

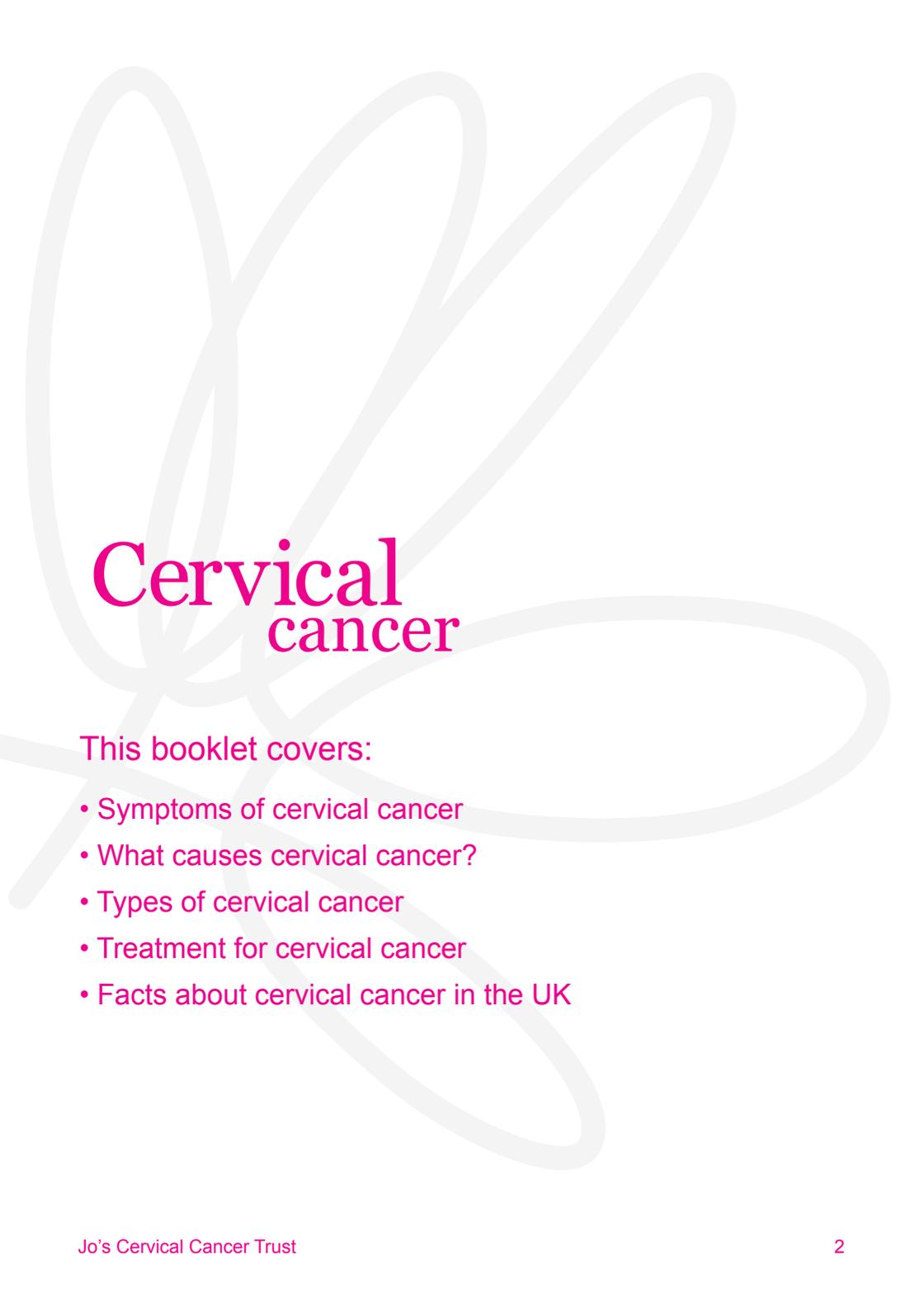
Information on:

Cervical cancer

Jo's cervical
cancer trust



jostrust.org.uk



Cervical cancer

This booklet covers:

- Symptoms of cervical cancer
- What causes cervical cancer?
- Types of cervical cancer
- Treatment for cervical cancer
- Facts about cervical cancer in the UK

What is cervical cancer?

Cervical cancer forms in tissues of the cervix (the organ connecting the uterus and vagina). Though experts agree that the majority of cervical cancer is slow growing, there is currently no clear answer on exactly how slowly it grows. The best estimates suggest it can take anywhere from 5 to 20 years for most abnormal cells to change into cervical cancer i iii. It may or may not have symptoms and it can be prevented through the HPV vaccination programme and regular cervical screening (a procedure in which cells are brushed from the cervix and looked at under a microscope). Cervical cancer is not thought to be hereditary iii iv.

Symptoms of cervical cancer

Whilst there are no symptoms associated with abnormal cells (cervical intraepithelial neoplasia [CIN], dysplasia or dyskaryosis), there are some symptoms associated with cervical cancer.

These include:

- Abnormal bleeding: during or after sex, or between periods
- Post menopausal bleeding: if you are not on hormone replacement therapy or have stopped it for six weeks
- Unusual vaginal discharge
- Discomfort or pain during sex
- Lower back pain.

What causes cervical cancer?

99.7% of cervical cancers are caused by persistent human papillomavirus (HPV) infections, which cause changes to the cervical cells. HPV is an extremely common virus; around four out of five people will contract it in their lifetime. Anyone who is sexually active can be infected with HPV and the body's immune system will usually clear it up. Generally, most people don't even know they have contracted the virus.

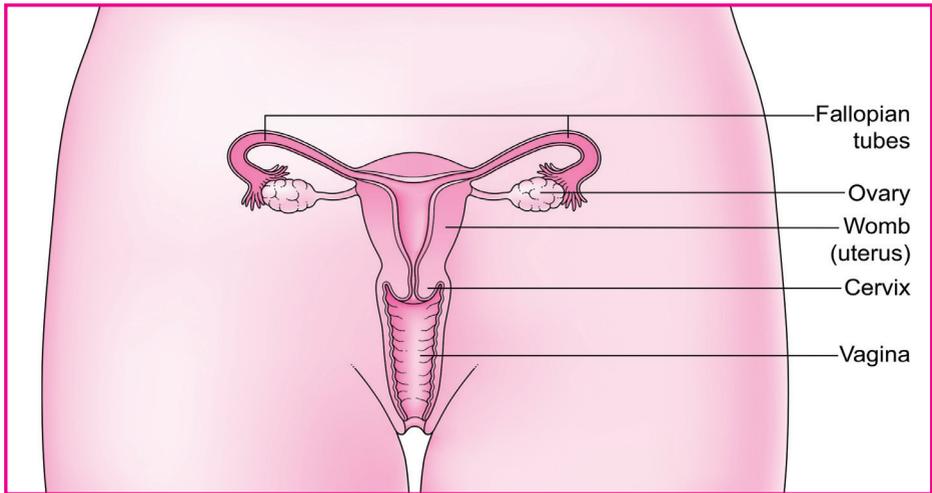


Figure 1. Diagram of the female reproductive system

The majority of women who have the virus do not develop cervical cancer. Information from the NHS National Screening Programme from 2012–2013 showed that 7–9% of women will have abnormal cells, of which only a small percentage will go on to have cancer.

The most effective method of preventing cervical cancer is through regular cervical screening (smear test), which allows detection of any early changes in the cervix, and for younger women, the HPV vaccination can help prevent 75% of cervical

cancers v. HPV can affect anyone, which is why it is so important to attend regular cervical screening.

Cervical cancer is **not** caused by promiscuity or infidelity, many women who have only had one sexual partner in their lifetime contract HPV and may go on to develop abnormal cell changes or cervical cancer. However, the more sexual partners you have and the younger you are when you have your first sexual partner, the more chances you have had of coming into contact with dangerous types of HPV, which can increase your risk of developing cervical cancer.

Similarly, as with most cancers, smoking can also increase your risk. Smoking stops your body's immune system from working properly, leaving you more open to infections and, therefore, more prone to abnormalities in the cells of the cervix vi.

Other risk factors involved with cervical cancer include:

- Weakened immune system
- Having children at a very young age
- Giving birth to many children
- If your mother was given DES (an infertility drug) when pregnant with you
- Long term use of the contraceptive pill (more than 10 years) can slightly increase the risk of developing cervical cancer, but the benefits of the pill outweigh the risks for most women vi.

For more information on the NHS Cervical Screening Programme visit our website: www.jostrust.org.uk/about-cervical-cancer/cervical-screening-smear-test-and-abnormal-cells.

Types of cervical cancer

There are two main types of cervical cancer:

- **Squamous cell:** eight out of ten (80%) cervical cancers are diagnosed as squamous cell. Squamous cell cancers are composed of the flat cells that cover the surface of the cervix and often begin where the ectocervix joins the endocervix.
- **Adenocarcinoma:** more than one in ten cervical cancers are diagnosed as adenocarcinoma (15–20%). The cancer develops in the glandular cells that line the cervical canal. This type of cancer can be more difficult to detect with cervical screening tests because it develops within the cervical canal.

Adenosquamous cancers are tumours that contain both squamous and glandular cancer cells. Other rare types of cervical cancer can include clear cell, small cell undifferentiated, lymphomas and sarcomas.

Treatment for cervical cancer

The type of treatment for cervical cancer varies according to the type of cervical cancer, the extent to which the cancer has progressed and if the cancer cells have spread to other parts of the body. Typical treatment for cervical cancer includes surgery, chemotherapy or radiotherapy.

In most hospitals a team of specialists will work together to decide which treatment is best when a woman is diagnosed with cervical cancer.

This multidisciplinary team (MDT) will include:

- A surgeon who specialises in gynaecological cancers (gynaecologist or gynae-oncologist)

- A clinical oncologist (chemotherapy and radiotherapy specialist)
- A pathologist
- A radiologist.

It may also include a number of other healthcare professionals, such as:

- A nurse specialist
- Dietician
- Physiotherapist
- Psychologist or counsellor.

For more information on cervical cancer treatments visit our website: www.jostrust.org.uk/about-cervical-cancer/cervical-cancer/treatments.

Facts about cervical cancer in the UK

- There are nearly 3,000 new cases each year and two thirds of the women diagnosed are successfully treated
- It is the most common cancer in women under the age of 35
- It is largely preventable through cervical screening and HPV vaccination.

References

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- ii. Cancer Research, 2014. HPV vaccines. <http://www.cancerresearchuk.org/about-cancer/cancers-in-general/cancer-questions/cervical-cancer-vaccine>. Accessed: 29.05.2015.
- iii. Walboomers JMM et al., 1999. Human papillomavirus is a necessary cause of invasive cancer worldwide. *Journal of Pathology* 189 (1), 12–19.
- iv. Bosch FX et al., 2002. The causal relation between human papillomavirus and cervical cancer. *Journal of Clinical Pathology* 55, 244–265.
- v. Sasieni PD et al., 1996. Estimating the efficacy of screening by auditing smear histories of women with and without cervical cancer. The National Co-ordinating Network for Cervical Screening Working Group. *British Journal of Cancer* 73 (8), 1001–1005.
- vi. Cancer Research, 2014. Cervical cancer risks and causes. <http://cancerhelp.cancerresearchuk.org/type/cervical-cancer/about/cervical-cancer-risks-and-causes>. Accessed 29.05.2015.

We also have information on:

- Cervical screening
- HPV
- HPV testing
- HPV vaccine
- LLETZ

The information included in this publication was correct at the time of going to press. We plan to review publications after two years however updates may happen more frequently. For updates or for the latest information, visit jostrust.org.uk.

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