

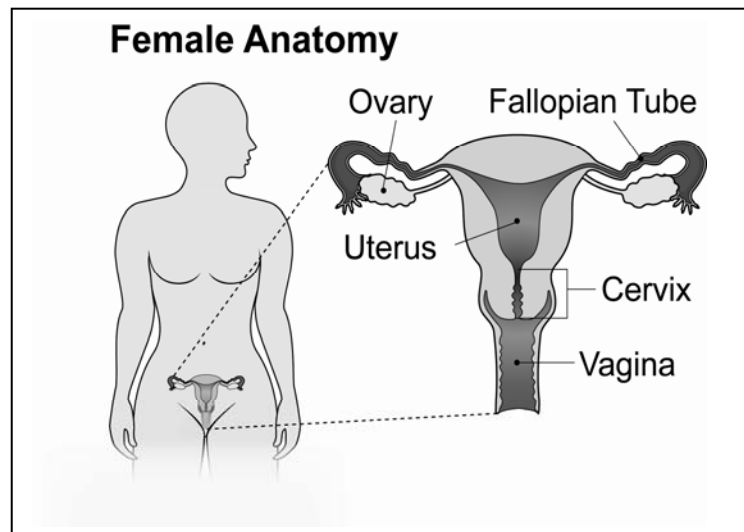
Quick Facts about Cervical Cancer



PMH

What is the cervix?

The cervix is the lower, narrow part of the uterus. The cervix connects the uterus to the vagina. The uterus is where a baby grows during pregnancy. Together, the cervix and vagina form the birth canal when the baby is born.



What is cervical cancer?

Cervical cancer is a disease in which normal cells on the cervix begin to change, grow out of control, and form a mass of cells called a tumour. At first, the changes in the cells are precancerous (abnormal cells that are not yet cancer). If the precancerous cells change into cancer cells and spread deeper into the cervix or to other tissues and organs, the disease is then called cervical cancer.

The two main types of cervical cancer are:

- squamous cell carcinoma – cancer that starts in the cells that line the outside of the cervix
- adenocarcinoma – cancer that starts in the cells that form glands in the cervix

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What does stage mean?

Stage is a way of describing a cancer. Stage can describe:

- where the cancer is located
- if or where it has spread
- if it is affecting other organs in the body

There are four stages for cervical cancer (Stage 1 to Stage 4). Your doctor will use the stage of your cancer to decide which treatment is best for you.

How is cervical cancer treated?

The treatment of cervical cancer depends on:

- the size and location of your tumour
- whether the cancer has spread
- your overall health
- your desire to have children

The most common treatments for cervical cancer are surgery, radiation therapy, and chemotherapy. Small tumours can be treated using either radiation therapy alone or surgery to remove the cervix and uterus. In some women who want to maintain their ability to have a baby, the cervix may be removed without removing the uterus. More advanced cervical cancer is often treated using both chemotherapy and radiation therapy.

Most side effects of cervical cancer treatment can often be prevented or managed with help from your health care team. When making treatment decisions, you may also consider a clinical trial. Talk with your doctor about all treatment options.

Coping with Cervical Cancer

Dealing with the news of a cancer diagnosis can be very difficult. You are not alone. Your health care team is here for you so feel comfortable speaking with them about your concerns and needs. As a patient in the Princess Margaret Cancer Program, you have access to many resources to help you cope. These include:

- social workers who can help you better cope with your illness

- clinical dietitians that specialize in cancer and can help you with your nutrition and diet concerns
- the PMH Cancer Survivorship Program which has programs and services to help you cope with cancer and its treatment, including:
 - a Survivorship Consult to answer questions you may have about your diagnosis and treatment and the resources available to you
 - Caring Voices (www.caringvoices.ca), an online support community where you can connect with other gynecologic cancer survivors through the Gynecologic Cancer Community
 - a Patient & Family Library where you can ask a Librarian to search for specific health information and borrow books, CDs and DVDs

For more information about the services available to you or to contact a social worker or dietitian, speak to a member of your health care team. To contact the PMH Cancer Survivorship program visit:

- The Cancer Survivorship Centre located on the 2nd floor of PMH
- The Patient & Family Library located in the atrium on the main floor of PMH
- ELLICSR: the Health, Wellness and Cancer Survivorship Centre located in the basement of the Clinical Services Building in the Toronto General Hospital

Questions to Ask your Doctor

Speaking to your health care team is important in helping you make decisions about your health care. Sometimes preparing a list of questions you want to ask can be helpful. Here is a list of common questions you may want to ask your doctor:

1. What type of cervical cancer do I have?
2. Can you explain my pathology report (test results) to me?
3. What stage is the cervical cancer?
4. Has the cancer spread to my lymph nodes or anywhere else?
5. Would you explain my treatment options?
6. How will this treatment benefit me?
7. What clinical trials are open to me?

8. How will this treatment affect my daily life? Will I be able to work, exercise and do my usual activities?
9. Will this treatment affect my ability to become pregnant or have children?
10. What is the expected timeline for my treatment plan?
11. What are the possible long-term side effects of my cancer treatment?
12. Where can I find emotional support for me and my family?
13. Whom do I call for questions or problems?
14. Is there anything else I should be asking?

Medical Terms to Know

Benign: A tumour that is not cancerous

Biopsy: Removal of a tissue sample that is then looked at under a microscope to check for cancer cells

Chemotherapy: The use of drugs to destroy cancer cells

Colposcopy: An examination of the cervix and vagina from outside the body with a magnifying instrument

Dysplasia: An abnormal growth of precancerous cells

Human papillomavirus (HPV): A virus spread during sexual intercourse; risk factor for cervical cancer

Hysterectomy: Removal of the uterus

Lymph node: A tiny, bean-shaped organ that fights infection

Malignant: A tumour that is cancerous

Metastasis: The spread of cancer from where the cancer began to another part of the body

Oncologist: A doctor who specializes in treating people with cancer

Prognosis: Chance of recovery

Radiation therapy: The use of high-energy x-rays to destroy cancer cells

Radical trachelectomy: Removal of the cervix

Tumour: A mass of tissue that requires a biopsy/removal

Adapted with permission from the American Society of Clinical Oncology's *ASCO Answers Fact Sheet: Cervical Cancer*.