

CERVICAL CANCER

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1.0 Introduction:

The word cancer means different things to different people. To most people, cancer, like AIDS, is synonymous with death and the diagnosis of cancer is like signing a death warrant with all the complex social, psychological and spiritual upheaval that imminent death often engenders. In everyday life, the word cancer simply means "crab" and the name has been given because of the nature of the disease. However, cancer is a disease in which certain body cells do not function right. The cells divide very fast, produce too much tissue that forms a swelling (tumour) and can quickly spread deeper into the nearby tissues or other organs such as bladder, intestines, liver, lungs and bones. Hence, if not adequately treated or stopped early in their course, the cancer invariably leads to the death of the patient.

Cervical cancer is cancer of the cervix, the lower, narrow part of the uterus (neck of womb). The uterus (womb) is shaped like an upside-down pear; the wide part is called the body and the narrow part the cervix or neck. It is located in a woman's lower abdomen between the bladder and the rectum. The cervix forms a canal that opens into the vagina (birth canal), which leads to the outside of the body.

Possible Changes:

Inside the body of the uterus (womb), there are soft columnar cells which had a good blood supply. The surface of the cervix is lined up with tough, thin, flat cells, which do not have such good blood supply called squamous cells, otherwise, it would bleed during sexual intercourse. Around the cervical canal, there is a junction point, where the soft columnar cells stop and the tough squamous cells begin. This known as the transformation zone. At times, the soft columnar cells gradually adapt and change into squamous cells. However, it is these changing cells, which have the potential to become cancer cells. Normally, the changes occur slowly for several years, however, in few cases, it can also happen in a very short period of time.

1.1 Incidence

World wide, cervical cancer is the third commonest type of cancer affecting women, but in developing countries, it is the commonest female cancer. It is more common in blacks, Mexican and Puerto Rican females because of certain cultural practices. Cancer of the cervix is the commonest form of the female genital cancer seen at the Korle-Bu Teaching Hospital in Accra today.

1.2 Risk Factors for Cervical Cancer

Researchers have identified certain risk factors that increase the chance that cells in the cervix will become abnormal. They believe that in many cases, cervical cancer develops when two or more risk factors act together.

- Women who began having sexual intercourse before the age of 18 (early sexual debut) and women who have had many sexual partners.

- ❑ Women also are at increased risk if their partners began having sexual intercourse at a young age, have had many sexual partners or were previously married to women who had cervical cancer.
- ❑ Infection with the virus that causes genital warts or Human Papilloma Virus (HPV) is the commonest cause of cancer. However, not all women who have genital warts will develop cervical cancer.
- ❑ Smoking also increases the risk of cancer of the cervix although it is not clear exactly how or why. The risk appears to increase with the number of cigarettes a woman smokes each day and with the number of years she has smoked.
- ❑ Long-term use of the pill (oral contraceptives) more than 10 years. However, scientists have not found that the pill directly causes cancer of the cervix. Hence, it is important for women using the pill to have the Pap Test yearly.
- ❑ Women whose mothers were given the drug Diethylstilbestrol (DES) during pregnancy to prevent miscarriage. (This drug was used for this purpose from 1940-1970) Chronic use of steroids.
- ❑ Women whose immune systems are weakened. For example, women who have HIV (Human Immunodeficiency Virus) which causes AIDS.
- ❑ Women with late first pregnancy have a lower risk than those with early first pregnancy. The risk increases with women of high parity.
- ❑ Organ transplant patients, who receive drugs that suppresses the immune system to prevent rejection of the new organ.
- ❑ The use of tampon. It may be irritating to the cervix especially the local herbs or vaginal drying agent used by our women "to maintain themselves".

1.3 Stages

Cancer of the cervix is divided into stages:

- Stage 0 – Although there is cancer in place, there are no symptoms, the cervix appear normal.
- Stage 1 – Invasive cancer which means that the basement membrane has been reached and cells are invading the surrounding tissue.
- Stage II – The cancer has spread to close adjacent structures and the upper third of the vagina may be involved.
- Stage III – The cancer has reached the pelvic walls and lower vagina.
- Stage IV – At this stage, there is marked involvement of the pelvis including the bladder or bowel

1.4 Early Detection/Diagnosis

Women should have regular check-ups including pelvic examination and Pap Test, if they are or have been sexually active or if they are aged 18 or older. Cervical smear test must be done at least every three years. Patients with complaints of irregular bleeding must seek medical attention immediately. In addition to Pap Test and pelvic examination, colposcopy, biopsy, endocervical curetage, cystoscopy, colonoscopy, and CT scan are done to determine the extent of spread.

1.5 Clinical Presentation/Symptoms

In its earliest forms, cancer of cervix generally do not show any symptoms and are only detected during pelvic examination, pap test and cervical visualization (cervical screening)

- Vaginal discharge may present much later. It may be nasty, bloodstained, dark and foul-smelling.
- Abnormal vaginal bleeding during or after sexual intercourse between periods and even after menopause. The bleeding may be slight or very profuse and even may be life threatening.
- Weight loss, loss of appetite and may be accompanied with fatigue or general body weakness.
- Pain is a late manifestation of the disease. It may be a dull pelvic pain or it may be severe, spreading into the back and lower limbs.
in advanced cases, there may be bone fracture and leaking of urine or faeces into the vagina (fistula formation)

MANAGEMENT OF CANCER OF CERVIX

1.6 Prevention

- Prevention is clearly the most effective way to fight cancer. Educational programmes of the general public and of health personnel at all levels from the primary to the tertiary levels. The mass media should be involved in this campaign.
- Early detection of the disease is very important.
- Research has shown that vitamin A may play a role in stopping or preventing the abnormal changes in the cells. Vitamin A can be obtained from vegetables such as carrots, squash, spinach, sweet potatoes, milk products, egg yolk, liver and fish liver oil.
- Avoid tobacco in any form. Tobacco increases your risk for all kinds of cancer.
- If you notice any changes in your body as indicated in the symptoms of cervical cancer, see a doctor immediately.
- Have regular medical check-ups, pelvic examination and pap test. If you are sexually active or are over 18 years. In the initial stages, it could be done yearly, until you have had at least, 3 normal pap tests. After this, you should have it at least every three years.
- Indiscriminate sex should also be avoided. Practise safe sex, use a condom to protect your self from sexually transmitted viruses like HPVs. Sex education should be given to those at risk, such as the youth, prostitutes, those with multiple partners, trekking officers and long distant drivers.
- Women should avoid use of tampons, especially, local herbs or vaginal drying agents.

1.7 Treatment

Cervical cancer patients are often treated by a team of specialists. The team may include Gynaecologist, Oncologist and Radiation Oncologist. They may use one treatment method or a combination. Treatment depends on the stage of cancer, the size of the growth, the age, the affected person's desire to have children and her general health.

- **Surgery** - The use of local therapy to remove the abnormal tissues in or near the cervix. If it is not extensive, the doctor may remove the growth and leave the uterus and ovaries. In some cases if the woman is not planning to have children in future, the doctor may remove the entire uterus, including the cervix and sometimes the ovaries and fallopian tubes.
- **Radiation Therapy**, (also call Radiotherapy) uses high energy rays to damage the cancer cells and stop them from growing. It is a local therapy.
- **Chemotherapy** - is the use of drugs to kill cancer cells. It is most often used when cervical cancer has spread to other parts of the body.
- **Biological Therapy** - Is treatment using substances to improve the way the body's immune system fights disease. It may be used in the advanced stage of the diseases. Interferon is the most common form of biological therapy for this disease. It may be used in combination with chemotherapy. Most patients who receive interferon are treated as out-patients.

1.8 Conclusion

Cervical cancer is a health problem worthy of attention and all efforts must be made for early detection. "Well-Women" clinics should be set up so that women could be easily examined in order to save the lives of our sisters, aunties, mummies etc. Maternal death is a tragedy.

Thank you

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