GYNECOLOGIC and BREAST CANCERS

What you should know about GYNECOLOGIC and BREAST CANCERS.
Gynecologic cancer is the fourth most common cancer in women. An estimated 1 in every 20 women will develop gynecologic cancer in their lifetime. Breast Cancer is the 2nd leading cancer diagnosis in women. No one can predict for sure who will get a gyn or breast cancer. That is why it is so important for people to pay attention to their bodies. When these cancers are found early, treatment is most effective.

What are the specific gynecologic cancers? Gyn cancers start in a woman’s reproductive organs. There are 5 main types: ovarian, cervical, uterine, vaginal, and vulvar. Each cancer appears with different signs and symptoms, has different prevention strategies, and different treatments. The risk for gynecologic cancers increases with age. All people with these organs are at risk. These cancers do not have to be life threatening; there are some early detection tools such as PAP tests.

Pay Attention to Your Health. Be familiar with your family history, and tell your health care provider if there is a history of cancer in your family so she/he can recommend preventive steps. Learn the warning signs of these cancers, learn what is normal, and if you notice any unexplained signs or symptoms, see a clinician right away. Some of these cancers have no warning signs, so it is important to make an appointment for an annual Women’s health visit (Well Woman’s Visit) or preventive health visit. The Pap test can screen for early changes in the cells of the cervix or precancers. At age 30 a human papillomavirus (HPV) test checks for the virus that can cause the cell changes of cervical cancer. There are treatments, if found early, to prevent cervical cancer.

The HPV vaccine (Gardasil) protects against some of the types of HPV that cause cervical, vaginal, vulvar, and oropharyngeal (mouth) cancers. It is now recommended for people ages 9-26.

Warning Signs of Cancer:
~ change in bowel or bladder habits; ~sore that does not heal;
~ lesion/mole that bleeds or is growing in a short time ~unexplained weight loss
~unusual vaginal bleeding or discharge ~persistent lump or thickening
~persistent indigestion or trouble swallowing

Most often these symptoms are NOT due to cancer but it is an important signal to see your health care provider for more evaluation.

Cervical cancer has a lifetime risk of 1 in 151. In 2013, 12,340 cases were diagnosed in the USA and 4,030 people died. Anyone who has a cervix should have a PAP test usually every 3 years starting at age 21. While cancer of the cervix often has NO symptoms, the first signs may be abnormal vaginal bleeding, spotting, watery vaginal discharge, bleeding after sex and heavier than normal menstrual bleeding.

Uterine or Endometrial Cancer affects the lining of the uterus. 24.3 women in 100,000 yearly will be diagnosed with uterine cancer. Median age at diagnosis is 62. It is most often postmenopausal. Symptoms include abnormal vaginal bleeding, spotting, new or unusual vaginal discharge or any bleeding or spotting after menopause. The symptoms may come and go. It is important to report these changes to your health care provider.

Ovarian cancer affects one or both ovaries. The incidence of new diagnosis of ovarian cancer is about 12.5 per 100,000 women per year. The median age of diagnosis is 63 although 3.6% occurs in people
between 20 and 34 years old. Symptoms may include pelvic or abdominal pain, bloating or an increase in abdominal size, difficulty eating or feeling full quickly, change in bowel habits, nausea, persistent fatigue.

**Vulvar cancer** is a cancer of the external female genital organs or opening to the vagina. 2.4 women per 100,000 per year will be diagnosed. Median age of diagnosis is 68 but 8.7% may occur in people ages 20-44. Persistent itching, burning or bleeding on the outside of the vagina or changes in skin color so that it looks redder or whiter than normal for you, may be a sign. See your health care provider if you have skin changes including persistent rash, wart type lesions, persistent lumps or nonhealing sores.

**Vaginal cancer** often has no symptoms, but might have abnormal vaginal bleeding or discharge, bleeding after menopause, heavier than normal bleeding, persistent spotting, changes in bowel habits or pelvic pain.

**Breast Cancer** has a reported 1 in 8 Lifetime risk. In 2013, 232,340 women were diagnosed and ~39,620 died from it. Signs include any breast lump or thickening or change in the breast tissue or nipple discharge especially if bloody. Current recommendations include routine screening mammograms (breast x-ray) starting at age 40 or 50 and every 1-2 years. The recommendations may vary based on family history of breast cancer.

**Family History as a RISK FACTOR** - Only 5-10% of breast and ovarian cancers are genetic. With ovarian cancer, family history of ovarian cancer is the greatest risk factor. Family characteristics that suggest hereditary breast and ovarian cancer predisposition include: multiple cancers within a family, cancers that occur at an earlier age, one individual with 2 or more primary cancers, male breast cancer. BRCA1 and BRCA2 are the most common genetic mutations associated with increased risk of breast and ovarian cancers. These mutations are more common in people of Ashkenazi Jewish background and certain other groups. (www.cancer.gov/cancertopics/factsheet/Risk/BRCA)

**Lifestyle changes that might help reduce your personal risk of Cancer** include:

~ Not smoking (http://www.smokefree.gov)

~ Being active/Regular exercise ((http://www.cdc.gov/physicalactivity)

~ Limiting your intake of fat (especially saturated fat and trans fat), eating foods with high fiber content (vegetables, fruits, whole grains),

~ Maintaining a healthy weight (http://www.cdc.gov/healthyweight)

~ Limiting your sun exposure and using sunscreen and protective clothing

~ Limiting your number of sexual partners, using condoms

~ Limiting alcohol intake (http://rethinkingdrinking.niaaa.nih.gov/)

*See your healthcare provider when you notice a persistent change from your normal.*

*Follow guidelines for recommended screening tests and get regular health checkups.

For further information contact your healthcare provider.

Helpful websites: www.uhs.berkeley.edu

www.nih.gov (National Institute of Health); www.cancer.gov/cancertopics

www.cdc.gov (Center for Disease Control)

www.acog.org (American College of Obstetrics and Gynecology)

Check our website: www.uhs.berkeley.edu to learn more about this medical concern or others.

For an appointment www.uhs.berkeley.edu or call 510-642-2000 Clinic Nurse 510-643-7197 for advice.