

# Like clockwork

from Dr. Laura Corio, M.D.

Women's Health Issues

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## Cervical Cancer Awareness

January is Cervical Health Awareness Month. I know this isn't the most exciting event on your calendar, but it is something you should care about. Cervical cancer is the second most common cancer in women worldwide, causing an estimated 250,000 deaths each year. Here is what I want my patients to know about cervical cancer.

### Cervix

This small, doughnut-shaped gateway to the uterus is located at the top of the vagina, and serves as the entrance to the uterus. Cervical cancer begins with abnormal, microscopic changes in the cells of the outer layer of the cervix. It tends to grow slowly and can remain in an early stage, confined to the cervical covering, for two to ten years; once the cancer spreads beyond this layer, it invades nearby tissue, including the main body of the uterus, the vagina, bladder and rectum.

### Risk

Virtually all cervical cancer is caused by the human papillomavirus (HPV), the most common sexually transmitted infection in the world. The Centers for Disease Control (CDC) estimate that 80 percent of women in the U.S. have been exposed to this virus at one point or another. Often it goes away on its own within two years of exposure. But each year hundreds of thousands of women and girls in the United States develop persistent infections from HPV. More than 10,000 will develop cervical cancer and 3,700 will die from the cancer. Women who have had unprotected sex, initiate intercourse at a young age or have had many sexual partners are at greatest risk of infection. HIV, genital herpes and Chlamydia also increase risk of HPV infection, while smoking doubles risk.

### Symptoms

In its early stages, cervical cancer has no symptoms. Once it begins to spread, it may cause a blood-tinged or discolored vaginal discharge, spotting after intercourse or abnormal bleeding. But these symptoms can be caused by many disorders of the female reproductive tract. More advanced stages of cervical cancer can cause pelvic pain, appetite loss, weight loss and anemia. Screening for the disease is done by pelvic exam, HPV DNA test and Pap smear (I use a thin prep Pap smear because it's the most accurate type of Pap test available) and I form a final diagnosis by doing additional testing.

### Prevention

All women over the age of 18 should have regular pelvic exams, Pap smears and an HPV DNA test to check for the virus. The FDA recommends that Gardasil, a vaccine for protection against cervical cancer, be administered to all females ages 9-26. Given in a series of three injections, the vaccine protects against four strains of HPV; two of those strains cause 70 percent of the nation's cervical cancer cases, and two of them cause 90 percent of genital warts. According to the FDA, if widely used, the vaccine has the potential to wipe out cervical cancer in the United States. I recommend that all girls and women who have not yet been sexually active should receive the vaccine. If you have had intercourse you've been exposed to the HPV virus and the vaccine's effectiveness remains unclear. In that case, we can discuss and decide whether or not the expense of the vaccine makes sense for you.

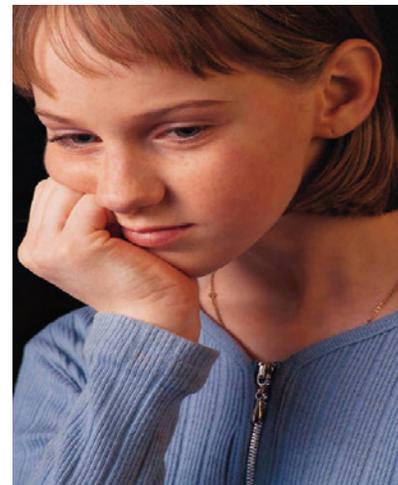
### Bottom line

Cervical cancer is a preventable and treatable disease – *no one* should ever die from it! I don't want a single patient of mine to go through the pain and suffering it causes, so be sure to schedule a yearly pelvic exam and have a Pap smear at least once every three years, beginning about three years after you begin to have sexual intercourse, but no later than age 21. Once you reach age 70 and have had at least three normal Pap tests and no abnormal Pap tests in the previous 10 years, we may decide to stop performing Pap smears. If you have any questions or concerns related to cervical cancer, let's talk about it at your next appointment.



## Screening can save your life

Schedule a yearly pelvic exam and a Pap smear at least once every three years, beginning about three years after you begin to have sexual intercourse, but no later than age 21.



### Dr. Corio's Resources

More information about cervical cancer on the Web:

- National Cancer Institute  
[www.cancer.gov](http://www.cancer.gov)
- National Cervical Cancer Coalition  
[www.nccc-online.org](http://www.nccc-online.org)
- National Cervical Cancer Public Education Campaign  
[www.cervicalcancercampaign.org](http://www.cervicalcancercampaign.org)

## PEARLS

**The Question:** If my partner wears a condom during intercourse, does that protect me against HPV?

**The Research:** A study performed at the University of Washington found that women whose partners always wore condoms and did so correctly, decreased their risk of being infected by HPV by 70 percent. Women whose partner wore a condom more than half of the time, but not always, were 50 percent less likely to contract the virus. HPV is spread through sexual contact, meaning no penetration is needed to contract the virus. Even if your partner wears a condom during intercourse and wears it correctly, there is no guarantee of 100 percent protection against HPV. A condom only covers only the penis, leaving the rest of the genitals exposed. During intercourse these unprotected areas can come in contact with the vagina.

**Dr. Corio Says:** Condoms do reduce the risk of coming into contact with HPV but they aren't foolproof. You can still be exposed to HPV even while having protected sex.

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**The Question:** If I have an abnormal Pap smear, does that mean I have cancer?

**The Research:** No. Often an abnormal Pap smear indicates the presence of HPV; nearly 60 percent of women test positive for the presence of the virus. Yeast infection, herpes, trichomonas, recent sexual activity, or use of vaginal preparations can also result in an abnormal Pap. What it does mean is that I'll need to perform additional procedures to see what's going on.

**Dr. Corio Says:** One of the diagnostic procedures I use is called a colposcopy; this is where I use a special instrument to visually look at your cervix, vagina and vulva. Depending on the results of the colposcopy, I might recommend doing nothing, a procedure called a Loop Electrosurgical Excision Procedure (LEEP) which involves using an electric wire loop to slice off a thin, round piece of tissue or a cone biopsy where I remove a cone-shaped wedge of tissue from your cervix so I can examine the cells I collect under a microscope. Once you've had an abnormal Pap smear or a positive HPV DNA test, I will want to see you for retesting or additional procedures in three to six months.

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Sources: cancer.gov, nccc-online.org

## Doctor & Office Hours

### Doctor's Hours

Monday	12:00 PM-6:00 PM
Tuesday	9:00 AM-3:00 PM
Wednesday	9:30 AM-2:30 PM
Thursday	8:00 AM-2:00 PM

### Office Hours

Monday	10:00 AM-5:00 PM
Tuesday – Friday	9:00 AM-4:00 PM

### Make an Appointment

Call 646-422-0730 during our normal office hours.



## News Flash

*Here's yet another reason to embrace Yoga. Researchers at the Fox Chase Cancer Center in Philadelphia speculate that a woman's daily dose of stress affects her ability to fight off HPV and her risk of developing cervical cancer. In the study women who had precancerous cervical lesions were asked to complete a questionnaire about their perceived stress in the previous month and to report any major stressful life events such as divorce, death of a close family member or loss of a job. Surprisingly, there was no connection between past major life stressors and the body's response to HPV infection. But the women who reported a high level of unrelenting stress on a regular basis were unable to mount an effective immune response to HPV.*

*This information has been adapted from sciencedaily.com and materials provided by the Annals of Behavioural Medicine.*