

Cancer Screening for Women

Cancer is a health problem that can often be cured or managed when it is found early. Here are guidelines to check for some common cancers that affect women. Checking for a disease when there are no signs is called **screening**. All adults are urged to have a cancer related checkup every 3 years between the ages of 20 – 39, and every year starting at 40.

These guidelines are from the 2008 American Cancer Society recommendation. They are for people who are at regular risk. Some women have a higher risk for a certain kind of cancer. Higher risk may be due to family history, lifestyle or other factors. Each woman should talk with her doctor about her risk factors. You might need to begin screening earlier and have it more often if you have risk factors.

You can change some of your risk factors. For example, if you quit smoking you can change your risk for cancers of the lung, mouth, larynx (voice box), bladder and kidney. Other factors, like your genes, you have no control over. In some cases you may be referred to see a Genetic Counselor for an assessment.

Here are common types of cancers that affect women and some factors that may cause a person to have a higher risk. Use this as a guide to talk to your doctor about your own health and screening needs. Note, we use the term doctor, but you may be seen by another type of health care professional for your screening.

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Learn more about your health care.

Breast

Risk Factors	Screening for regular risk
<ul style="list-style-type: none"> • Being female • Age (being older) • Personal or family history of breast or ovarian cancer • Having no children, or first child after age 30 • Period (menstruation) started before age 12 or stopped after age 55 • History of abnormal breast (benign) or dense breast tissue • Being inactive and/or overweight after menopause • Drinking 1 or more alcoholic beverages a day • Estrogen therapy – long term oral contraceptives (birth control pills) or hormone therapy after menopause 	<p>Between the ages of 20-40 a woman should:</p> <ul style="list-style-type: none"> • Be familiar with how your breasts normally feel and report any changes right away. Talk to your doctor about the benefits and limitations of breast self examinations. • Have your doctor examine your breasts every 3 years, or annually with Pap smear. <p>Age 40 and over a woman should:</p> <ul style="list-style-type: none"> • Report any changes you notice in your breasts. • Have your doctor examine your the breasts every year. • Have a mammogram every year.

Cervical

Risk Factors	Screening for regular risk
<ul style="list-style-type: none"> • Human papillomavirus (HPV) infection is the most important risk factor. HPV is passed from person to person by sexual contact. Risks to get HPV are: <ul style="list-style-type: none"> – sexual contact, especially at a young age (before 17) – having a high number of sexual partners; or partners who had sex with many others 	<ul style="list-style-type: none"> • Begin having a Pap test done about 3 years after becoming sexual active (vaginal intercourse). All women should have a Pap test by age 21. There are 2 kinds of Pap tests – one is done yearly; one is done every two years. • At age 30, if you have 3 normal Pap tests in a row, you may

<ul style="list-style-type: none"> • Eating a diet low in fruits and vegetables • Mother took DES (diethylstilbestrol) while pregnant • Family history of cervical cancer • Cigarette smoking • Being overweight • Estrogen therapy – long term oral contraceptives (birth control pills) • Chlamydia infection • Multiple pregnancies 	<p>begin to be screened every 2 – 3 years. You may need a Pap test more often due to your health history (if you had abnormal Pap tests, STD's, genital warts or a weakened immune system).</p> <ul style="list-style-type: none"> • A woman over age 70 may choose to stop having cervical cancer screening after at least 3 normal Pap tests in a row and no abnormal tests in 10 years. • Screening after a total hysterectomy if cervix is removed is usually not needed except if the surgery was done due to cancer or pre-cancer. • Talk to your doctor before you stop getting Pap tests.
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Colon or Rectal

Risk Factors	Screening for regular risk
<ul style="list-style-type: none"> • Over 50 years old • Being inactive and/or overweight • Diet high in red/processed meat; Diet low in fruits and vegetables • Smoking tobacco • Heavy alcohol use • Family history of a hereditary colorectal cancer syndrome or adenomatous polyps • Type 2 diabetes • History of colon or rectal cancer, colorectal polyps, or chronic inflammatory bowel disease (such as Crohn's Disease) 	<p>Talk to your doctor about which test is best for you. Starting at age 50 you should have:</p> <ul style="list-style-type: none"> • Yearly fecal occult blood test (FOBT) or fecal immunochemical test (FIT) using the multiple sample method or • Flexible sigmoidoscopy or • Colonoscopy every 10 years or • Double contrast barium enema exam every 5 years or • CT colonography (virtual colonoscopy) every 5 years

Endometrial (Lining of the Uterus or Womb)

Risk	Screening for regular risk
<ul style="list-style-type: none"> • Being overweight • Eating foods high in animal fats • Family history of endometrial cancer • Personal history of breast or ovarian cancer • Having infertility or never had a baby • Period (menstruation) began before age 12 and stopped after age 50 • Having taken Tamoxifen or long term estrogen replacement therapy without progesterone (if you still have a uterus) • Personal or family history of a genetic colon cancer syndrome 	<ul style="list-style-type: none"> • At present there are no screening tests that are reliable to detect most endometrial cancers in a woman who has no symptoms. • Report abnormal spotting, bleeding or pelvic pain to your doctor or gynecology professional. • For women at high risk of Hereditary Non-Polyposis Colon Cancer annual screening with endometrial biopsy may be offered beginning at age 35.

Lung Cancer

Risk Factors	Prevention
<ul style="list-style-type: none"> • Tobacco smoking • Exposure to second hand smoke • Family or personal history of lung cancer • Exposure to cancer-causing agents in the workplace or the environment at significant levels Ex: asbestos, fibers, radon, some chemicals, uranium, arsenic, vinyl chloride, diesel exhaust 	<ul style="list-style-type: none"> • The best way to prevent lung cancer is to stop smoking or never start. At this time there is no good way to check for lung cancer. The American Cancer Society does not recommend routine screening. Clinical trials are searching for ways to check for lung cancer. • Smoking causes over 85% of lung cancers.

Skin

Risk	Screening for regular risk
<ul style="list-style-type: none"> • Ultraviolet light exposure - sunlight • Fair skin (light colored skin) • Family history of melanoma • Severe sunburns before age 18 • Use of Tanning Beds • Smoking • Some occupational exposures such as coal tar, pitch, creosote, arsenic or radium 	<ul style="list-style-type: none"> • Look over your skin every month. Check for abnormal or changing areas, especially moles. • Skin exam during a regular health checkup.

This advice is up-to-date now, but progress brings frequent changes.

Research at The James and elsewhere is bringing us closer to better answers. New discoveries happen often—so often that it is difficult for printed material to keep up with changes. These recommendations are current at the time of this writing.

The American Cancer Society, American Heart Association and American Diabetes Association have joined together on this advice:

To try to lower your risk for cancer, heart (cardiovascular) disease and diabetes aim at these goals:

- Get to a healthy weight and maintain it.
- Be active - exercise at least 30 minutes 5 or more days a week
- Eat at least 5 servings of vegetables and fruits every day.
- Don't smoke or use tobacco. Ask for help to quit.
- Limit your alcoholic beverages to 1 drink per day for women and 2 per day for men.

Here are places you may check to see if there is more current general information:

- JamesLine at 1-800-293-5066 or on the web at <http://www.jamesline.com>
- American Cancer Society at 1-800-ACS-2345 or on the web at <http://www.cancer.org>
- The National Comprehensive Cancer Network at <http://www.nccn.org>
- National Cancer Institute 1-800-4 CANCEER (800-422-6237) on the web at <http://cancer.gov>

Related James and OSUMC Patient Education materials:

- ABCD's of Melanoma and Skin Self-Exam
- Cancer Genetics Consultation
- Colorectal Cancer Screening
- Endometrial Biopsy
- Having a Female Pelvic Exam
- Having your Pap Smear
- Irritable Bowel Syndrome
- Laser Treatment for Gynecology
- Mammogram
- Quick Guide to Stop Smoking
- Sun Safety Tips
- Your Pap Smear Test

☒ **Talk to your doctor or other health care team if you have questions. You may request more written information from the Library for Health Information at (614) 293-3703 or email: health-info@osu.edu.**