

Prevention of Cervical Cancer

From Humana Military Healthcare Services claims data collected from May 1, 2004 through July 31, 2005, the cervical cancer screening rate was only 19.8% for Puerto Rico female Prime beneficiaries receiving care from civilian providers.

According to the CDC, Hispanic women in the United States have an increased risk of cervical cancer. The incidence for invasive cervical cancer during 1992-1999 was 16.9 per 100,000 women (95% CI=16.2--17.5) for Hispanic women and 8.9 (95% CI=8.8--9.1) for non-Hispanic women. Regardless of the stage of disease at diagnosis, incidences for Hispanic women were approximately twice those for non-Hispanic women in each year.

In Puerto Rico, a study by Ana Patricia Ortiz, MPH, PhD, and others at the University of Puerto Rico compared the cancer incidence rates between Puerto Rico and the following groups: United States population, United States Hispanics, Texas, Texas Hispanics, New York and New York Hispanics. For cervical cancer, Puerto Rico females experienced an excess risk as compared to United States females of 40%, and compared to United States Hispanics of 16%. Puerto Rico Hispanic females also showed increased risks for breast and ovarian cancer. Comparison of the percentage change showed that although cervical and ovarian cancers are decreasing in United States Hispanic females, both are *increasing* in Puerto Rico.

Reasons for this potentially high number may be attributed to:

- a decreased likelihood of having tests,
- decreased likelihood of seeking examinations for early detection, and
- being diagnosed at a later stage.

Upon receiving adequate screening, invasive cervical cancer can be virtually eliminated.

Other opportunities for improvement include communication, education, and treatment for women of lower incomes, lower educational levels, those who live in inner city areas, and those infected by the human papillomavirus (HPV, most notably types 16, 18, 31, 33, and 45).

The risk factors for cervical cancer may include:

- History of sexually transmitted diseases
- No history of prior pap smear
- Having many sexual partners

- Early sexual activity
- History of tobacco use
- Dietary factors
- Low income
- Years of oral contraceptive use
- Many pregnancies

The Centers for Disease Control recommend screening for cervical cancer every one to three years [dependent on negative laboratory results]. The following screening tips will provide further guidance for ordering pap smears, and help prevent cervical cancer:

1. Begin screening 3 years after the beginning of sexual activity, *or*,
2. Begin screening at age 21, whichever occurs first.

Annual screening is justified for women with cervical cancer history, history of HPV, history of STD, or history of risky sexual behaviors (multiple partners, unprotected sex, etc.)

To increase screening cycles, women should have 2-3 normal pap smears. American Cancer Society (ACS) information suggests waiting for females to reach age 30, and to increase screening cycles if they have received 2-3 normal pap smears.

For females post-hysterectomy, the American Cancer Society (ACS) and the American College of Obstetricians and Gynecologists (ACOG) recommend continued screening in women, with histories of “invasive cervical cancer” or “DES exposure”. However, discontinuing pap smears in women post-hysterectomy is appropriate if there is no evidence of cervical cancers or neoplasms.

For uninsured females, another resource for assisting women in Puerto Rico is “The National Breast and Cervical Cancer Early Detection Program: Saving Lives Through Screening” (NBCCEDP). This program targets women who have the characteristics of being:

- “Low income”,
- “Uninsured”, and
- “Underserved”

This program was authorized by Congress in 1990, through the Breast and Cervical Cancer Mortality Prevention Act. In 2004, this program was funded with over \$200 million dollars to provide screening and diagnostic studies. The program also provides for breast examinations and mammograms.

To date, the program has:

- provided screening for 1.9 million females

- authorized 4.6 million examinations
- actively diagnosed 61,474 precancerous cervical lesions and approximately 1100 cervical cancers

If one of your patients is a candidate for this service, please contact the Centers for Disease Control at 770-488-4751; ask for "The National Breast and Cervical Cancer Early Detection Program: Saving Lives Through Screening" program for Puerto Rico.

Please remind your female patients of the need for pap test screening at appropriate intervals. Thanks very much for your assistance!

Sources:

<http://www.ahcpr.gov/clinic/3rduspstf/cervcan/cervcanrr.htm>, accessed from the world wide web, January 2006.

Presentation "Trends in the incidence of breast, cervical and ovarian cancer in Puerto Ricans and US Hispanics: A comparative study", American Public Health Association, 133rd Annual Meeting & Exposition, December 10-14, 2005, Philadelphia, PA. Authors: Ana Patricia Ortiz, MPH, PhD, Department of Biostatistics and Epidemiology, University of Puerto Rico; Erick Suárez, MS, PhD, Department of Biostatistics and Epidemiology, University of Puerto Rico; and Graciela Noguera, MPH, Puerto Rico Cancer Center, University of Puerto Rico.

Telephonic communication with Centers for Disease Control and Prevention, Customer Service Representative, October 2005, 770-488-4751.

<http://www.cdc.gov>, accessed from the world wide web, September 2005.

<http://www.cancer.org/docroot/home/index.asp>, accessed from the world wide web, September 2005.

Fact Sheet from the CDC, entitled "The National Breast and Cervical Cancer Early Detection Program: Saving Lives Through Screening", September 2005. (In addition, note that this program has resources for breast cancer detection.)