

## **Preventing Gynecologic Cancers**

### **The Importance of Gynecologic Care**

It's important for women to receive regular gynecologic care, including continuing routine cervical cancer screenings, even after having babies or reaching menopause, and to learn their family history of cancer and share that information with their health care provider. Even if they have never visited a gynecologist, it's not too late to begin receiving care today.

### **Screening and Prevention**

Cervical cancer is the only gynecologic cancer with reliable screening tests. Women should get screened regularly with a Pap test, HPV test, or both to help prevent cervical cancer or find it early when treatment works best. Staying on top of screenings can find abnormal cells that can be removed before they become cancer. The HPV test looks for the virus (human papillomavirus) that can cause these cell changes. It is recommended to start Pap tests at age 21. Individuals 30 to 65 years old should ask their doctor what test is best for them. Those over age 65 should talk to their doctor to determine if they need to get tested.

Women should consider getting the HPV vaccine if they are in the age group for which it is recommended and talk to their doctor about the benefits of getting vaccinated. The HPV vaccine protects against the types of the human papillomavirus (HPV) that most often cause cervical, vaginal, and vulvar cancers.

### **Knowing Your Body**

There are five types of gynecologic cancers: cervical, ovarian, uterine, vaginal, and vulvar. Because these cancers have different risk factors, symptoms, and warning signs, women should pay attention to their bodies and know what is normal for them. Individuals should visit their doctor if they notice:

- Abnormal vaginal bleeding, including any bleeding after menopause, that is heavier than usual, between periods, or otherwise concerning.
- Unexplained [signs or symptoms](#) that last for two weeks or longer

### **Barriers to Screening and Gynecologic Care**

Receiving regular gynecologic care and screening can save lives, however, barriers exist, including:

- Fear, discomfort, and embarrassment around gynecologic care and screening
- Misconception that gynecologic care is no longer needed after having babies or after menopause
- Misconception that women must have a family history of gynecologic cancer to be at risk, and that it is only family history of cancer on the maternal side that affects risk
- Unfamiliarity with and confusion about the recommended age to receive the HPV vaccine

### **Disparities, Risk Factors, and Managing Your Risk**

The following individuals have an increased risk of getting diagnosed with gynecological cancers:

- Black and Hispanic women are disproportionately affected by cervical cancer.
- BRCA genetic mutations and Lynch Syndrome, another type of genetic mutation, are both associated with an increased risk of ovarian cancer, and other cancers. Women who have a family history of cancer can ask their health care providers if genetic counseling and testing is right for

them. There are actions women can take to lower their risk for ovarian cancer if they have a genetic mutation that raises their risk, including medications and preventive surgeries.

- Uterine cancer is on the rise, but it is treatable when found early. Women who are taking estrogen; over the age of 50; have obesity; and/or have a family history of uterine, ovarian, or colon cancers have an increased risk for uterine cancer. Black women are disproportionately affected by uterine cancer.
- Individuals who have tested positive for the human papillomavirus (HPV) have an increased risk for cervical, vaginal, and vulvar cancers. Staying up to date with recommended screenings can help prevent cervical cancer in those with HPV.

Individuals with any of these risk factors should speak with their health care provider.