

# Treatments For Advanced Kidney Cancer



This fact sheet talks about cancer medicines for the treatment of kidney cancer that has spread outside the kidney to other parts of the body. When cancer has spread from the kidney to other organs and tissues in the body, it forms small tumours called metastases in these organs and tissues. This is called metastatic, advanced, or stage 4 kidney cancer.

Stage 4 kidney cancer is usually not curable. The goal of treatment is to make life as long and as normal as possible. Combinations of different treatments may be recommended by different doctors, including urologists, medical oncologists, and radiation oncologists (cancer doctors). This team of specialists will work with you and your family doctor to help you control your symptoms and side effects and live as normal a life as possible, and for as long as possible.

## Will I need a kidney biopsy?

Because some types of cancer medicine are only effective or recommended for specific types of kidney cancer, your healthcare team will need to know which type of kidney cancer you have. They can find this out by looking at a sample of your cancer under a microscope. To get a sample of your cancer you may need a kidney biopsy.

## My cancer has spread outside the kidney: What treatments could I have?

Cancer medicines aim to reduce symptoms and help you live as long as possible. They might kill cancer cells, stop or slow down tumour growth, or shrink tumours. Most cancer medicines for advanced kidney cancer are targeted therapies or immunotherapies or combinations of these drugs. Cancer medicines are systemic, which means they travel in the blood stream through the entire body. All cancer medicines have side effects, that need to be managed.

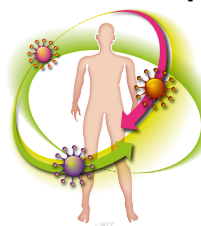
### Targeted therapies



Targeted therapies are tablets that slow or stop the growth of new blood vessels (angiogenesis) needed for the cancer cells to grow and multiply. This slows or stops the growth of the tumour, and sometimes causes it to shrink.

Targeted therapies include vascular endothelial growth factor receptor (VEGFR) tyrosine kinase inhibitors (e.g., axitinib, cabozantinib, lenvatinib, pazopanib, sorafenib, sunitinib, tivozanib), mTOR inhibitors (e.g., everolimus, temsirolimus), and monoclonal antibodies (e.g., bevacizumab).

### Immunotherapies: Cytokines



Immunotherapies (also called immuno-oncology (IO) therapies), such as interferon and interleukin 2 (cytokines), stimulate the immune system to attack the cancer cells. In recent years cytokines have been replaced by targeted

therapies and immunotherapies called immune checkpoint inhibitors.

### Immunotherapies: Immune checkpoint inhibitors

Immune checkpoint inhibitors help your immune system to attack the cancer cells (e.g., nivolumab, ipilimumab, pembrolizumab, avelumab). They are injected into your vein (intravenous infusion) every 2-3 weeks.

### Combination therapies

Combination therapy is the treatment of patients with two or more cancer medicines at the same time. By using medicines that work in different ways to attack the cancer, combination therapies can help people live longer.

## How are cancer medicines sequenced?

To lengthen survival, people are given cancer medicines one after the other (in sequence) when each medicine stops working.

## Clinical trials



You might be asked to consider a clinical trial for a new treatment. A clinical trial is a research study to test a new treatment or procedure to see if it is safe, it works, and it is better than existing treatment. Taking part in a clinical trial can give you access to new treatments that are not routinely available.

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## Supportive/palliative care



Supportive/palliative care focuses on improving quality of life for you and your family. It is all the treatments and healthcare services that your hospital team can use to improve your quality of life from when you are diagnosed through treatment and beyond, such as relieving cancer symptoms, helping to manage pain, managing side effects to treatment, emotional and social support, and specialist support at the end of life.

## Alternative and complementary therapies

**Complementary therapies** are given in addition to medical treatments to improve quality of life and symptoms. These include mindfulness meditation, relaxation techniques, massage, psychotherapy, prayer, yoga, and acupuncture.

**Alternative therapies** are not standard medical treatments and might not have been scientifically proven to be effective against cancer. These treatments may be recommended by friends and family or found on the Internet. Some alternative therapies can even be harmful, especially if taken with prescription drugs. Examples are high-dose vitamins, herbal products, or extreme diets. Please talk to your doctor if you are considering alternative therapies.



**Distributed by:**



## Good to know!

### Immunotherapy

Medicines that can activate the immune system to treat various diseases, including cancer. Also called immuno-oncology (IO) therapy.

### Medical oncologist

A doctor qualified to diagnose and treat cancer with cancer medications.

### Metastasis

A tumour formed by cells that have spread from the original (primary) tumour to other parts of the body. The plural of metastasis is metastases.

### Metastasis

To spread from one part of the body to another.

### Radiation oncologist

A doctor who uses radiotherapy to treat the cancer.

### Supportive/palliative care

Care that focuses on relieving symptoms caused by serious illnesses like cancer.

### Systemic medication

Medication that is carried in the blood stream throughout the entire body.

### Targeted therapy

A type of treatment that targets the tumour to slow or stop the growth of new blood vessels (angiogenesis) needed for the cancer cells to grow and multiply.

### Urologist

A surgeon who specialises in treating diseases of the genitourinary system.

For more information about the treatment options for kidney cancer, read [My Treatment My Choice metastatic kidney cancer](#) on the IKCC website.

