

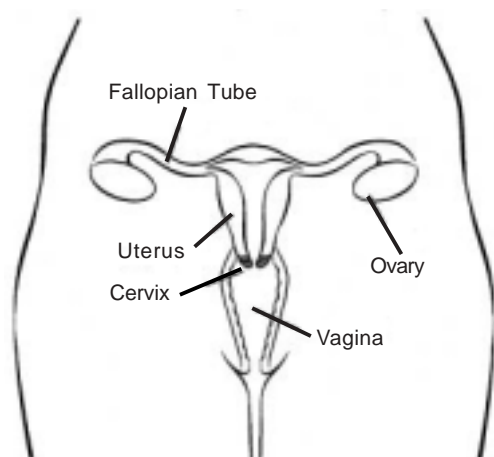
Cervical Cancer

Each year, about 730 women are diagnosed with cancer of the cervix in Australia (10 in the ACT). About 270 Australian women will die from the disease each year.

Cancer of the cervix can be prevented through the early detection of abnormalities in cells lining the cervix. Cancer of the cervix is almost entirely curable at an early stage.

The Cervix

The cervix is the lower part of the uterus (womb) that connects to the vagina. It produces some of the moistness that helps lubricate the vagina, produces the mucus that helps sperm travel up to the fallopian tube to fertilise an egg from the ovary and holds the developing baby in the uterus during pregnancy. During childbirth, the cervix widens to allow the baby to pass down into the birth canal (vagina).



Cancer of the Cervix

Cancer of the cervix may take years to become established and is almost always preceded by early changes in the cells of the cervix.

Normally, the cells of our body grow and divide in an orderly manner so that worn out or injured tissue is replaced or repaired. Sometimes cells begin to grow and behave in an abnormal way and grow into a mass or lump of tissue called a tumour. Tumours can be benign (non-cancerous) or malignant (cancerous). Malignant tumour cells are able to break away and move around the body causing secondary growths.

There are two main types of cervical cancer which are named after the type of cell from which they originate:

- **Squamous cell carcinoma** - This is the most common, accounting for 80% of all cervical cancers. It starts in the squamous or skin-like cells of the cervix.

- **Adenocarcinoma** - This is a less common type of cervical cancer, which develops from the glandular cells. This type is more difficult to diagnose because it starts higher in the cervix and is more difficult to reach with the brush or spatula used in taking a Pap smear.

Symptoms

Early changes in the cells of the cervix (epithelial abnormalities) rarely cause symptoms. If early cell changes develop into cervical cancer, the most common signs include:

- vaginal bleeding between periods
- menstrual bleeding that is longer or heavier than usual
- bleeding after intercourse
- pain during intercourse
- unusual vaginal discharge
- vaginal bleeding after menopause
- excessive tiredness
- leg pain or swelling
- lower back pain.

All these symptoms are common to many conditions and may not mean cervical cancer. However, any of these symptoms should be checked by a doctor.

Causes

Some factors seem to put some women at a higher risk of cervical cancer. These risk factors include:

- Human Papilloma Virus (HPV) Infection (sometimes called wart virus) is a common infection affecting the surface of any part of the body, including the skin, vagina and cervix. Around eight out of 10 women will become infected with the genital HPV at some time in their lives and, for most, it will clear up on its own. Most women who have HPV don't ever show signs of abnormal cell changes. However, in some women it can cause cell changes which lead to dysplasia (abnormal cells). If untreated, these changes may become cancer.
- Smoking which increases the risk of cervical cancer fourfold.
- Daughters of women who used the drug diethylstilboestrol (DES) during pregnancy to prevent a miscarriage. The use of this drug has declined since the 1940s and 50s.

Having one or more of these risk factors does not mean that a woman is certain to develop cervical cancer.

Diagnosis

Abnormal cell changes in the cervix can be found with a Pap test. This test does not diagnose cancer but finds early changes which might later become cancer. The earlier these changes are found the better the chance of cure. If a Pap test

detects changes, more tests will be needed to confirm the diagnosis.

Colposcopy This is an examination that shows where the changed cells are and what they look like. It is done using an instrument called a colposcope, which is like binoculars on a stand. The colposcope gives a magnified view of the cervix and vagina but does not enter the body.

Biopsy A small sample of tissue, called a biopsy, may be taken from any abnormal area on the cervix and sent to a laboratory for examination under a microscope.

Cone biopsy This removes a cone-shaped piece of tissue containing the abnormal cells from the cervix. This procedure is used to see if the cancer cells have spread to tissue beneath the surface of the cervix. It is also used to treat very early and very small tumours. Further treatment is needed for cancers that are larger or have spread.

Large loop excision of the transformation zone (LLETZ) This removes a large sample of the cervix for examination under a microscope. A loop of wire carrying an electric current is used to cut out tissue from the cervix.

Further tests may be performed to determine the extent of the cancer and if it has spread.

Treatment

Surgery

Surgery is common for small tumours found only within the cervix. The extent of the cancer in the cervix will determine the type of surgery needed.

- **Cone biopsy** Some very early cervical cancers may be treated with cone biopsy. (see above)
- **Hysterectomy** A hysterectomy is the removal of the uterus by surgery.
There are two kinds of hysterectomy:
 - Total hysterectomy—the uterus including the cervix is removed.
 - Radical hysterectomy—the uterus, cervix, support ligaments and top part of the vagina are removed. The ovaries are usually not removed in women who are still having periods. Lymph node dissection may also be done during a radical hysterectomy for cervical cancer.

Radiotherapy

Both external and internal radiotherapy may be used to treat cervical cancer, if the cancer has spread into the tissues around the cervix or if the tumour is very large as this would be difficult to cure by surgery alone, after surgery or combined with chemotherapy.

Chemotherapy

Chemotherapy is usually combined with radiotherapy to make the radiotherapy more effective or may also be used on its own for advanced cervical cancer.

Prevention

All women who have ever had sex should have a regular Pap test every two years from the ages of 18-20 to 70 years.

The Pap test (also called Pap smear) is a simple test that detects abnormal or cancerous cervical cells. Because the Pap test can detect cervical changes before they progress to cancer, it is very effective in reducing the number of cervical cancers diagnosed and deaths from the disease. The test involves a doctor or nurse taking a sample of cells from the surface of the cervix that is then smeared onto a glass slide. The slide is sent to a laboratory for analysis and the results are usually available within a week or so.

Most Pap test results are normal. A small number show changes in the cells of the cervix, which are mostly minor infections that usually clear up naturally or are easily treated. In a very small number of cases if the abnormality persists and is left untreated the changes may develop into cervical cancer. When detected early, changes to the cells of the cervix are easily managed.

Cervical cancer /HPV vaccine

The vaccine prevents infection with some HPV types which are responsible for the majority of cervical cancers. It is most effective if given to girls before the initiation of sexual activity, before they have been exposed to these types of HPV. This will substantially lower their risk of developing cervical cancers caused by the most important cancer-causing strains of HPV. However, some risk of cervical cancer will still remain as no vaccine is 100% effective and it doesn't provide protection from the other types of HPV that are also known to cause cervical cancer, therefore it is very important for women who have been vaccinated to have regular Pap tests.

Where are Pap tests available in the ACT?

- Your medical practitioner
- Womens Health Service Ph: (02) 6205 1078
- Sexual Health and Family Planning ACT
Ph: (02) 6247 3077
- The Junction Youth Health Service (for women aged 12-25) Ph: (02) 6247 5567
- Winnunga Nimmityjah Aboriginal Health Service (for Aboriginal and Torres Strait Islander women)
Ph: (02) 6284 6222

Other information

ACT Cervical Cytology Registry

The register is a central and confidential list of ACT women's Pap test results, which also provides a reminder system for women who have not had a Pap test within two and a half years of their last one. Women may choose whether they wish to have their results stored on the register or not.

Ph: (02) 6205 1545