



Surgery is one of the main treatments for cancer. It may be used by itself or with other cancer treatments.

It's natural to feel nervous before surgery. Knowing what to expect, how to plan for surgery and the recovery process may make you feel less anxious.

What is surgery?

Surgery is a medical treatment performed by a surgeon to remove cancer from the body or repair a part of the body affected by cancer. It's sometimes called an operation or surgical resection.

How is surgery used for cancer?

Surgery is commonly used to:

- Confirm a cancer diagnosis. The doctor may remove all or part of a tumour in a procedure called a biopsy.
- Investigate the size of the tumour and if the cancer has spread. This process is called staging and is often used to guide treatment decisions.
- Treat small, early-stage cancers that haven't spread. This may be the only treatment, or it may be combined with other treatments.
- 'Debulk' the tumour if it is not possible to remove the cancer without damaging nearby healthy organs. This involves removing as much of the tumour as possible to make other cancer treatments more effective.

Surgery can also be used to prevent cancer (prophylactic surgery), repair tissues damaged by tumour removal (reconstructive surgery), insert a tube to allow the delivery of chemotherapy (supportive surgery) or to ease the symptoms of cancer and cancer treatment (palliative surgery).

How is surgery done?

The surgical technique depends on the type of cancer, its location, the surgeon's training and the equipment available.

- Open surgery, where the surgeon makes a single cut into the body to remove cancerous tissue.
- Keyhole surgery, where the surgeon makes a few small cuts in the body and inserts a camera and light to guide the surgery.
- Laser surgery, where a laser is used to remove or destroy cancerous tissue.
- Cryosurgery (or cryotherapy), which is often used to treat skin cancers. Liquid nitrogen is sprayed on to the skin to freeze and kill the cancerous tissue.

Will I stay in hospital?

You may be admitted to hospital as an inpatient to have surgery. The length of your stay depends on the type of surgery you have, the speed of your recovery and whether you have support at home.

It may be possible to have surgery during the day as an outpatient. This means you don't have to stay overnight in hospital, provided there are no complications.

Your doctor will inform you at one of your pre-surgery appointments.

What other treatments might I have?

You may also have other treatments such as chemotherapy or radiotherapy. These treatments can be given before (neo-adjuvant therapy), during (simultaneous therapy) or after surgery (adjuvant therapy).

How long will it take to recover?

The type of surgery you have and your overall health will determine recovery time. It may take less than a week to a few months.

Follow your surgeon's advice, and try to be patient and allow yourself time to recover.

What are the possible side-effects?

Possible side-effects from surgery include pain and discomfort, as well as side-effects from the general anaesthetic (nausea, vomiting, dizziness and agitation).

Sometimes complications such as infection, bleeding and blood clots occur after surgery. Most complications are minor and can be treated easily. Talk to your surgeon about your actual risks.

Will I need to have more than one operation?

If the tissue surrounding the tumour, called the surgical margin, is clear of cancer, you may not need further surgery. If there are cancer cells present in the margin, you may require more treatment.

Where can I get reliable information?

Cancer Council 13 11 20

Information and support for you and your family for the cost of a local call anywhere in Australia.

Cancer Council Australia website

cancer.org.au