

## When Pap Smear is not Enough

Pap smears can detect abnormal cells in the cervix but are women neglecting to check their uterus and ovaries which can also succumb to cancer?

It is general knowledge that the presence of certain types of human papillomaviruses (HPV) infections can lead to cervical cancer. However, it is ovarian cancer that is the leading cause of death for women with reproductive abnormalities. At the other end of the scale, uterine cancer is usually found early so the chance of recovery is good. There are also surgical options for patients who are genetically prone to ovarian and endometrial cancer.

Early detection and treatment can decrease the chances of dying from disease so screening is the key to detect abnormal tissues or cells before cancer symptoms occur. If you already experience symptoms such as abnormal vaginal bleeding, abdominal pains, bloating or bowel pains, see your doctor immediately.



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### Cervical Cancer

The Department of Health in Hong Kong recommends all sexually active women take a Pap smear annually and then once every 3 years after two negative (normal) results. An abnormal result could mean more tests like a closer look at the cervix with an illuminated microscope called a colposcopy or a biopsy may be in order.

Because certain human papillomaviruses are associated with genital warts and cervical cancer, there is a new vaccine available to prevent HPV infections. The current HPV vaccine targets HPV 6, HPV 11, HPV 16 and HPV 18 which cause up to 70% of all cervical cancers. The vaccine is delivered in a series of three shots over a six-month period with the second and third shot at the second month and the sixth month respectively.

Condoms use may reduce the risk of HPV infections as well but are not totally reliable since other parts of the body such as the labia, scrotum and anus are exposed.

### Ovarian Cancer

Ovarian cancer is hard to detect in the early stages. Most women don't have symptoms and therefore are not diagnosed until the cancer has reached the advance stage. Despite aggressive surgery and chemotherapy the prognosis for these women are poor with a 5 year survival rate of less than 30%. Therefore early detection is a lifesaver. Your doctor can give a physical examination of your abdomen, a pelvic examination, blood tests and ultrasound for screening. Women who have a mother, sister, daughter with ovarian cancer has an increase risk of disease of about 10%.

### Uterine or Endometrial Cancer

The most common symptom of uterine cancer is postmenopausal bleeding. Other symptoms may be pelvic pain, trouble with urinating and pain during intercourse. This type of cancer usually occurs in women over the age of 50. Most uterine cancers are detected early and full recovery is possible. If your doctor suspects this type of cancer, a biopsy may be ordered to test for cancer cells. Patients on Tamoxifen, a drug that prevents breast cancer, have increased risk but prognosis is good for them because the cancer is usually confined to the uterus.

### Risk Reduction Surgery

For women who have completed their families and have a genetic tendency for ovarian cancer or uterine cancer, they may consider surgery such as the removal of the Fallopian tubes and both ovaries (BSO). Women who have a history of hereditary colon cancer (HNPCC) are at risk for both ovarian cancer and uterine cancer. Prophylactic hysterectomy (removal of the uterus) with BSO should be considered under the care of a clinical geneticist as it could increase risk of heart disease and osteoporosis.