



Burning issues you should never ignore

School teacher
 Conor Davoren
 made an
 appointment
 to see his doctor
 after experiencing
 recurring bouts of
 severe heartburn.
 He tells

**Helen
 O'Callaghan**

about his cancer
 journey

IT'S sheer good luck that Conor Davoren didn't just take a glass of milk going to bed and a couple of Rennie during the day, and simply ignore the symptoms he was experiencing.

A secondary school teacher who also farms, Conor was just 32 when he was diagnosed with oesophageal cancer in October 2021.

It all started in early 2019 with heartburn after eating. "I'd get it maybe three to five times a week — often enough for me to notice. It was out of the ordinary so I went to my GP."

The GP prescribed PPI (proton pump inhibitor) medication once daily for three months and advised Co Clare-based Conor to go off the tablets for two weeks before he saw him again.

"About a week into that two-week break, I could feel the heartburn coming back."

His GP referred him for endoscopy, which showed some inflammation but otherwise seemed clear. Conor was prescribed PPI once a day, at least half an hour before eating and was due to return for another endoscopy in 12 months' time. "On those tablets, the symptoms rarely recurred," recalls Conor, 34.

Covid-19 delayed the follow-up scope until September 2020 when it showed some inflammation near his stomach. "I felt fine but the doctor said the tablets weren't doing what they should. I had a form of oesophagitis."

Referred to a specialist, Conor had his first consultation online in October 2020.

"The doctor said, at my age, this problem is commonly solved by upping the PPI tablets to twice a day. He said we'd do this for three months and check in again then. On the one-a-day tablet, I'd been feeling great at least 95% of the time, taking them twice a day I had zero symptoms," says Conor, recalling how he was "flying it" over that winter of 2020.

"We have a suckler farm and I was doing busy days with physical work regularly and often, no issue. I was running two to three times a week and building myself up to doing a half-marathon on New Year's Eve."

Back on Zoom with the consultant in January 2021, Conor described how well

things were going. "He said it sounded like the problem had resolved. He put me back on the once-a-day PPI and said we'd do an endoscopy before the year was out."

But that summer, enjoying a hotel break with his wife, Josephine, and two close friends, Conor had his worst-ever episode of heartburn. "I forgot to bring my tablets. The first night I had a three-course meal and a couple of pints — I was eating good food, living lavishly. On the second morning, I woke up and felt a real burning sensation running up the right side of my throat to my right ear."

"A glass of milk at breakfast eased it. It came back and I took Gaviscon to quench it. That sorted it, but it was a severe couple of hours," says Conor who, before setting out for home, emailed his consultant's secretary — she booked him in for an endoscopy.

The news from this endo-

scopy was not good — it showed a growth. Subsequent biopsies revealed cancer. Conor was on his lunchbreak at school when he got the phone call. "It was an awful shock. It didn't sink in. I had my lunch, taught

my afternoon classes — it was only when school finished that it really registered. I rang back the secretary to make sure I'd heard the doctor right — he was onto me in five minutes."

More common among men

Conor was referred to Mr Paul Carroll, consultant oesophagogastric and general surgeon in University Hospital Galway, who specialises in keyhole surgery. "Because of my age and fitness, they thought this the more suitable surgery, with quicker recovery."

But first Conor had five weeks of chemotherapy and radiotherapy — chemo to eradicate any cancer cells from his body, radiotherapy to shrink the tumour ahead of surgery. In January 2022, he underwent the almost nine-hour surgical procedure. "Afterwards they were able to say it had been early stage-one cancer."

It took Conor about a year to get back to eating more or less normally. Now two years post-surgery, he's feeling really good — he returned to teaching in August 2022 and is back working on the farm.

During this whole process,

the Clare man says his faith was always something he could turn to when he hit a bad patch. "I've always been a man of faith. We were brought up a Catholic family and I'm a big believer. I made a couple of trips to Knock with my parents during the treatment. We definitely prayed a bit extra and you do feel better for it," he says, adding that neighbours showed their solidarity and care, with "one lovely woman" bringing him a bottle of holy water from Medjugorje.

For a year post-surgery he

had three-monthly scans, the following year these reduced to every six months.

"I saw Mr Carroll yesterday. He gave me the results of my latest scan. He said, 'Look it's [over] two years since the day of your diagnosis. That chapter is behind you now'. He said we'll do a scan again in 12 months, and maybe one the year after. But I can move on."

Ireland has one of the highest rates of oesophageal cancer in Europe, with more than 500 people diagnosed annually. The sixth leading cause of cancer mortality worldwide, oesophageal cancer is more common among men than women —

by a three-to-one ratio.

"Incidence has increased over the last 40 to 50 years, in parallel with an increase in a lot of chronic diseases that are associated with lifestyle, diet, and metabolic disorder. There's some sort of relationship with how the Western world has changed in that time," says upper gastrointestinal consultant John Reynolds, professor of clinical surgery at St James's Hospital and TCD.

Prof Reynolds cites two main types of oesophageal cancer: Adenocarcinoma and squamous cell carcinoma. Adenocarcinoma is the type most commonly seen in Ireland, accounting for 80% of cases. "It's often associated with Barrett's oesophagus [common condition and key pre-indicator of potential oesophageal cancer] and reflux and can be associated with obesity."

"Quite a lot of time, patients have a history of acid reflux and heartburn, factors that can cause bad inflammation — and if not controlled can progress in some to cancer and pre-cancer."

"We see eight or nine men for every one woman it affects. Nobody really knows why being female is protec-

tive. Possibly because the additional weight in males — and where that's stored — is more promoting of reflux."

Squamous cell carcinoma accounts for about 20% of cases but this is more commonly seen in Asia and the Middle East. "It occurs equally in men and women. Smoking is the classic risk factor, as well as chronic infections such as HPV or thrush."

Adding that about 20% of people in Ireland experience some reflux episodes every month, while many are on antacid tablets, Prof Reynolds warns: "If you have persistent reflux that doesn't respond to standard meds, if

you're over 50 and male, you and your doctor should have a very low threshold for checking out these symptoms by endoscopy.

"You're probably going to be fine, but if there's inflammation, it can be treated. If Barrett's oesophagus is identified, you can be kept under surveillance so that if you're unlucky enough to develop pre-cancer it can be picked up early."

Know the symptoms

Red-flag symptoms include difficulty swallowing, persistent acid indigestion, heartburn and reflux, and unexplained weight loss. "Unfortunately, approximately 70% of patients experience these symptoms for three months before contacting their GP," says CEO of the Oesophageal Cancer Fund (OCF) Carmel Doyle.

A key initiative targeting prevention/early diagnosis of oesophageal cancer is the national Barrett's Oesophagus Registry and Biobank, Ireland's unique data system which ensures patients, identified as at-risk, undergo ongoing monitoring and surveillance. The register, established in 2010, now links six hospitals across Ireland

and currently tracks progress of 9,000 at-risk patients.

"Ten per cent of patients with reflux have Barrett's oesophagus — and, of these, 5% will progress to cancer," confirms Prof Reynolds, adding that Ireland's cure rates have doubled compared to 20 years ago. "It is progress — but there's a long way to go. All too often, when oesophageal cancer presents it's at

an advanced stage and can be very difficult to treat. But if you get it early enough, treatments and surgery are better, chemo, and radiotherapy and how they're delivered are better, and new treatments using the immune system to target the patient's own cancer have all improved outcomes."

OCF patron and professional golfer Padraig Harrington says his family experienced the devastation of oesophageal cancer, having lost his dad to it in 2005. "He had been experiencing symptoms for some time and an earlier diagnosis could have made a big difference. We lost him way too young. He was only 72 but a very fit 72."

"The symptoms are reasonably obvious to us now: Persistent heartburn, persistent acid reflux, persistent trouble swallowing — all those things you'd take indigestion tablets for. My dad [lived] on those tablets. He was a typical Irish dad who would just get on with it, keep going and not worry about it."

"What we know today is that early detection saves lives ... Oesophageal cancer, if [caught] early, it's very treatable ... you've a great chance of beating it."

Meanwhile, Conor — who is "so grateful for the incredible care" he received from his medical teams, while his wife's support was "a rock" — also emphasises the importance of early diagnosis, and of checking out any symptoms. "I know guys with Rennie in their top pockets and Gaviscon in the van. I had very low-to-no symptoms. For the sake of a day off work, get an endoscopy done."

■ Lollipop Day takes place today and tomorrow. It aims to raise awareness about oesophageal cancer/symptoms to look out for, and to fundraise — OCF volunteers will be at 80 locations nationwide selling lollipops. Another option is to donate online at ocf.ie or organise your own fundraiser.

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Prof John Reynolds: Have the conversation with your doctor.

Co Clare teacher Conor Davoren was diagnosed with oesophageal cancer in 2021.

Picture : Eamon Ward

