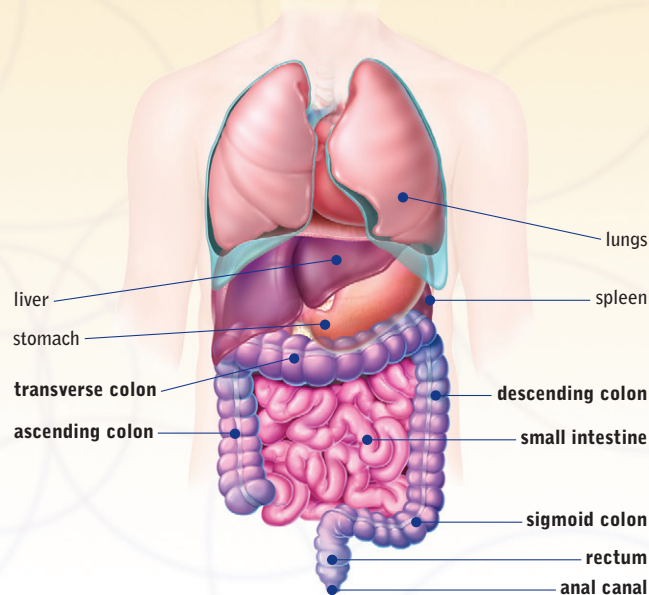
Boldface words are defined in a glossary on page 13. If there are words about your condition or your treatment that you do not understand, ask your doctor or health care team to explain them further.

What is metastatic colorectal cancer (mCRC)?

Understanding your digestive system

As you learn about mCRC, it's helpful to know what your digestive system does and how the colon and rectum work. The colon and rectum are part of the digestive system (sometimes called the gastrointestinal, or GI tract). The digestive system processes the food we eat and eliminates solid waste matter (feces, or **stool**) from the body.

Colon and rectal cancers are alike in many ways, which is why they are often discussed together as colorectal cancer. However, sometimes these cancers are referred to separately as colon cancer or rectal cancer, depending on where they start.



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The digestive system consists of the esophagus, stomach, and the small and large intestines.

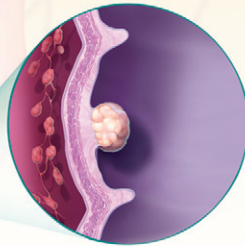
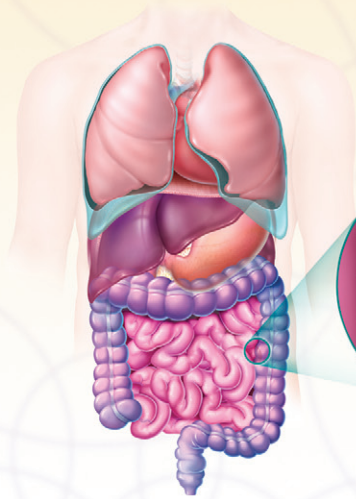


Understanding mCRC

Colorectal cancer is a disease that usually begins as a small clump of benign cells (called a **polyp**) that starts to grow in the inner wall of the colon or rectum. These cells can become cancerous, dividing without control and forming a growth, or a **primary tumor**. As the **tumor** grows, it can spread to nearby tissue outside the colon or rectum. Eventually, cancer cells can break away and travel through the bloodstream or the **lymph system** to form new tumors in other parts of the body such as the liver or lungs. This spreading process is called **metastasis**, and your health care team may refer to this type of cancer as advanced, metastatic, or stage IV colorectal cancer. Even though the cancer can spread and form new **metastatic tumors** in other parts of the body, the cells come from the primary tumor that originated in the colon or rectum, so it is still considered colorectal cancer.

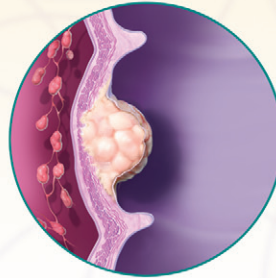
What are the stages of colorectal cancer?

Stages are determined by the size of the cancer, **lymph node** involvement, and extent of spreading. The stage of colorectal cancer is one of the most important factors in selecting treatment options. If you have any questions about your stage, ask your health care team, “Has the cancer spread to other parts of my body? If so, where?”



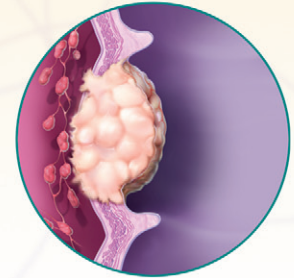
Stage 0

Tumor is small in size and limited to the inside lining of the colon or rectum



Stage I

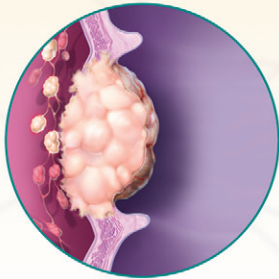
Tumor has moved into the inner wall of the colon or rectum, without spreading beyond the wall



Stage II

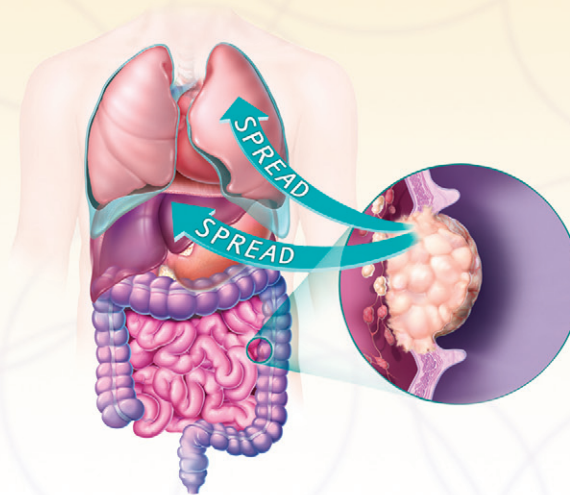
Tumor has gone through the wall of the colon or rectum, affecting nearby tissue, without affecting **lymph nodes**

What are the stages of colorectal cancer? (continued)



Stage III

Tumor has spread to nearby lymph nodes, but not to other parts of the body



Stage IV

Tumor has spread to other parts of the body, such as liver and lungs

mCRC is considered stage IV, which means that the cancer has spread to other organs in the body.

You're unique, and so is your cancer

Whether you have cancer for the first time or if it has come back—you are unique, and so is your cancer. This means that you will need to talk about your health and personal goals with your doctor and health care team to make sure that you are getting the maximum benefit from each and every medicine you decide to take. Some factors that may influence the type of treatment you and your health care team decide to choose include

- Stage of cancer
- Your physical health
- Prior treatment
- Your personal and treatment goals



Your health care team wants to know

Your health care team, which includes your oncologist, your primary care doctor, nurses, and your family members, plays a vital role in your treatment. When discussing and creating a plan to fight your cancer, **be sure to tell your health care team how you feel.** Let them know what you think about the therapies available to you. Every person approaches treatment differently, so try to work with your health care team to come up with the right plan for you.

Taking an active role

Even though you have colorectal cancer, you still have a life to live. Taking an active role means doing everything you can do to feel better and to manage your treatment goals and plans. Here's how you can start:

- 1. Understand your treatment.** Know the anticancer treatments you are given and what to expect. Keep a record of your medicines, when to take them, and the possible side effects. Work with your doctor and health care team—ask questions so that you can understand how your medicines work. See the example questions on page 10 to get started.
- 2. Talk to your doctor about your treatment goals.** Share your medical history with your doctor and share your goals for treatment. Some discussions may feel uncomfortable because you are sharing personal information, but being honest about what you want from your treatment can help ensure that you can get the best treatment available for you.
- 3. Keep track of how you're feeling and let your health care team know about it.** Keeping a notebook can help you understand how you are feeling and can help you keep track of changes in your health. Write down side effects you notice and then talk to your doctor or nurse. Knowing how you're doing on treatment can help your health care team provide the best care for you.
- 4. Stay involved in all decision making.** Learn as much as you can about colorectal cancer by seeking out information or talking with other people who have colorectal cancer. The following pages have contact information to help you learn more about colorectal cancer. Knowing more about your disease will help you and your health care team make the best possible treatment decisions for you.

Staying on therapy

Doing everything you can do to get the most out of your therapy includes following your treatment plan as closely as possible. This means sticking to your doctor's directions and staying on therapy for as long as needed.

If you experience a side effect that makes it difficult to stay on therapy, talk to your doctor or health care team about figuring out a way to make it easier. A member of your health care team may be able to help you manage a side effect that bothers you or that does not go away, such as nausea or vomiting.



Questions to ask your health care team

Having open, honest discussions with your doctor means asking questions and understanding what will happen before, during, and after your treatments. Always discuss with your health care team any questions you have about cancer therapy. Here are a few questions to help you get started:



1. Which treatments will I be receiving, and what will they do?
2. What can I do to take care of myself during treatment?
3. Should I change my diet?
4. How often will I receive treatments?
5. Where will I go for treatment?
6. How long will I be on treatment?
7. How will I know if the treatment(s) is (are) working?
8. Which side effects should I look for?
9. Whom do I call if I want more information and support?

Support



Many people living with cancer find that they can learn and get the support they need when they read about cancer or talk to others who are also living with cancer. Here are some ways to get and give support:

- Join a support group, either in person or on the Web
- Volunteer to help others with colorectal cancer; offer your story
- Become a colorectal cancer educator or speaker
- Attend social events to meet other people who are living with colorectal cancer

Where to find support and resources

Many national organizations offer local and online support groups for people with cancer and their family members or friends. Some places to start your search for a local group include:

American Gastroenterological Association*

Medical specialist website featuring patient information about digestive system diseases, including colorectal cancer.
www.gastro.org/patient

Cancer.net*

Web resource providing timely, oncologist-approved information from the American Society of Clinical Oncologists to help patients and families make informed health care decisions.
1-888-651-3038
www.cancer.net

Colon Cancer Alliance*

A national patient advocacy organization that provides patient support, education, research, and advocacy across North America.
1-877-422-2030
www.ccalliance.org

National Cancer Institute*

Current information about cancer, clinical trials, and resources.
1-800-4-CANCER (1-800-422-6237)
www.cancer.gov

National Comprehensive Cancer Network

NCCN creates clinical practice guidelines for use by patients, clinicians, and other health care decision-makers with the goal of improving the quality of oncology practice.
1-215-690-0300
www.nccn.org

Local hospitals and cancer clinics are also good sources for finding support groups. Doctors, nurses, or hospital social workers may have information about support groups, such as their location, size, type, and how often they meet. Hospitals also have social services departments that usually provide information about cancer support programs.

*Genentech USA, Inc. is neither affiliated with nor endorses this organization. The information provided by Genentech USA, Inc. or this organization is meant for informational purposes only and is not meant to replace a physician's medical advice.

Glossary

Lymph nodes: Small, bean-shaped collections of immune system cells that help fight infection and have a role in fighting cancer. (See page 5.)

Lymph system: The tissues and organs that produce, store, and carry white blood cells that fight infections and other diseases. (See page 4.)

Metastasis (metastatic): The spread of cancer from the primary site or origin to distant sites in the body. (See page 4.)

Metastatic tumor: A tumor that develops in a different location than the primary tumor as a result of the spreading of the primary tumor cells. (See page 4.)

Polyp: A small clump of cells that can become cancerous, grow, and eventually spread to other parts of the body. (See page 4.)

Primary tumor: The original tumor (eg, a primary colorectal tumor is one that first appears in the colon or rectum as opposed to a metastatic tumor, which would develop in a different location as a result of the spreading of the primary tumor cells). (See page 4.)

Stool: Solid waste matter; discharge of the bowels. (See page 3.)

Tumor: An abnormal lump or mass of tissue that can be cancerous (malignant) or noncancerous (benign). (See page 4.)

Resources

Need more information about colorectal cancer? Don't know what some of the terms mean? Explore the links below and see the glossary on page 13.

American Cancer Society

Cancer information services, community programs and services, research, and advocacy.

1-800-ACS-2345 (1-800-227-2345)

www.cancer.org

National Cancer Institute

Current information about cancer, clinical trials, and resources.

1-800-4-CANCER (1-800-422-6237)

www.cancer.gov

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