



CERVICAL CANCER:

Causes, symptoms, myths & facts & more

Cervical cancer is the second most common cancer amongst South African women, and the leading cause of cancer-related deaths. It is estimated that women across the world have a 1 in 42 lifetime risk of contracting cervical cancer, and it has been identified as a national priority due to an increase in incidences.

In this education sheet, we will cover everything you need to know about cervical cancer.

First thing's first: What is cervical cancer?

Cervical cancer is a type of cancer that occurs in the cells of the cervix – the lower part of the uterus that connects to the vagina. This cancer can affect the deeper tissues of the cervix, and may spread to other parts of the body.

Cervical cancer grows slowly, so there is usually enough time to identify and treat the disease before it causes serious problems. However, despite improved screening methods via Pap tests, cervical cancer is a growing concern in South Africa.

The different types of cervical cancer

Squamous cell carcinoma

- forms in the lining of the cervix, and is found in up to 90% of cases.

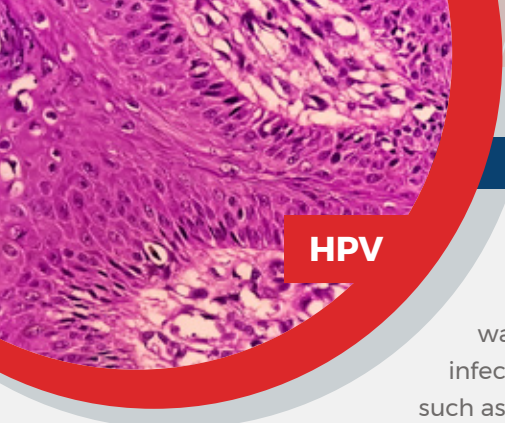
Adenocarcinoma

- forms in the cells that produce mucus.

Mixed carcinoma

- forms in both the lining and the cells that produce mucus.





HPV

Causes of cervical cancer

While the exact causes of cervical cancer aren't clear, the medical community is certain that HPV plays a role in most cancers. Various types of HPV can cause warts on your skin and genitals, as well as other skin disorders. HPV is a common infection, and most people with the virus do not develop cancer – so other factors such as lifestyle choices and your environment are likely to play a role.



Cervical cancer risk factors

The below factors may place you at higher risk of developing cervical cancer.

- Started having sex at an early age (before age 16 or within a year of starting your period), which often leads to contracting HPV
- Have multiple sexual partners, thereby increasing your chance of acquiring HPV
- A weakened immune system
- Smoking



Symptoms of cervical cancer

Early-stage cervical cancer generally doesn't produce signs or symptoms, so regular check-ups are crucial to catch the disease early. More advanced cervical cancer may lead to the following symptoms:

- Vaginal bleeding after sex, between periods, after menopause or after a pelvic exam
- Watery, bloody vaginal discharge that may be heavy and smell bad
- Pelvic pain or pain during sex

When to call a medical professional

You should talk to your healthcare provider if:

- You bleed after menopause
- You have heavy periods or bleed often between periods
- If you bleed regularly after sex (some women experience bleeding after sex, especially if it's vigorous – however, if it happens often, you should chat to a healthcare professional)
- Vaginal bleeding along with weakness or light-headedness – if this occurs, go to the emergency room



How is cervical cancer diagnosed?

PAP SMEAR

The most important tool in diagnosing cervical cancer is the Papanicolaou test – also known as a Pap smear. This is part of your regular pelvic exam, in which your healthcare provider collects cells from the surface of your cervix and gets them examined under a microscope. If they find any unusual cells, they may request a biopsy.



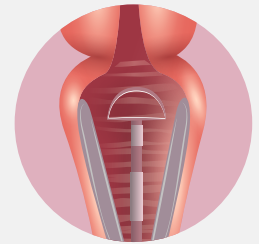
COLPOSCOPY

Your cervix is stained with a harmless dye to make the cells easier to see, then your healthcare provider uses a microscope to look for unusual cells in your cervix.



LEEP

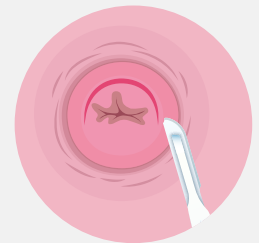
This is the use of a 'loop electro-surgical excision procedure' (LEEP) to take a tissue sample from your cervix, enabling your healthcare provider to have a better look at the unusual cells in your cervix.



CONISATION

This is where a doctor removes part of your cervix while you are under anaesthetic, using LEEP, a scalpel or a laser. While this sounds intense, these are outpatient procedures, and you can usually go home the same day.

If a test or biopsy shows that the cancer is far along, your healthcare provider will probably do further tests to see if it has spread and, if so, how far. These can include X-rays, blood tests, MRI scans and more.



Treatments for cervical cancer

PRECANCEROUS LESIONS

If you have a lesion that is not severe, you may not need treatment at all – especially if your healthcare provider removed the area during a biopsy. Precancerous lesions can be removed via LEEP, conisation, cryosurgery (freezing the cells, which die off), cauterisation (burning the cells off), or laser surgery (using laser beams to destroy cancerous cells). In all instances, the dead cells will be replaced by new, healthy cells, and you shouldn't experience any significant damage to nearby healthy tissue.

CERVICAL CANCER

The 2 most common treatments for cervical cancer are surgery and radiation therapy. Other options include chemotherapy and biological therapy.

SURGERY

If the cancer is only on the surface of your cervix, you can remove or destroy the cells via similar methods used for precancerous lesions. If the cancerous cells have passed through the 'basement layer', which separates the surface of the cervix from underlying layers, you will probably need an operation to remove the tumour.

If the cancer has spread to your uterus, your doctor will probably recommend a hysterectomy. This is the removal of your entire uterus, and will mean that you can no longer become pregnant.

RADIATION THERAPY

Also known as radiotherapy, this treatment uses high-energy rays to damage cancer cells and stop their growth. External radiation treatments usually only take a few minutes, but are usually done 5 days a week for around a month and a half.

Internal radiation is another option, in which your doctor places a capsule containing radioactive material into your cervix. This allows the cancer-killing rays to be placed right next to the tumour, without doing significant harm to the healthy tissue around it.

CHEMOTHERAPY

This is what most of us think of when we think of cancer treatment, in which doctors use powerful drugs to kill the cancer cells. This treatment will usually only be used when the cancer is advanced, or if it has spread to other parts of the body.

Chemotherapy happens in cycles, with bouts of intensive therapy followed by periods of recovery.

BIOLOGICAL THERAPY

If chemotherapy isn't working, your doctor might recommend biological therapy, also known as immunotherapy. This treatment turns on or off 'checkpoints' in your immune cells to create an immune response, shrinking tumours or slowing their growth.

Immunotherapy is administered via IV every 3 weeks.



How to minimise your risk of cervical cancer

GET VACCINATED AGAINST HPV

HPV is the leading confirmed cause of cervical cancer, so ask your healthcare provider if the vaccination is right for you.

GET TESTED REGULARLY

Pap tests should be part of your healthcare routine, starting at age 21 and being repeated every few years. With early-stage cervical cancer having little to no signs or symptoms, this is crucial for early diagnosis.

PRACTICE SAFE SEX

Use a condom every time you have sex and limit the number of your sexual partners to reduce the risk of contracting HPV or any other STI.

DON'T SMOKE

If you don't smoke, don't start. If you do, chat to your healthcare provider about ways to quit.

GET VACCINATED



DON'T SMOKE



How to take care of yourself during cancer treatment

Being diagnosed with and treated for cervical cancer can have an impact on your physical and emotional wellbeing. One of the best ways you can look after your body during treatment is to ensure you're getting all the nutrients your body needs. With enough calories and protein in your body, you'll be better equipped to handle treatment.

Should your appetite be diminished by the treatment you're undergoing, chat to a nutritionist and/or try to eat small portions more often to get the nutrients you need.

Other lifestyle changes that may help include:

- Doing mild physical activity to keep your energy levels up
- Getting enough sleep and taking naps if you need to
- Quitting smoking
- Avoiding alcohol

You should also stay calm and keep your spirits up – when diagnosed and treated early, cervical cancer has a near 100% survival rate.



Cervical cancer myths & facts

Myth: Cervical cancer cannot be prevented.

Fact: There are various lifestyle changes you can make to minimise your risk, but the most important way to prevent cervical cancer is regular testing. This will enable you to catch the precancerous cells early and destroy them before they develop into a more serious disease.

Myth: If you have HPV, you will develop cervical cancer.

Fact: There are more than 100 types of HPV, and only some of them have a high risk for cervical cancer. Those that do have a higher risk will cause abnormal cell changes in the cervix, which may develop into cervical cancer if they are not found and treated early.

Myth: You are more likely to get cervical cancer if you have lots of sexual partners.

Fact: Minimising your sexual partners will only reduce your risk of contracting HPV – cervical cancer is not caused by multiple partners alone. You may develop cervical cancer if you've only had 1 sexual partner; the exact causes of the disease are not known.

Myth: I've had the HPV vaccine, so I don't need to worry about cervical cancer.

Fact: Again, no-one knows exactly why cervical cancer develops, and you should always ensure that you're getting regular Pap smears to test for cancerous cells.



Get tested regularly and make healthy lifestyle changes today to minimise your risk of cervical cancer