

FREQUENTLY ASKED QUESTIONS ABOUT EIN (Endometrial Intraepithelial Neoplasia)

What is Endometrial Intraepithelial Neoplasia?

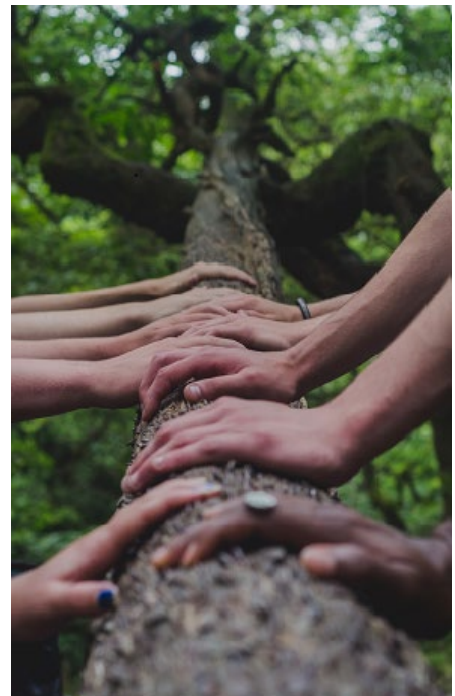
Endometrial intraepithelial neoplasia (EIN), also known as complex atypical hyperplasia (CAH), is a change in the lining of the uterus that may progress to cancer of the uterine lining (endometrium). Endometrial cancer is the most common gynecologic cancer and the fourth most common cancer of any type among women.

What is the usual treatment for EIN?

The usual approach for women diagnosed with EIN/CAH is hysterectomy (surgical removal of the uterus). But some women may want to avoid hysterectomy because they want to have children or want to avoid health risks that may be associated with major surgery.

Why consider an EIN clinical trial?

If effective medical treatment with pills were available, this would allow women with EIN/CAH to delay or avoid surgery. To find such treatment, more research is needed into ways to prevent uterine/endometrial cancer without removal of the uterus. To help us get there, please consider participating in a clinical trial. Your care will not be affected by whether you choose to participate or not. Participation may not directly benefit you, but like the people before you who participated in trials and taught us how to treat other cancers, you will help to increase our knowledge about uterine/endometrial cancer prevention.



What's a normal timeframe to have surgery for EIN?

To the best of our knowledge, most EIN/CAH takes a long time to turn into invasive cancer. Therefore, doctors in this field agree that patients can take their time to consider their options and plan around their schedules, often taking six weeks or longer. For the study we are offering, you will be asked to wait 3-5 weeks for surgery, which is within the normal timeframe for scheduling this procedure.



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If you would like to learn more about this study, please contact the study coordinator:

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