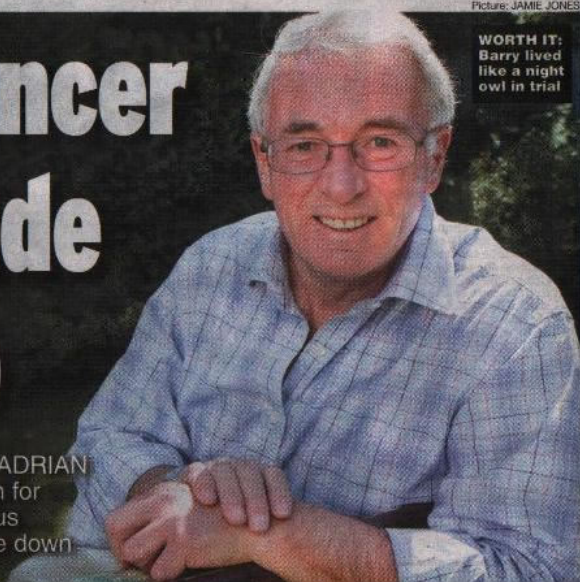


Pioneering cancer treatment made me allergic to sunlight

Eamonn Barry tells ADRIAN LEE how medication for Barrett's Oesophagus turned his life upside down



WORTH IT: Barry lived like a night owl in trial

WHEN most people were tucking themselves up in bed for the night, Eamonn Barry's day was just beginning. For three months he lived like a night owl, venturing out only after dark after taking part in a trial for a new type of treatment which leaves patients ultra-sensitive to sunlight. A hint of sunshine brought the 68-year-old out in a painful red rash.

For the retired company manager this strange existence was a sacrifice worth making. Nine years ago when Eamonn was first diagnosed with Barrett's Oesophagus, a condition which can lead to cancer, he was faced with major surgery.

"I first noticed a problem when I was eating as I was burping all the time. I was prescribed strong indigestion tablets which helped for a while," he explains.

An endoscopy, which involves inserting a tiny camera into the

'After sunset I played golf on a floodlit range'

body via the throat, showed the father of four was suffering from Barrett's.

It develops when acid and bile from the stomach causes inflammation to the cells lining the oesophagus. The cells become abnormal - known as dysplasia - and if left untreated can develop into cancer of the gullet or upper stomach. The progression from low-grade dysplasia to high-grade dysplasia and then cancer can take up to 10 years so it is common for endoscopies to be carried out regularly to monitor how abnormal cells are behaving.

Three years ago Eamonn, from Ashby-De-La-Zouch in Leicestershire, was told he was on the verge of developing cancer.

The initial options were to continue to monitor the condition or have surgery to remove part of the upper stomach, which would involve breaking two ribs. Full recovery can take up to two years. Neither

appealed so Eamonn applied to take part in a trial for Photodynamic Therapy (PDT) which uses drugs triggered by light to kill abnormal cells.

"I'd read a lot about it and sought a second opinion from a specialist who was positive about it, so I decided to give it a go," he says. He had the treatment at University College Hospital London, where a laser was put down his throat to activate the drugs with a beam of light.

He'd been warned about the after-effects and soon became used to his life being turned upside down.

"It was a bit bizarre," says Eamonn. "Being in artificial light such as street lamps was fine but I had to avoid sunlight. After sunset I'd go shopping or practise golf at a floodlit driving range. During the day I used to read and listen to the radio with the curtains drawn."

Towards the end of the three-month period there was a simple test to discover whether his body could yet withstand natural light.

"I was told to cut a small hole in a paper bag, place it over my hand and stick it out of the window," says Eamonn. "When I did this the first time the exposed part of my hand turned bright red so I wasn't ready to go out. Eventually I was allowed out on overcast days until the effects of the drug wore off and I was able to resume my normal life."

AFTER checks showed the treatment had not completely destroyed the abnormal cells he had another session of PDT in 2007 and again had to avoid sunlight for three months.

"I lost almost six months of my life but it was worth it," says Eamonn, who has now been given the all-clear. "I've no doubt this was the best option." The success rate for this type of treatment is about 80 per cent.

The oesophagus, the medical name for the gullet, is a long tube which carries food from the throat to the stomach. It is estimated that there are at least 375,000 people in the UK with Barrett's Oesophagus but only

about 15 per cent have been diagnosed. Between five and 10 per cent of people with Barrett's Oesophagus go on to suffer cancer of the oesophagus.

More than 7,000 people, mainly men aged over the age of 55, are diagnosed with this cancer every year. Cases have increased by more than 25 per cent in the past 15 years, probably linked to poor diet and lifestyle. Survival rates are low because it is detected too late. Heartburn and indigestion, which allow acid from the stomach to travel up into the oesophagus, increase the chances of Barrett's Oesophagus. If you get heartburn twice a week or more, see a doctor.

Dr Rebecca Fitzgerald of the Medical Research Council and a trustee of the Barrett's Oesophagus Campaign, says: "Cancer of the oesophagus is horrible and survival rates are dismal. People often ignore regular indigestion and heartburn but they should have

'I lost almost six months but it was worth it'

them checked out. Barrett's can be monitored and treated."

A new diagnostic treatment going through trials involves the patient swallowing a small capsule which has a thin string attached. In the stomach the capsule opens out into a small sponge, which can be tested after it is drawn back out. It's hoped this will eventually eliminate the need for endoscopies.

Another new treatment is radiofrequency ablation, which uses powerful radio waves to blast away abnormal cells. Success rates are also high and ablation has the advantage over PDT that it does not leave patients sensitive to light. Only a handful of hospitals in the UK use ablation but it's likely to be approved for NHS use and become more widespread within a year, says Dr Fitzgerald.

● For more information about Barrett's Oesophagus visit www.barrettscampaign.org.uk