Do I Have Cancer of the Cervix?

IF I HAVE AN ABNORMAL PAP SMEAR, WILL I GET CANCER?

- If your Pap smear is not normal, it does not usually mean that you have cancer.
- Most often an abnormal Pap smear means that you either have an infection or you have changes in the cells of the cervix that could lead to cancer if they are not treated.
- If your Pap smear is not normal, you must get the recommended follow-up and treatment.
- Regular Pap smears and treatment when needed can prevent most cancer of the cervix.

WHAT DOES MY PAP SMEAR RESULT MEAN?

- **NEGATIVE/NORMAL**. This is good. The cervical cells are healthy. If previous Pap smears have also been normal, you won't need a Pap smear for at least 1 year.
- UNSATISFACTORY for evaluation. The slide cannot be read. Causes include douching, bleeding, infection, or not enough cells on the slide. The Pap smear should be repeated.
- BENIGN. The Pap smear showed infection, irritation or normal cell repair. If you have an infection, you may need medication. Otherwise, your health care provider will most likely recommend another Pap smear in 1 year.
- **ASCUS**. (Atypical cells of undetermined significance) The Pap smear showed some abnormal changes in the cells, but the cause is not clear. Infection is a common cause, and you may be given medication. Your health care provider will recommend specific follow-up. This may include another Pap smear in 3-6 months or a colposcopy.
- LOW GRADE CHANGES. You may have been infected with the Human Papillomavirus (HPV). Some types of HPV are associated with an increased risk for cancer of the cervix.

Your health care provider will recommend specific follow-up. This may include another Pap smear in 3-12 months or a colposcopy.

 HIGH GRADE CHANGES. The cells of the cervix may progress toward cancer, but they are not cancer yet. Fewer than half of women with this test result will develop cancer.
Colposcopy is needed. Biopsy and treatment may be necessary. Treatment is important but waiting a few weeks is okay.

WHAT IS COLPOSCOPY?

 Colposcopy is a procedure that allows your health care provider to look at the cervix with a special high power microscope. If abnormal cells are suspected, a biopsy will be taken - a biopsy involves removing a tiny piece of tissue that is sent to the lab for further testing.

WHAT ARE THE POSSIBLE BIOPSY RESULTS?

- The cells are normal. Another Pap smear and sometimes another colposcopy may be needed just to make certain.
- LOW GRADE CHANGES. (HPV/genital warts, mild dysplasia, CIN I) Your health care provider will either treat you or follow-up with a Pap smear every 3-6 months for at least I year to watch for changes.
- HIGH GRADE CHANGES. (moderate to severe dysplasia, CIN II or III) Treatment is needed.
- CANCER. Treatment is needed and may include surgery.

WHAT TREATMENTS ARE AVAILABLE FOR ABNORMAL CERVICAL CHANGES?

Discuss the types of treatments with your health care provider and follow through with the treatment chosen. Be sure your health care provider discusses the risks of each procedure with you.

- Cryocautery The surface of the cervix is frozen. The abnormal cells peel off and new healthy cells grow back. You may have mild cramps during the procedure. This treatment may be used if the abnormal area is small.
- LEEP / LLETZ After you are given a local anesthetic, the surface of the cervix is removed with an electric wire loop. New healthy cells grow back. This treatment may be used if the abnormal area is large.
- Laser Vaporization After you are given a local anesthetic, a beam of light is used to remove the surface of the cervix. New healthy cells grow back. This treatment may be used if the abnormal area is large.
- Conization After you are given a local anesthetic, a cone-shaped area of the cervix is removed to get rid of abnormal cells inside and on the surface of the cervix. New healthy cells grow back. This treatment may be used if the abnormal area is hidden or very severe.

After any of the above procedures you will have some spotting and discharge.

 Hysterectomy - The uterus is surgically removed. This procedure is done in the hospital. You will be given either a regional or general anesthetic. You will no longer have periods or be able to get pregnant.

WHAT SHOULD I DO AFTER TREATMENT?

You will need a Pap smear every 6 months for 1-2 years following most of these treatments.

You will likely need a Pap smear at least once a year for the rest of your life, even if you have had a hysterectomy (pre-cancerous cells could develop at the top of the vagina).

- **Get Vaccinated**. Depending on your age, you may be eligible for the HPV vaccine that prevents the types of genital human papillomavirus that cause most cases of cervical cancer and genital warts. The vaccine is routinely recommended for 11 and 12 year old girls, but it is also for girls and women age 13 through 26 who have not yet been vaccinated or completed the vaccine series. This could prevent you from getting cervical cancer later in life.
- **Do not smoke**. It doubles your chance of getting cancer of the cervix.
- Eat healthy foods including dark green leafy vegetables, red/orange/yellow fruits and vegetables, and whole grain foods. These foods help the cervix heal.
- Consider decisions about sex very carefully. The younger you begin having sex, the greater your risk for developing cancer of the cervix.
- Being abstinent not having sex, prevents sexually transmitted diseases (STDs) including HIV/AIDS and greatly reduces your risk for cancer of the cervix.
- If you do have sex Sex with only one STD-free, lifelong partner is the safest sex. Otherwise, limit the number of your sexual partners.

Do not have sex with anyone who has an STD; always use a condom for sex.

The more people you have sex with - the greater your risk for STDs, HIV/AIDS and cancer of the cervix.

Adapted from U.S. Department of Health and Human Services Office of Public Health and Science, Office of Population Affairs For additional copies, please contact: Office of Population Affairs Clearinghouse

P.O. Box 30686 Bethesda, MD 20824-0686 Phone: 866-640-PUBS (7827) Fax: 866-592-FAXX (3299)

Source: Contraceptive Technology, Hatcher, 1994 Updated 05/03

Reprinted 05/03 Website: http://opa.osophs.dhhs.gov E-mail: clearinghouse@dhhsopa.net

