Good to know ABOUT CERVICAL CANCER SCREENING

It pays to participate in screening — cancer can be prevented!





CERVICAL CANCER

What is cervical cancer?

Cervical cancer is the second most common cancer among women worldwide. It has become less common in Finland thanks to the national screening programme: about 170 new cases of cervical cancer are diagnosed each year.

Young women of childbearing age may also get the disease. In recent years, cervical cancer has unfortunately become more common in Finland among women aged 30–40 years.

The cancer symptoms may include excessive or post-coital bleeding or unusual vaginal discharge, but at the initial stage the disease is often symptomless.



Because cervical cancer develops slowly, precancerous lesions can be detected by screening.

Cervical cancer develops slowly through precancerous lesions. Precancerous lesions are cellular changes, most of which run their course without treatment, especially among young women. However, some cellular changes progress to become a malignant disease. The development of cellular changes into cancer usually takes a long time, even ten years.

What are the risk factors for cervical cancer?

The single most important background factor in the occurrence of cervical cancer is a prolonged infection caused by sexually transmitted human papillomavirus (HPV). Other major risk factors for cervical cancer are smoking and chlamydia. For example, smoking prolongs an HPV infection and slows down its healing.

How can cervical cancer be prevented?

Precancerous lesions can be detected by screening, and they can be treated before the actual cancer starts to develop. With effective screening, cervical cancer has declined in Finland: four out of five cancers can be prevented completely! At present, the national vaccination programme also includes an HPV vaccine, which is offered to girls and boys II—I2 years of age.

SCREENING PROGRAMME FOR CERVICAL CANCER

For whom?

To avoid cervical cancer, all women in Finland are invited to screenings every five years. According to studies, testing more often than at intervals of three to five years is not necessary if there are no symptoms. Generally, the first invitation is received at 30 years of age and the last at 65 years of age.

Women of all ages can be affected by cervical cancer. Sexual orientation, sexual activity or the contraception method used are of no importance. It would therefore be good for every woman to participate in screening. Nor do pregnancy, breastfeeding or hysterectomy prevent participation in screening.

Screening is paid for by the home municipality and is free of charge to the participant.

Why does it pay to take part in screening?

Screening is an effective means of preventing cancer. Most cervical cancers are found among women who have not participated in screening. It is always worthwhile to participate in screening, even if a similar examination had been done recently elsewhere.



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What happens during a screening appointment?

During the appointment, a nurse takes a screening sample from the vagina, the cervix and the cervical canal. The screening sample is a Pap smear specimen or an HPV specimen. The test is preferably not taken during menstruation because it is harder to interpret the sample then. The sampling may pinch a little and afterwards there may be some spotting for a couple of days.

A health history form is also filled in during the appointment. It is advisable to check the date of the most recent menstrual period before coming for the screening appointment.

What types of screening tests are used?

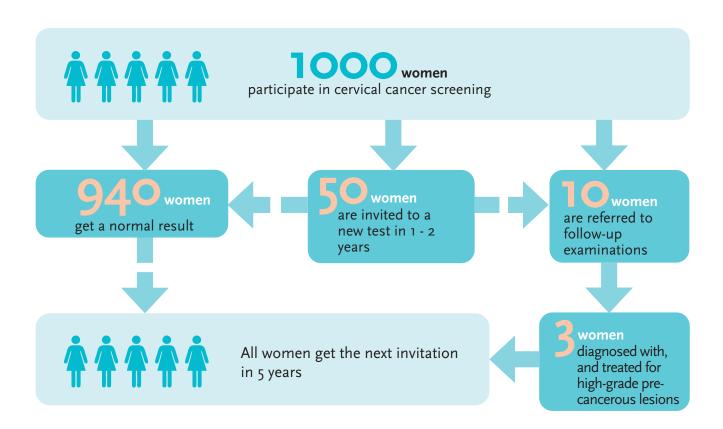
The Pap test is a smear test taken from the vagina and the cervix. The test consists of three parts: separate samples are taken from the vaginal fornix and the cervix by using a wooden spatula resembling an ice cream stick, whereas cells from the cervical canal are collected with a

small brush. In the Pap test, the cell specimen is dyed and mounted on a glass slide for examination under a light microscope. Any abnormal cells and cell groups are identified and classified.

The HPV specimen is collected from the cervical canal with a small brush. The HPV test is used to investigate whether the cervical canal cells have DNA from the most common high-risk carcinogenic HPV types.

How are the results given?

The test results are sent to you personally by letter. More than nine out of ten results are normal, i.e. there are no indications of cellular change in the cervix. If the screening gives rise to follow-up examinations, the letter contains instructions for them. Even then, the result is almost always a mild change that is not cancer nor even a precancerous lesion.





HPV — WHAT'S THAT?

How is HPV transmitted?

An HPV infection is transmitted from one person to another through mucous membrane contact and skin contact. Most infections occur during intercourse, but also by way of oral sex or the hands. It is actually impossible to track the infection, as it usually has no symptoms or the symptoms may only surface several months or years later. A symptomless person may also infect someone else. Infections can be avoided by using a condom. However, a condom does not give full protection against infections (according to studies, about 70%) because HPV may be transmitted by skin areas that the condom does not cover completely.

How does an HPV infection surface?

Because of the lack of symptoms, people don't usually know that they have an HPV infection. Cellular changes cannot even be seen with the naked eye. Condylomas are visible wart-like changes caused by certain HPV types in the genital and anal areas. Very rare symptoms of an HPV infection include itching, stinging, ulceration, or even haematuria if condylomas are located by the external urethral orifice. However, condylomas do not develop into cancer.

What cancers does HPV cause?

An HPV infection can cause cellular changes of the skin and mucous membranes, which, when prolonged, may progress to cancer. HPV can cause cancer in the areas

of the genitals, anus, mouth and pharynx. Generally, it takes a long time, as much as ten years, for cancer to develop. The most common HPV-induced cancer is the cancer of the female cervix.

How can an HPV infection be cured?

There is no medical cure for an HPV infection. However, an HPV infection usually clears up by itself, with the help of the body's own defence mechanism, within a couple of years. Precancerous lesions for cervical cancer can be removed in a procedure. Condylomas can be treated with prescription drugs available in pharmacies, and sometimes they can also be removed surgically, by freezing or by means of laser.

How to protect oneself from HPV?

A condom should always be used with a new or unknown sex partner. A vaccine against HPV has also been developed. The Finnish vaccination programme has a vaccine that protects against the most common HPV types causing cervical cancer. At present, the vaccine is offered free of charge to all girls and boys II–I2 years of age. The vaccine is estimated to prevent four out of five cervical cancers, and it has been found to prevent 95% of the severe precancerous lesions of cervical cancer. The vaccine may also be effective against other HPV-induced cancers. The vaccine has clearly the best efficacy if it is taken before the start of sexual activity.

ADDITIONAL INFORMATION AND A VIDEO OF SCREENING:

www.cervicalscreening.fi

