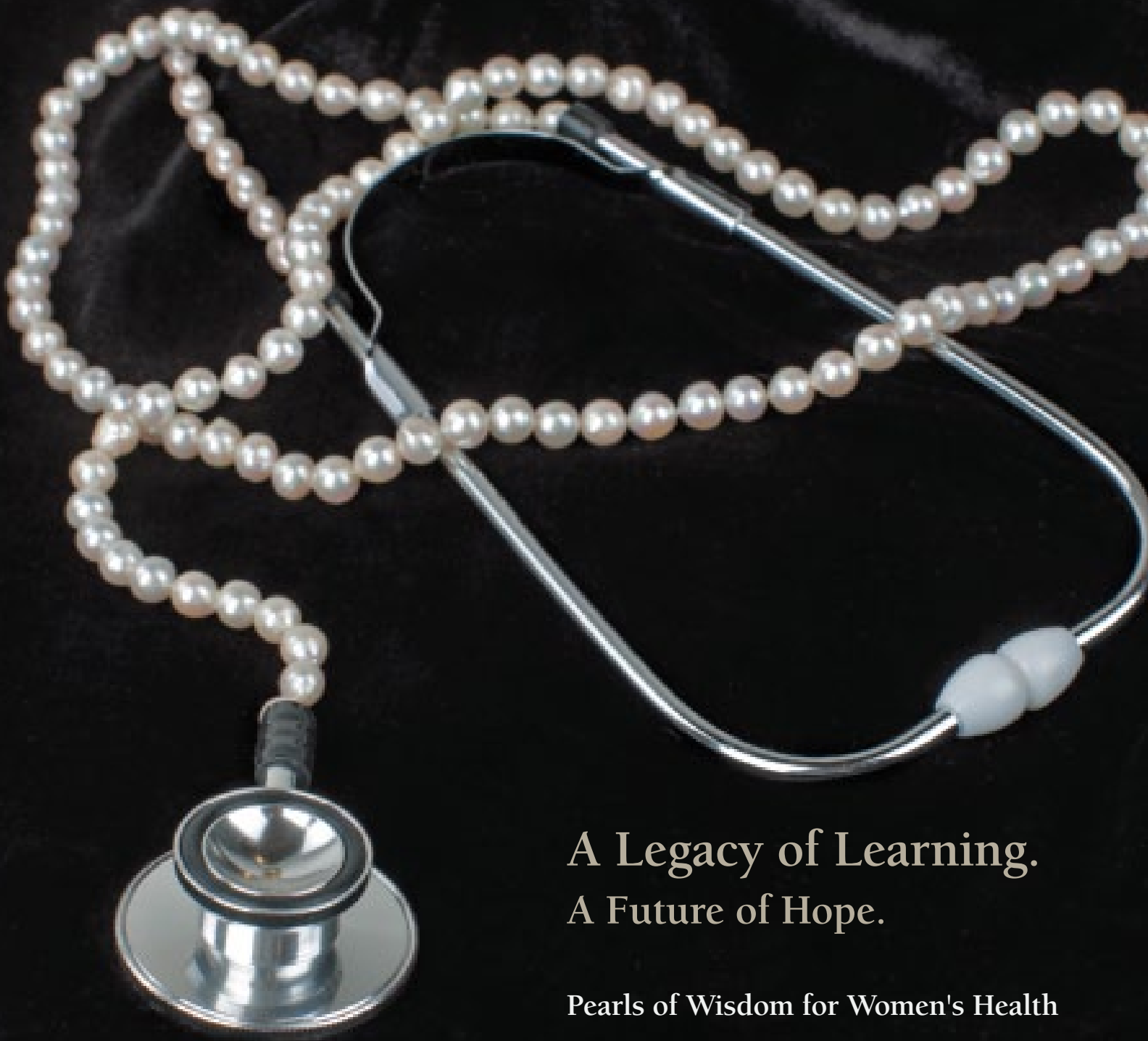


Winter 2010

Frontiers

The University of Tennessee Medical Center and The University of Tennessee Graduate School of Medicine



*A Legacy of Learning.
A Future of Hope.*

Pearls of Wisdom for Women's Health

For Alumni and Friends



Gynecologic Oncology:

Treating Female Cancers with Dignity,
Grace & Advancements

D picture yourself going through your days feeling good and enjoying your family and friends. You're living life to the fullest and making plans for the future. Then one day you're told you have cancer. Life changes.

For more than 80,000 women in the United States each year, a new diagnosis of gynecologic cancer is a reality. Many of these women had no symptoms and their cancer was discovered in the course of a routine checkup. Others may have experienced symptoms such as a loss of appetite, nausea, pain or discomfort, a feeling of fullness, an unexplained weight gain or loss, abnormal vaginal bleeding, frequent urination, or a combination of these.

If you receive a diagnosis of cancer, it's important to know there are experts who not only can provide you with advanced diagnostic and treatment options but also understand the

associated issues and are there to support you every step of the way. University Gynecologic Oncology at the University of Tennessee Medical Center Cancer Institute offers women access to a comprehensive team of cancer specialists focused on the treatment of gynecologic cancers and provides additional resources and support. Patients benefit greatly from being treated by physicians in the gynecologic oncology specialty, who manage the patient's care from start to finish – from preventive care to surgery to chemotherapy and follow up.

“One of the great things about University Gynecologic Oncology,” says Kristopher J. Kimball, MD, a medical center physician in the specialty, “is the amazing services for patient care and support that we have available through the Cancer Institute, which allow us to offer truly comprehensive gynecologic oncology services. We attempt to address all the



unmet needs of patients with a new diagnosis of cancer, not just surgery and chemotherapy. Whether it be disease-specific educational materials, nutritional teaching, spiritual counseling, patient support groups, financial services, or dedicated clinical research specialists, we can put patients in touch with someone who can help.”

Gynecologic oncology focuses on cancers of the female reproductive system, including:

- Ovarian cancer
- Uterine cancer
- Cervical cancer
- Endometrial cancer
- Other female genital cancers

Gynecologic cancer is the fourth most common type of cancer in females, affecting an estimated one in 20 women.

Regular exams and tests can help detect these cancers at an early stage, which increases the chance of a positive outcome. Understanding your risk factors and recognizing symptoms helps lead to early detection. Risk factors include:

- Having a family history of cancer
- Being over 50
- Starting menstruation at an early age
- Never being pregnant
- Having endometrial hyperplasia
- Having cervical dysplasia
- Suffering from other conditions such as hormone-related issues, cancers, diabetes, or obesity

If you're experiencing symptoms or have any of these risk factors, talk to your doctor. Seeing a fellowship-trained gynecologic oncologist is key to getting the best outcome.

Larry Kilgore, MD



After spending much of his career in another state, Larry Kilgore, MD, a board-certified leader in gynecologic oncology, has returned to Knoxville.

Kilgore, a native East Tennessean, attended the University of Tennessee, Knoxville and earned a BA in biology, then an MD at the University of Tennessee Health Science Center in Memphis. He then completed residency and fellowship at the University of Alabama at Birmingham (UAB) and joined the faculty.

Kilgore also reached many career goals as a gynecologic oncologist in the Department of Obstetrics and Gynecology at UAB. He focused on patient care, surgical training, and advanced cancer therapies, including robotic surgery. He also served

as a Professor and held the J. Max Austin Endowed Chair in the Division of Gynecologic Oncology. He was a Senior Scientist for the UAB Comprehensive Cancer Center, fellowship director for gynecologic oncology, and residency-program director in the Department of Obstetrics and Gynecology. Now, after two decades of developing, cultivating, and advancing his surgical expertise and becoming a leader in gynecologic oncology, he has brought his talents and expertise to the University of Tennessee Medical Center.

Kilgore enjoys spending time with his wife, Tricia, and their three children. Kilgore also has a passionate love of music and plays the guitar. He enjoys running, friends, golf, and all UT sports.



“Both physicians and patients should be familiar with the signs and symptoms of ovarian cancer. There’s no reliable screening test for the disease, but it is not “silent.” Abdominal swelling, abdominal pressure, or symptoms related to altered bowel or bladder function may signal its presence. When ovarian cancer is suspected, treatment planning and staging surgery should be done by gynecologic oncologists who are capable of performing the most advanced surgical procedures. The surgeons at University Gynecologic Oncology combine superior training with the highest level credentials and rank among the most experienced and well-qualified in the entire Southeast,” says the Cancer Institute’s Larry C. Kilgore, MD.

Led by surgeons, board-certified in the specialty, University Gynecologic Oncology uses a team approach that achieves the best possible outcome by involving many specialists in a patient’s

care, including radiologists, radiation oncologists, pathologists, interventional radiologists, medical oncologists, and surgical oncologists. Among the many sophisticated treatment options are:

- Surgery – Both traditional surgery and advanced minimally invasive robotic surgery
- Chemotherapy – Including targeted therapies and intraperitoneal therapy
- Radiation therapy –Including external beam radiation and high-dose-rate brachytherapy
- Clinical trials – Access to National Cancer Institute and pharmaceutical sponsored trials offering the latest in innovative therapies

Physicians at the medical center are also involved in extensive research (including clinical trials) designed to develop improved treatment options and patient care. Backed by this work and armed with deep experience and skill, the gynecologic oncologists identify proper treatment options and guide patients in the fight against cancer.

“We are privileged to be one of the only centers in East Tennessee to offer cutting-edge, nationally supported clinical trials, minimally invasive radical surgery, and advanced modalities of chemotherapy administration such as intraperitoneal chemotherapy to appropriate candidates,” Kimball says. “Those options give women the best chance of beating these terrible diseases.”

Whether you’re just experiencing a few possible symptoms or require surgery or other treatment, the physicians at the University of Tennessee Medical Center have the experience, care, and skill to help you through the journey.

Wendi Hope Hager





Sheri Morgan, Ovarian Cancer

It was a good thing that Sheri Morgan, 46, moved quickly to investigate the pain she was feeling. Instead of waiting and hoping that it would pass, she decided to consult her doctor right away. He found a mass in her body and ordered an ultrasound, which led to a whirlwind of urgent activity over the next several hours. The suspected problem? Ovarian cancer.

Morgan's physician immediately sent her to Larry Kilgore, MD, an experienced, board-certified gynecologic oncologist with University Gynecologic Oncology at the University of Tennessee Medical Center Cancer Institute. Morgan was diagnosed in May 2010 with a stage IIIC primary peritoneal serous adenocarcinoma. Her treatment began with an operation to remove the large mass that had formed on her ovary. "My husband and I had both thought I had just put on a few pounds," she explains. "If the pain hadn't started, we wouldn't have known."

Many women with ovarian or peritoneal cancer notice none of the classic symptoms of the disease. Some may experience pain, nausea, loss of appetite, abnormal vaginal bleeding, frequent urination, or other symptoms.

Kilgore confirmed that Morgan had ovarian cancer and decided on the best course of treatment. "Sheri underwent a surgical staging procedure where all visible disease was removed," he says. "This was an important step in her treatment planning and prognosis. It allowed her to receive chemotherapy while participating in a very advanced and important National Cancer Institute clinical trial [known as GOG 252], available through the University of Tennessee Medical Center Cancer Institute and directed by University Gynecologic Oncology. The trial provided Sheri with a number of new treatment modalities not available otherwise, including the biologic agent Avastin combined with a dose-dense chemo regimen that decreased potential side effects while actually increasing the total amount of chemotherapy."

Within a few days of surgery, Morgan began chemotherapy as a member of the clinical trial, which provided her with chemo treatment one day a week. Now she has completed the initial phase of the program and has achieved remission. "You have to let others see you go through this with a good attitude," she says, looking around the "chemo hut" at the medical center. "It was a shock when I found out, but you have to just go with

it and do what you have to do. Even when it's hard and you don't feel well, I think it's important to keep a good attitude. You just can't erase what's happening, and it will pass."

Morgan is now cancer free. She attributes her strength and the remission to her family and the medical center staff, all of whom continue cheering her on. "Family does matter," she says, smiling as she thinks of her husband, James Russell (Rusty); daughter, Stephanie; son, Lee; and granddaughters Morgan, 5, and Kaitlyn, 2. "They keep me going. Dr. Kilgore and the chemo nurses are the best. Everyone was great, and everyone was wonderful to me. I do not want to ever go to another hospital."

Morgan has continued to work throughout this journey. She also enjoys spending time with her family, cooking, swimming, crafting, and (as a grandmother, of course) playing with Barbie. Now she's taking part in another clinical trial at the medical center in hopes of making a difference to other women with ovarian cancer. "Don't wait until it's too late," she warns. "If you feel something is wrong, don't wait. Get it checked out, and catch it early."

Wendi Hope Hager