

SU FAMILIA: THE NATIONAL HISPANIC FAMILY HEALTH HELPLINE 1.866.SU.FAMILIA (783.2645)

CERVICAL CANCER

WHAT IS CERVICAL CANCER?

Cervical cancer refers to cancer of the cervix. Cervical cancer typically has no symptoms. Early detection helps determine when there are pre-cancerous conditions. Because pre-cancerous conditions may not cause pain, it is important that we see our health care providers on a regular basis even if we do not feel sick or have pain.

WHAT ARE THE RISK FACTORS FOR CERVICAL CANCER?

There is strong evidence of a relationship between human papilloma virus (HPV) and cervical cancer. HPV is considered to be a sexually transmitted disease (STD). Women with HPV or women whose partners have HPV have a higher risk of cervical cancer. The relationship between HPV and cervical cancer is not a one-to-one relationship; most women exposed to HPV do not develop cervical cancer.

There is evidence to suggest a greater risk of cervical cancer when the immune system is not working well. As a result, Hispanic women who have HIV or AIDS have higher rates of cervical cancer than other women.

HOW CAN YOU PREVENT CERVICAL CANCER?

We know that smoking is a risk factor associated with cervical cancer (as with other cancers), and women who smoke have much higher rates of cervical cancer. The heavier the smoking habit, the higher the risk of cervical cancer. For that reason, you should avoid smoking.

There is also some evidence that folic acid (found in dark green leafy vegetables, orange juice, dried peas, beans, and lentils) plays a role in protecting us from cervical cancer. Some women take folic acid in the form of a daily dietary supplement or eat fortified cereals. The right amount to take is still to be determined. The nature of this protection is only now being seriously studied.

WHAT ARE THE SYMPTOMS OF CERVICAL CANCER?

Pain is not a symptom of cervical cancer until it has progressed to the invasive mode. The most common symptom in cervical cancer is abnormal bleeding—too much or too little bleeding at the wrong time of the month. The wrong time is any time when we are not having our regular period. However, every instance of abnormal bleeding is not a sign of a problem, since abnormal bleeding can occur in women who are going through menopause.

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HOW IS CERVICAL CANCER DETECTED OR DIAGNOSED?

A Pap test (or Pap smear) is the most effective method for early detection of cervical cancer. All women over the age of eighteen, including those over sixty years of age, should have an annual Pap test. All women under eighteen who are sexually active should also have regular Pap tests. If your Pap test is normal three years in a row, your health care provider will be able to tell you when you should go for your next one. For the majority of women, an annual Pap test will be recommended.

Evidence indicates that Hispanic women are the group least likely to go for a Pap test, and most likely to get cervical cancer. The fact that we do not go for regular Pap tests explains our higher rates of cervical cancer.

HOW IS CERVICAL CANCER TREATED?

Once again, treatment is most successful the earlier the cancer is detected. The Pap test is used for diagnosing cancer of the cervix. If your Pap test is positive, this means there are cell abnormalities, or a pre-cancerous condition. This refers to an area in which abnormal cells exist, but only in the top layer of cells. You will probably be asked to have a second test to confirm the initial findings. If the Pap test results are once again abnormal, your health care provider will probably want to obtain more information through the use of further tests.

If your condition is pre-cancerous, your health care provider may recommend treatment of the affected area by freezing (cryosurgery), cauterization (diathermy or burning), laser (which destroys abnormal tissue but leaves normal tissue intact), Loop Electrosurgical Excision Procedure (LEEP), or conization to remove unhealthy tissue. While you may experience some discomfort and light bleeding for one or two days, there are no side effects.

Surgery: A hysterectomy (removal of the uterus and cervix) is done if abnormal cells are found inside the opening of the cervix and you do not want to have children in the future. When only the uterus and cervix are removed, there are no symptoms of menopause, since hormones are still being produced by the ovaries. If the fallopian tubes and ovaries are removed (salpingo-oophorectomy), menopause occurs. It is important to remember that sexual desire and the ability to enjoy sex physiologically are not changed by hysterectomy.

More advanced cervical cancers are often treated with radiation.

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ADDITIONAL RESOURCES

American Cancer Society
1-800-227-2345
<http://www.cancer.org>

CancerNet (A Service of the National Cancer Institute)
<http://cancernet.nci.nih.gov>

Centers for Disease Control and Prevention (CDC)
National Center for Chronic Disease Prevention and Health Promotion
Cancer Prevention and Control
<http://www.cdc.gov/cancer>

National Breast and Cervical Cancer Early Detection Program
<http://www.cdc.gov/cancer/NBCCEDP/index.htm>

National Cancer Institute
1-800-4-CANCER (1-800-422-6237)
<http://www.cancer.gov>

National Alliance for Hispanic Health
<http://www.hispanichealth.org>

- Su Familia: The National Hispanic Family Health Helpline
1-866-Su-Familia (783-2645) or e-mail: SuFamilia@hispanichealth.org

SU FAMILIA

THE NATIONAL

HISPANIC FAMILY

HEALTH HELPLINE

1-866-SU-FAMILIA

NATIONAL HISPANIC

PRENATAL HELPLINE

1-800-504-7081

NATIONAL HISPANIC

INDOOR AIR

QUALITY HELPLINE

1-800-SALUD-12