



Stop the spread

CERVICAL cancer is the fourth most common cancer among women.

About 90 per cent of deaths from cervical cancer occur in low- and middle-income countries.

Effective primary (HPV vaccination) and secondary prevention approaches (screening for, and treating precancerous lesions) will prevent most cervical cancer cases.

When diagnosed, cervical cancer is one of the most successfully treatable forms of cancer, as long as it is detected early and managed effectively.

Cancers diagnosed in late stages can also be controlled with appropriate treatment and palliative care.

Cervical cancer is not a hereditary disease.

The cancer develops as a consequence of HPV infection, following the transmission of oncogenic strains of the virus.

About 70 per cent of all cervical cancers are caused by HPV types 16 and 18.

Although most infections with HPV resolve spontaneously and cause no symptoms, persistent infection can cause cervical cancer in women.

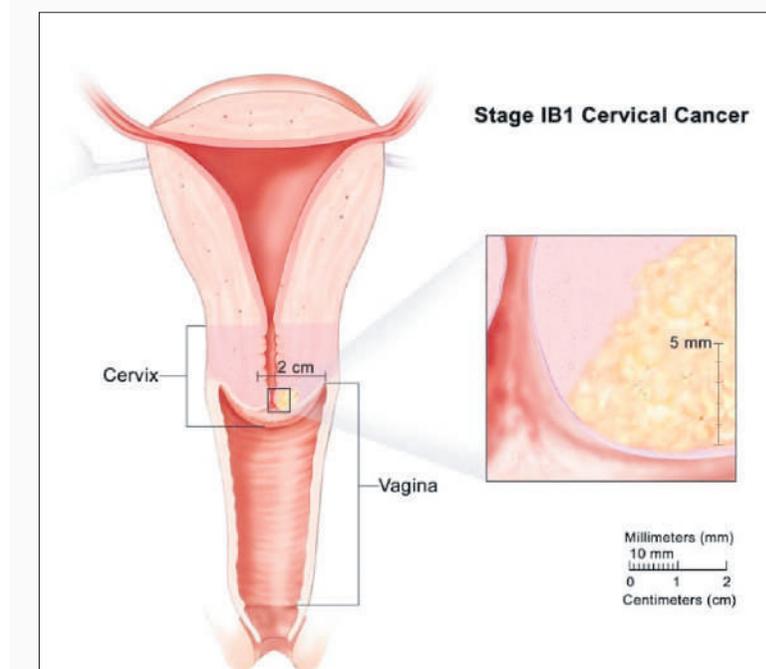
Risk factors for the disease include:

- Weakened immunity;
- Early age at first sexual intercourse;
- Smoking;
- Multiple sexual partners;
- Higher number of children;
- Long-term use of oral contraceptives; and
- Chronic cervical inflammation.

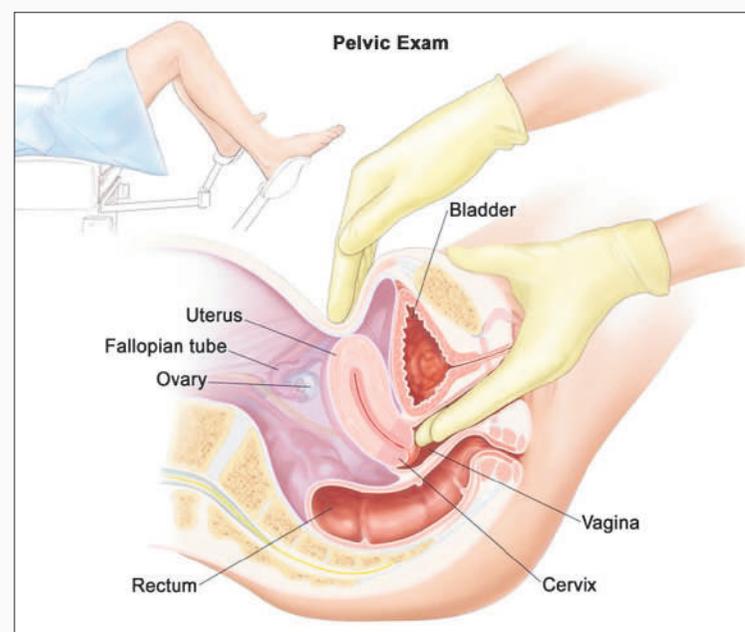
In the early stages there are no real signs of the disease.

As the disease progresses symptoms appear, such as:

- Vaginal bleeding at unusual times. This refers to bleeding outside the period of menstruation for women of child-bearing age, and at any time after women



Cervical cancer is a disease in which malignant (cancer) cells form in the tissues of the cervix. Graph: www.uhhospitals.org



A doctor or nurse inserts one or two lubricated, gloved fingers of one hand into the vagina and presses on the lower abdomen with the other hand. This is done to feel the size, shape, and position of the uterus and ovaries. Graph: www.uhhospitals.org

have been through the menopause;

- Pain and discomfort during sex; and
- Unusual-smelling vaginal discharge.

More advanced or spreading disease can then present with symptoms such as:

- Constipation;
- Fatigue;
- Blood in urine;
- Incontinence; and
- Swelling of one leg.

The three tests commonly used for cervical cancer screening include:

- HPV testing of cervical cell samples to identify the presence of DNA or RNA from high-risk

strains of virus, even without visible or microscopic cell changes;

- Conventional testing (Pap/smear tests) and liquid-based cytology; and
- Visual inspection.

Screening should be performed at least once for every woman in the target age group (30-49 years) when it is most beneficial. HPV testing in cervical cancer screening is indicated for:

- Women who had abnormal Pap tests and require follow-up for confirmation;
- Women over the age of 30 years who also have a Pap test done; and
- Women over the age of 25 years.

There are currently vaccines that protect against common cancer-causing types of human papilloma virus and can significantly reduce the risk of cervical cancer.

At present in Fiji the only vaccine available through the MoHMS immunisation schedule is that which is given to girls at Class 8 in a three-dose schedule.

At OHPL on a need basis the Gardasil vaccine can be procured through our pharmacy.

■ Dr Rayneel Singh is a general practitioner at Oceania Hospitals Pte Ltd. The views expressed are his own and not necessarily of this newspaper.

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