



Health Column – September 2007

September is Gynecologic Cancer Awareness Month

A woman will be diagnosed with a gynecologic cancer every seven minutes, according to the Gynecologic Cancer Foundation. Gynecologic Cancer Awareness Month provides an opportunity to educate women about prevention, early detection and treatment of all gynecologic cancers.

Gynecologic cancers are the uncontrolled growth and spread of abnormal cells originating in the female reproductive organs, including the cervix, ovaries, uterus, fallopian tubes, vagina and vulva. Women who are past childbearing age may assume that they no longer need regular gynecological checkups and that younger women have a greater risk for reproductive cancers. In reality, the risks hold steady and even increase with age.

Studies have concluded that there is a relationship between obesity and certain types of cancers, including breast, uterine and some cervical cancers. Diet, exercise and lifestyle choices play a significant role in cancer prevention. Knowing your family history can help you to be proactive about prevention and early diagnosis. Screenings and self-examinations regularly conducted can detect certain types of gynecologic cancers in their earlier stages, when treatment is more likely to be successful.

Women need to be aware of their body's signs and signals. Women at average risk should talk with their medical provider about the need for periodic thorough pelvic exams to look for signs of gynecological cancers. The risk of these types of cancers generally increase with age. The following paragraphs provide details about most gynecologic cancers:

Ovarian cancer – In women, ages 35-74, ovarian cancer is the fifth leading cause of cancer-related deaths. In 2007, more than 22,000 new cases of ovarian cancer will be diagnosed and more than 15,000 women will die of the disease. Ovarian cancer can happen at any age, so be alert for possible symptoms, but keep in mind they may be symptoms of something else too. Early ovarian cancer may not produce any noticeable symptoms or may be vague, but if there is *anything* unusual, you should contact your provider right away.

Symptoms include:

- Swelling or increased girth of the stomach
- Persistent gas, bloating, stomach pain, indigestion, nausea, constipation, diarrhea
- Sudden urinary frequency or incontinence
- Bleeding between menstrual periods
- Pelvic, leg or back pain
- Feeling of pressure in the pelvis or rectum
- Unexplained weight loss or gain
- Shortness of breath
- Unusual fatigue

Women with a higher risk of developing ovarian cancer, such as those with a strong family history of the disease or history of fertility drug use, should talk with a medical provider about tests that look for early signs of the disease and ways to reduce risk.

Cervical cancer - 100 percent curable if detected early. A Pap test is a simple screening that can help identify abnormal cells on the cervix. Women should begin screening within three years after first intercourse or by age 21 and should be tested annually. Women over 30 should talk to their health care provider about the interval of screening that fits with their previous history. This may be as short as six months or every two or three years. Most women who have had a complete hysterectomy for non-cancerous reasons and many women over the age of 70 may not need to continue Pap screenings, but that should be decided upon by the provider and the woman, based on her history. Women, ages 9-26, can now receive a vaccine that helps protect against certain types of Human Papilloma Virus (HPV) that cause cervical cancer and genital warts. Cervical cancer is 99.7 percent caused by the HPV virus. Even women in that age group who have had an abnormal Pap test may still benefit from the vaccine. It will not treat abnormal cells, but since we can't tell which virus type caused abnormal results, the benefits of vaccination can outweigh not vaccinating. Most insurance carriers cover the cost of the vaccine, but you should check to be sure. Routine Pap screening and pelvic exams are still recommended for those who receive the vaccine.

Uterine cancer -Because most endometrial cancer is diagnosed at an early stage as a result of post-menopausal bleeding, all women should report any unexpected bleeding or spotting.

Vulvar cancer - Vulvar cancer appears as lesions on the surface of the vulva or labia. Symptoms can include itching of the vulva area. Risk factors include diabetes, HPV or chronic vulvar irritation.

Vaginal Cancer - Very rare and usually diagnosed in elderly women with abnormal bleeding. Vaginal cancer is treated with radiation.

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