

Cervical Cancer

■ What is cervical cancer?

Cervical cancer is a disease in which healthy cells on the surface of the cervix change, grow out of control, and form a mass of cells called a tumor. At first, the changes in a cell are abnormal, not precancerous. Research shows these cells can become precancerous and may change into cancer over time. This phase of the disease is called dysplasia. If the precancerous cells change into cancer cells and spread deeper into the cervix or to other tissues and organs, the disease is called cervical cancer. The 2 main types of cervical cancer are squamous cell carcinoma and adenocarcinoma. Cervical cancers can often be prevented by having regular Pap tests to find and treat precancers early.

■ What is the function of the cervix?

The cervix is the lower, narrow part of a woman's uterus. The uterus holds the growing fetus during pregnancy. The cervix connects the uterus to the vagina and, with the vagina, forms the birth canal.

■ What does stage mean?

The stage is a way of describing where the cancer is located, if or where it has spread, and whether it is affecting other parts of the body. There are 4 stages for cervical cancer: stages I through IV (1 through 4). Find more information at www.cancer.net/cervical.

■ How is cervical cancer treated?

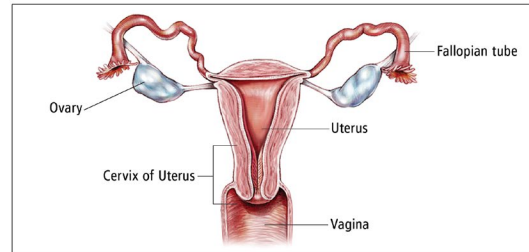
The treatment of cervical cancer depends on the tumor, whether the cancer has spread, the woman's overall health, and whether she plans to have children. Precancerous cells can be found and usually removed without harming healthy tissue. If the abnormal cells have become cancerous, the most common treatments are surgery, radiation therapy, and therapies using medication, such as chemotherapy, targeted therapy, and immunotherapy. Treatment for cervical cancer may use 1 type of treatment or a combination of these treatments, depending on several factors, including the cancer's stage and possible side effects. When making treatment decisions, women may also consider a clinical trial. Clinical trials are an option to consider for treatment and care for all stages of cancer. Talk with your doctor about all available treatment options.

Cervical cancer treatment can affect a woman's sexual health and fertility (ability to become pregnant). Talk with your health care team about preventing or managing these and other side effects. This is called palliative care or supportive care and is an important part of the overall treatment plan.

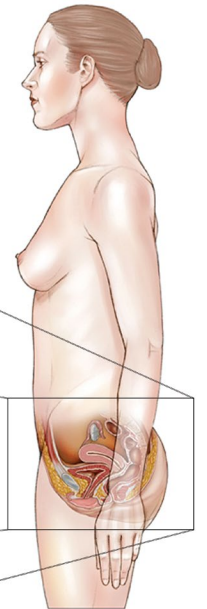
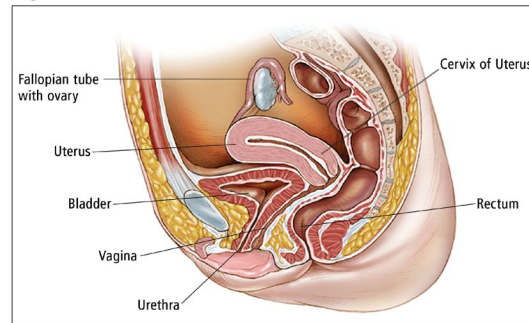
■ How can I cope with cervical cancer?

Absorbing the news of a cancer diagnosis and communicating with your health care team are key parts of the coping process. Seeking support, organizing your health information, making sure all of your questions are answered, and participating in the decision-making process are other steps. Talk with your health care team about any concerns. Understanding your emotions and those of people close to you can be helpful in managing the diagnosis, treatment, and healing process.

Frontal section



Sagittal section



Questions to ask the health care team

Regular communication is important in making informed decisions about your health care. It can be helpful to bring someone along to your appointments to take notes. Consider asking your health care team the following questions:

- ▶ What type of cervical cancer do I have?
- ▶ Can you explain my pathology report (laboratory test results) to me?
- ▶ What stage is the cervical cancer? What does this mean?
- ▶ Would you explain my treatment options?
- ▶ What clinical trials are available for me? Where are they located, and how do I find out more about them?
- ▶ What treatment plan do you recommend? Why?
- ▶ What is the goal of each treatment? Is it to eliminate the cancer, help me feel better, or both?
- ▶ Who will be part of my treatment team, and what does each member do?
- ▶ How will this treatment affect my daily life? Will I be able to work, exercise, and perform my usual activities?
- ▶ Could this treatment affect my ability to become pregnant?
- ▶ How will this treatment affect my sex life?
- ▶ What long-term side effects may be associated with my cancer treatment?
- ▶ If I'm worried about managing the costs of cancer care, who can help me?
- ▶ Where can I find emotional support for me and my family?
- ▶ If I have a question or problem, who should I call?

**Find more questions to ask the health care team at www.cancer.net/cervical.
For a digital list of questions, download Cancer.Net's free mobile app at www.cancer.net/app.**

Words to know

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

Chemoradiation: A combination of chemotherapy and radiation therapy.

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.

Gynecologic oncologist: A doctor who specializes in treating cancers of the female reproductive system.

Human papillomavirus (HPV): A virus that is the most important risk factor for cervical cancer.

Immunotherapy: A treatment designed to boost the body's natural defenses to fight cancer.

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

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

Pap test: A screening procedure that tests a sample of cervical cells for early changes that can lead to cancer.

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

Targeted therapy: Treatment that targets specific genes or proteins that contribute to cancer growth.

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AMERICAN SOCIETY OF CLINICAL ONCOLOGY

2318 Mill Road, Suite 800, Alexandria, VA 22314

Toll Free: 888-651-3038 | Phone: 571-483-1300

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