Women's Frequently Asked Questions About Cervical Cancer Screening:

Helping Health Care Providers Anticipate and Answer Common Questions

Original source:

Alliance for Cervical Cancer Prevention (ACCP)
www.alliance-cxca.org

Overview:

- Anticipating and clearly answering women's questions is important for improving their participation in testing and treatment programs.
- Women frequently have questions about:
 - Why they should be tested
 - What to expect during testing
 - What the results mean
 - What to expect during treatment

Important note about these FAQs:

- Program planners and service providers should:
 - interview women and providers to learn about women's unique questions and concerns;
 - tailor answers to programmatic realities.
- Questions and answers here are general and apply to any screening method.

What is cervical cancer?

- A major cause of death among women aged 40 to 60 in developing countries
- Occurs when cells in the cervix have abnormal, uncontrolled growth

I feel healthy—why should be screened?

- Signs and symptoms before the development of cancer are not noticeable.
- Abnormal areas that are not yet cancer can be found through examination of the cervix and treated **before** cancer develops.

I am embarrassed—do I really need this exam?

- Women between ages 30 and 60, especially those who have not been tested in the past 3 to 5 years, are at highest risk of cervical cancer and should be tested.
- Being tested is a wise decision that protects your health.

Will the examination hurt?

- Some discomfort, stinging, and/or pressure may be felt (depending on the type of exam).
- Relaxing can ease discomfort.

Will I have privacy during the examination?

- Yes! Every client has the right to privacy, and only the clinician and his/her assistant will be there.
- The entry to the room should be closed, and no one should interrupt during the exam.

Is this a test for HIV/AIDS or other STIs?

- No. The test is only for detecting precancerous changes on the cervix.
- It is possible that the clinician will notice symptoms of a vaginal or cervical infection and then recommend treatment.

What does a negative test result mean?

- This is good!
- No abnormal signs were found
- Cervix is probably normal

What does a positive test result mean?

- You may have abnormal areas on your cervix that need treatment to prevent cancer.
- Additional tests may be needed, or immediate treatment may be offered.

Will this test tell me if I have cervical cancer?

No. Test results might suggest a serious problem and further examination might be recommended to determine what is wrong.

What types of treatment would be recommended to me?

- If your test is positive, providers can give you details on the following treatment options, as applicable to the setting:
 - Cryotherapy
 - Loop electrosurgical excision procedure (LEEP)

How effective are these treatments?

- Cryotherapy and LEEP are both effective for treating abnormal areas of the cervix that have not yet become a cancer.
- Thus, they are both effective at *preventing* cervical cancer.
- Depending on the size and location of the abnormal area, these treatments are between 75% and 95% effective in preventing cancer for 5 years after treatment.

What is cryotherapy? Does it hurt?

- A safe and effective way to treat cervical abnormalities by freezing and destroying abnormal tissue.
- Cramping, like menstrual cramping, may occur during treatment and possibly for the following few days.
- Medicine used for menstrual cramps can help.
- Most women experience a watery discharge for about 2 to 4 weeks.

What is LEEP? Does it hurt?

- Another safe and effective way to treat cervical abnormalities.
- Uses a thin electric wire loop to remove the part of the cervix that contains the abnormal cells.
- Anesthesia (painkiller) is provided and the injection may be uncomfortable.
- Causes some cramping that may continue for several days.
- Bleeding can occur that may require additional treatment.

Will treatment affect my daily life?

- Cryotherapy:
 watery vaginal
 discharge lasting
 2-4 weeks
- LEEP: discharge with bleeding for up to 6 weeks

- Take medicine to prevent infection
- Do not place anything in the vagina
- Abstain from sexual intercourse for up to 4-6 weeks

It is not possible to abstain from intercourse after treatment—what should I do?

- Abstain as long as possible.
- Use a male or female condom during every act of intercourse.
 - Condoms keep the cervix clean and protect it from infection.

What if my partner does not want me to be tested or receive treatment?

- Explain why the visit is important to your health.
- Ask him to go with you to the health facility so that a health worker can explain the process and its importance.

If I receive treatment with cryotherapy or LEEP, can I still have children?

- Treatment helps ensures a healthy cervix.
- Treatment with cryotherapy or LEEP does not affect your ability to bear children.



Conclusion:

- Answering these questions for women helps them make informed decisions about whether to seek screening and treatment.
- Explaining why they benefit from being screened, what to expect, and implications of test results helps alleviate fear and misunderstanding.

For more information on cervical cancer prevention:

- The Alliance for Cervical Cancer Prevention (ACCP) www.alliance-cxca.org
- **ACCP** partner organizations:
 - EngenderHealth <u>www.engenderhealth.org</u>
 - International Agency for Research on Cancer (IARC) www.iarc.fr
 - JHPIEGO www.jhpiego.org
 - Pan American Health Organization (PAHO) www.paho.org
 - Program for Appropriate Technology in Health (PATH) www.path.org

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Overview:

- Anticipating and clearly answering women's questions is important for improving their participation in testing and treatment programs.
- Women frequently have questions about:
 - Why they should be tested
 - What to expect during testing
 - What the results mean
 - What to expect during treatment

Introduction: Informing women will help them decide to be tested.

Important note about these FAQs:

- Program planners and service providers should:
 - interview women and providers to learn about women's unique questions and concerns;
 - tailor answers to programmatic realities.
- Questions and answers here are general and apply to any screening method.

Slide overview: This presentation covers women's frequently asked questions for multiple kinds of screening methods, so adaptation to your own program is important.

•The following slides list frequently asked questions and ways to answer them.

What is cervical cancer?

- A major cause of death among women aged 40 to 60 in developing countries
- Occurs when cells in the cervix have abnormal, uncontrolled growth

Slide overview: Many women do not know what cervical cancer is or may not have heard of cervical cancer.

•Using analogies can help women understand what cervical cancer is. For instance, a cervical lesion could be described as a brown spot on an apple or a potato that will continue to grow if not removed. Once removed, the rest of the apple or potato is healthy. Be sure to pretest any analogy you decide to use to make sure it is appropriate and understandable to women in your community.

I feel healthy—why should I be screened?

- Signs and symptoms before the development of cancer are not noticeable.
- Abnormal areas that are not yet cancer can be found through examination of the cervix and treated **before** cancer develops.

Slide overview: It is important to emphasize that screening can help identify precancerous, asymptomatic lesions early and prevent cancer.

•Detection and timely treatment of precancerous lesions is currently the only way to prevent cervical cancer.

I am embarrassed—do I really need this exam?

- Women between ages 30 and 60, especially those who have not been tested in the past 3 to 5 years, are at highest risk of cervical cancer and should be tested.
- Being tested is a wise decision that protects your health.

Slide overview: When answering this question be sensitive to the woman's feelings and emphasize that being screened is a wise decision.

•The approximate 10-year period that it generally takes for precancerous lesions to develop into cancer allows a generous window of opportunity in which precancerous lesions can be detected and easily treated, thereby preventing cervical cancer.

Will the examination hurt?

- Some discomfort, stinging, and/or pressure may be felt (depending on the type of exam).
- Relaxing can ease discomfort.

Slide overview: The exam may be a little uncomfortable, but not painful.

•Note for bullet 2: Trying to relax while the speculum is inserted can help ease discomfort during this portion of the examination. When a woman is nervous, the pelvic muscles tighten and clamp around the speculum making it more difficult for the speculum to be inserted and removed from the vagina. Relaxing the pelvic muscles can, therefore, greatly reduce discomfort.

Will I have privacy during the examination?

- Yes! Every client has the right to privacy, and only the clinician and his/her assistant will be there.
- The entry to the room should be closed, and no one should interrupt during the exam.

Slide overview: Explaining that women do have privacy during the exam can help lessen a woman's anxiety.

Is this a test for HIV/AIDS or other STIs?

- No. The test is only for detecting precancerous changes on the cervix.
- It is possible that the clinician will notice symptoms of a vaginal or cervical infection and then recommend treatment.

Slide overview: Many women worry about being tested for cervical cancer because of the stigma associated with HIV and STIs. Clearly explain the purpose of the cervical cancer prevention program.

•Note for bullet 2: If you use syndromic management for STIs, explain that you might identify an STI as well.

What does a negative test result mean?

- This is good!
- No abnormal signs were found
- Cervix is probably normal

Slide overview: Explain that a negative test result is good. Encourage the woman to return for screening at appropriate intervals to ensure that lesions do not recur later.

•It is important to emphasize to women the importance of returning for test results.

What does a positive test result mean?

- You may have abnormal areas on your cervix that need treatment to prevent cancer.
- Additional tests may be needed, or immediate treatment may be offered.

Slide overview: Women with a positive result may fear they have cancer. Reassure them that it is most likely a precancerous lesion that can be easily treated to prevent cancer.

• *Note for bullet 2:* Additional testing may be needed to confirm test results.

Will this test tell me if I have cervical cancer?

No. Test results might suggest a serious problem and further examination might be recommended to determine what is wrong.

Slide overview: Be sure the woman understands that the test being performed is not a "cancer test."

- •It is important to clarify that cervical cancer screening tests detect potential cellular abnormalities that could be precancerous or cancerous.
- •It is also important to clarify that these tests screen only the cervix; they do not detect potential abnormalities in other parts of the genital track such as the uterus or ovaries. To explain this, it might be helpful to use local terms to refer to the cervix. For instance, in South Africa the cervix is referred to as the "neck of the womb."

What types of treatment would be recommended to me?

- If your test is positive, providers can give you details on the following treatment options, as applicable to the setting:
 - Cryotherapy
 - Loop electrosurgical excision procedure (LEEP)

Slide overview: Women will want to know about their treatment options. The following slides provide more detail on cryotherapy and LEEP to answer questions they might have about these procedures.

How effective are these treatments?

- Cryotherapy and LEEP are both effective for treating abnormal areas of the cervix that have not yet become a cancer.
- Thus, they are both effective at preventing cervical cancer.
- Depending on the size and location of the abnormal area, these treatments are between 75% and 95% effective in preventing cancer for 5 years after treatment.

Slide overview: It is important to provide women with information on the effectiveness of the different treatment options.

What is cryotherapy? Does it hurt?

- A safe and effective way to treat cervical abnormalities by freezing and destroying abnormal tissue.
- Cramping, like menstrual cramping, may occur during treatment and possibly for the following few days.
- Medicine used for menstrual cramps can help.
- Most women experience a watery discharge for about 2 to 4 weeks.

Slide overview: Explain the treatment in simple terms. Explain that it is safe and effective and provide honest information about any discomfort that she may experience.

- •Note for bullet 1: Cryotherapy is performed with an instrument that becomes very cold.
- *Note for bullet 2:* During treatment, cramping usually disappears after 15 to 30 minutes.
- •Note for bullet 5: Some women may find it helpful to use sanitary pads or other cloth or padding to protect their clothing.

What is LEEP? Does it hurt?

- Another safe and effective way to treat cervical abnormalities.
- Uses a thin electric wire loop to remove the part of the cervix that contains the abnormal cells.
- Anesthesia (painkiller) is provided and the injection may be uncomfortable.
- Causes some cramping that may continue for several days.
- Bleeding can occur that may require additional treatment.

Slide overview: As with cryotherapy, explain the treatment in simple terms. Explain that it is safe and effective and provide honest information about any discomfort that she may experience.

•Note for bullet 3: Medicine is provided to control pain, usually after the procedure.

Will treatment affect my daily life?

- Cryotherapy:
 watery vaginal
 discharge lasting
 2-4 weeks
- LEEP: discharge with bleeding for up to 6 weeks
- Take medicine to prevent infection
- Do not place anything in the vagina
- Abstain from sexual intercourse for up to 4-6 weeks

Slide overview: Give an accurate description of side effects so the woman can be prepared.

It is not possible to abstain from intercourse after treatment—what should I do?

- Abstain as long as possible.
- Use a male or female condom during every act of intercourse.
 - Condoms keep the cervix clean and protect it from infection.

Slide overview: Encourage the woman to be abstinent for as long as possible during the first weeks because it helps prevent infections.

What if my partner does not want me to be tested or receive treatment?

- Explain why the visit is important to your health.
- Ask him to go with you to the health facility so that a health worker can explain the process and its importance.

Slide overview: Women may have concerns about their partners not supporting screening and treatment. Resolving this may require creative strategizing with a woman to help her gain her husband's support.

If I receive treatment with cryotherapy or LEEP, can I still have children?

- Treatment helps ensures a healthy cervix.
- Treatment with cryotherapy or LEEP does not affect your ability to bear children.



Slide overview: Women may fear that treatment will affect their fertility. Explain that it will not effect a woman's ability to have children and will, in fact, ensure a healthy cervix.

Conclusion:

- Answering these questions for women helps them make informed decisions about whether to seek screening and treatment.
- Explaining why they benefit from being screened, what to expect, and implications of test results helps alleviate fear and misunderstanding.

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 - JHPIEGO www.jhpiego.org
 - Pan American Health Organization (PAHO)
 www.paho.org
 - Program for Appropriate Technology in Health (PATH) www.path.org