

NEUROBLASTOMA

WHAT IS NEUROBLASTOMA?

Neuroblastoma is a solid, cancerous tumor that begins in the nerve cells of infants and young children. The tumor forms when immature nerve cells (neuroblasts) do not mature properly. The cancer often starts in the tissue of the adrenal glands (the glands that control heart rate and blood pressure), located on the top of both kidneys. It can also start in nerve tissue of the neck, chest, abdomen, or pelvis. Neuroblastoma is usually found after the cancer has spread to other parts of the body.

WHAT DOES STAGE MEAN?

The stage is a way of describing a cancer, such as where it is located, if or where it has spread, and if it is affecting the functions of other organs in the body. There are two staging systems for neuroblastoma; more information is available at www.cancer.net/neuroblastoma.

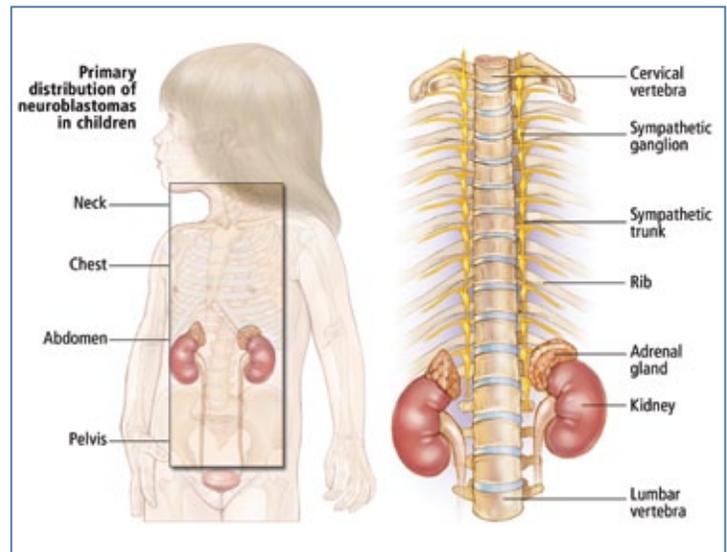


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Find additional cancer information at www.cancer.net.

WHAT DOES RISK GROUP MEAN?

Doctors use risk groups to predict how a neuroblastoma will respond to treatment. The International Neuroblastoma Risk Group classification system uses a combination of factors, such as age and stage, to determine if a child's disease is very low-risk, low-risk, intermediate-risk, or high-risk. The Children's Oncology Group system describes a child's disease as low-risk, intermediate-risk, or high-risk. The lower the risk group, the more successful treatment is likely to be.

HOW IS NEUROBLASTOMA TREATED?

The treatment of neuroblastoma depends on the size and location of the tumor, whether the cancer has spread, the risk classification, and the child's overall health. The treatment is tailored according to the risk group the tumor has been assigned. Children with low-risk disease are treated with surgery alone, and those with intermediate-risk disease are treated with surgery and chemotherapy (either by injection or by mouth). In most cases, a combination of drugs is given. Several types of treatments, such as surgery, chemotherapy, radiation therapy, and stem cell transplantation, are used to treat children with high-risk neuroblastoma.

When making treatment decisions, consider a clinical trial; most children with cancer are treated as part of one. Talk with your doctor about all treatment options. The side effects of neuroblastoma treatment can often be prevented or managed with the help of your child's health care team.

HOW CAN I HELP MY CHILD COPE WITH NEUROBLASTOMA?

Helping your child understand a cancer diagnosis is a key part of the coping process. Children who have cancer should be treated at a pediatric cancer center. These centers not only provide access to the latest treatments, they offer age-appropriate programs for social and emotional needs. Encouraging your child and other family members to share their emotions can be helpful in managing the diagnosis, treatment, and healing process.

QUESTIONS TO ASK THE DOCTOR

Regular communication is important in making informed decisions about your child's health care. Consider asking the following questions of your child's doctors:

- Where is the cancer located?
- What stage is the neuroblastoma?
- What is the risk group? What does this mean?
- Can you explain my child's pathology report (laboratory test results) to me?
- Would you explain my child's treatment options?
- What clinical trials are open to my child?
- What treatment plan do you recommend for my child? Why?
- Who is part of the treatment team, and what does each member do?
- What short-term and long-term side effects may be associated with my child's cancer treatment?
- How will this treatment affect my child's daily life? Will he or she be able to go to school and perform his or her usual activities?
- If I'm worried about managing the costs related to my child's cancer care, who can help me with these concerns?
- What follow-up tests will my child need, and how often will he or she need them?
- Where can I find emotional support for my child? For my family?
- Whom do I call for questions or problems?

Additional questions to ask the doctor can be found at www.cancer.net/neuroblastoma.

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www.cancer.net, or call 888-651-3038.**

Cancer.Net™ 

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TERMS TO KNOW

Benign:

A tumor that is not cancerous

Biopsy:

Removal of a tissue sample that is then examined under a microscope to check for cancer cells

Chemotherapy:

The use of drugs to destroy cancer cells

Clinical trial:

A research study that tests a new treatment or drug

Lymph node:

A tiny, bean-shaped organ that fights infection

Malignant:

A tumor that is cancerous

Metastasis:

The spread of cancer from where the cancer began to another part of the body

Pediatric oncologist:

A doctor who specializes in treating children and teens with cancer

Prognosis:

Chance of recovery

Radiation therapy:

The use of high-energy x-rays to destroy cancer cells

Stem cell transplant:

Procedure that replaces diseased bone marrow with healthy stem cells that create new bone marrow or provides stem cells to help the bone marrow recover after high-dose chemotherapy.

Tumor:

An abnormal growth of body tissue