

DR. AMANIKA KUMAR: My name is Amanika Kumar, and I am a gynecologic oncologist at Mayo Clinic. Today, I want to talk to you about the relationship between obesity and endometrial cancer. Endometrial cancer is the most common gynecologic malignancy facing women in the US. It will affect over 60,000 women each year. While not true of all cases, the majority of cases will be diagnosed at an early stage and can be cured.

Obesity, which is a growing epidemic in the US, is a major risk factor for the development of the endometrial cancer. In fact, women who are obese are six times more likely to develop endometrial cancer than the normal weight population. There are multiple reasons explaining why this increased risk of endometrial cancer exists, but the most direct is that the peripheral fat expresses an enzyme called aromatase.

Aromatase converts the normal androgens in the body to estrogen. With excess peripheral fat comes excess aromatase activity and excess estrogen. This estrogen causes a lining of the uterus, the endometrium, to grow, and hyperplasia or cancer can develop. Obese women with endometrial cancer are also more likely to have other obesity related medical diseases such as diabetes, hypertension, and heart disease, sleep apnea, and arthritis.

Here at Mayo Clinic, we take a comprehensive approach to the treatment of the obese endometrial cancer patient. First, we have two options for treating most endometrial cancers. Non surgical treatment with progesterone or surgery to remove the uterus. The decision about which approach to take is based on discussion with you and your oncologist.

In addition to the direct treatment of endometrial cancer, we help obese patients make a plan to lose weight. This is because while patients are likely to survive their endometrial cancer, their obesity related diseases like diabetes and cardiovascular disease can have significant effects on health and can even lead to death.

Once a patient has either started progesterone based treatments or has successfully undergone surgery for endometrial cancer, we start on a plan to improve overall health and maintain a healthy weight. Our colleagues in the endocrinology department meet with our patients in a specialized group visit called start point.

At this visit, patients will learn about different approaches to losing weight, including diet and exercise, medications, endoscopic surgical techniques, and traditional surgical methods including gastric bypass or gastric sleeve. While all approaches have pros and cons, surgical weight loss has been shown to be the most effective approach to long term sustainable weight loss.

This weight loss can lead to reversal of many medical problems including hypertension, diabetes, and arthritis. In some cases, we're even able to perform the hysterectomy and bariatric surgery at the same time. We hope that with this comprehensive approach, we can not only treat endometrial cancer but also treat the underlying causes of endometrial cancer and improve overall health and well-being.