

U.S. Rep. Gerry Connolly Shares Esophageal Cancer Diagnosis

A lawmaker from Virginia, Gerry Connolly will begin cancer treatment right away.

November 13, 2024 By Laura Schmidt

U.S. Representative Gerry Connolly (D-Va.) announced last week that he was diagnosed with [esophageal cancer](#) and intends to begin treatment immediately.

Connolly, 74, who recently won his ninth House term in [Virginia's 11th District](#), assured his constituents that he is optimistic about his [treatment outcome](#) and looking forward to his new term.

“Cancer can be tough. But so am I,” Connolly said [in a statement](#). “I will attack this the only way I know how— with Irish fight and humor.”



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A post shared by Rep. Gerry Connolly (@repgerryconnolly)

Esophageal cancer affects the esophagus, the hollow tube that connects the throat to the stomach, or the gastroesophageal junction, where the esophagus meets the stomach.

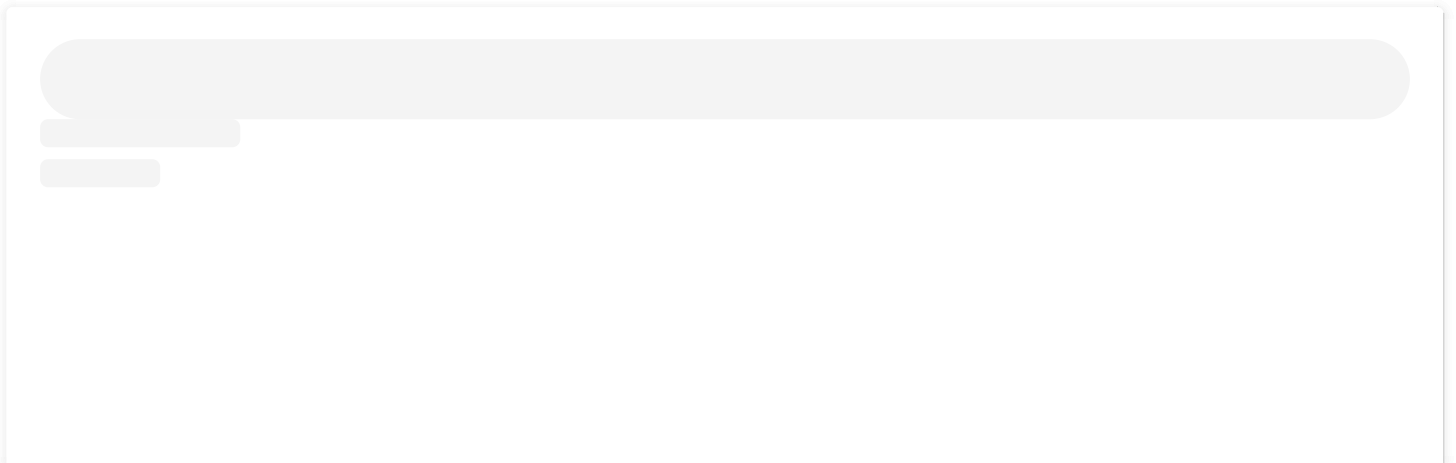
This cancer type accounts for about 1% of all [cancers diagnosed](#) in the United States, according to the [American Cancer Society](#) (ACS). Men are more likely than women to develop esophageal cancer. This year, about 22,370 people (17,690 men and 4,680 women) will be diagnosed with esophageal cancer.

Esophageal cancer often does not cause symptoms until it has reached a more advanced stage—when it is harder to treat—or it may cause nonspecific symptoms similar to those of other conditions. Common symptoms of esophageal cancer include difficulty swallowing, chest pain, weight loss, chronic cough, vomiting and bleeding into the esophagus.

Connolly said he was surprised by his diagnosis because he had no symptoms except for what he described as intermittent abdominal aches and pains.

The congressman will undergo chemotherapy and immunotherapy, and his team of medical professionals are “very confident in a successful outcome.”

“Over the next few months as I do my job here in our district and on the Hill, I may be a bit fatigued due to the treatment,” Connolly wrote. “I hope you’ll understand. Be assured I’m full of hope and am sustained by the love, support and encouragement of my family, friends and of all of you.”





[View this post on Instagram](#)

A post shared by Rep. Gerry Connolly (@repgerryconnolly)

To read more, click [#Esophageal Cancer](#) or Cancer Health's [Basics on Esophageal Cancer](#). It reads in part:

What is esophageal cancer?

Cancer develops when cells grow out of control. Esophageal cancer affects the esophagus, the swallowing tube that connects the throat to the stomach, or the gastroesophageal junction, where the esophagus meets the stomach. It sometimes occurs in conjunction with [oral or head and neck cancer](#), which can involve the mouth and throat, nasal cavity and larynx (voice box).

The two main types of esophageal cancer—squamous cell carcinoma and adenocarcinoma—affect different cells lining the esophagus. Squamous cell carcinoma usually occurs in the upper portion of the esophagus, while adenocarcinoma (cancer in glands that produce mucus) typically occurs in the lower portion.

What are the risk factors for esophageal cancer?

Risk factors for esophageal cancer include smoking or chewing tobacco and drinking alcohol. Some evidence suggests that eating a lot of processed meat may increase the risk of esophageal cancer, while a diet high in fruits and vegetables appears to be protective, as it has been linked to a lower risk. Drinking very hot liquids can increase the risk of squamous cell cancer.

How is esophageal cancer diagnosed?

The process of diagnosis starts with a physical exam and medical history, including family history and duration of symptoms. Esophageal cancer is usually not detected at an early stage unless it is caught while testing for something else. People at high risk, such as those with Barrett's esophagus, may undergo regular testing using an endoscope, a flexible lighted tube passed through the throat to view the esophagus. During these exams, a small tissue sample (a biopsy) may be removed to examine in a laboratory.