The James

THE OHIO STATE UNIVERSITY WEXNER MEDICAL CENTER

Cancer Screening for Women

Cancer is a disease that can often be cured or managed when it is found early. Cancer screenings are done to check for a disease before you have any symptoms. These guidelines are from the American Cancer Society and include specific ages when screening should be done for those at normal risk. Some women have a higher risks for different cancers due to family history, lifestyle or other factors. You should talk with your health care provider about your risk factors.

If you identify as non-binary or a transgender person, talk with your health care provider about your screening needs based on your transition path. For example, transwomen taking hormones may have an increased risk of breast/chest cancer. For more information, ask for the patient education handout <u>Breast/Chest Cancer Screening</u> in <u>Transgender Men</u>. To make an appointment at The Ohio State Transgender Clinic, you may call, 614-293-5123. You may also find it helpful to visit <u>http://equitashealthinstitute.com/yesmamm/</u> for LBGTQ-friendly primary care providers.

You can change some of your risk factors. For example, if you quit smoking you can change your risk for cancers of the lung, mouth, larynx (voice box), bladder and kidney. You cannot change other factors, like your genes. In some cases you may be referred to one of our high-risk clinics or to see a Genetic Counselor for an evaluation.

Here are common types of cancers that affect women/breast owners and some reasons that may cause a person to have a higher risk. Use this as a guide to talk to your health care provider doctor about your own health and screening needs.

This handout is for informational purposes only. Talk with your doctor or health care team if you have any questions about your care.

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Breast

Risk Factors	Screening for Normal Risk
Being female	Between the ages of 20 to 44 a
Age (being older)	woman/breast owner should:
 Family or personal history of breast or ovarian cancer 	 Be checked for their risk of breast cancer and learn when they should start having screenings for
 Having no children, or first child after age 30 	 Be familiar with how their breasts
 Period (menstruation) started before age 12 or stopped after age 55 	normally feel and report any changes right away.
 History of certain benign (non-cancer) breast conditions or dense breast tissue 	 Talk to your health care provider about how to do a monthly breast self-exam.
 Being inactive and/or overweight after menopause 	 Have a breast exam by their health care provider at least every 3 years in their 20's and 30's.
• Radiation treatments to the chest area as a child or young adult	Starting at age 45 a woman/breast owner should:
 Drinking 1 or more alcoholic beverages a day 	• Report any changes they notice in their breasts.
Being overweight or obeseEstrogen therapy – long term	• Have their health care provider examine their breasts every year.
use of oral contraceptives (birth	 Have a mammogram every year.
control pills) or hormone therapy after menopause	 Some women/breast owners, due to their family history or other factors should be screened with a MRI along with a mammogram. Talk with your health care provider about your history and if you should have other tests or start screening at an earlier age.
	At age 55 and older, women/breast owners should change to having mammograms every 2 years or can continue yearly screenings.

Cervical

Risk Factors	Screening for Normal Risk
 A human papillomavirus (HPV) infection is the main risk factor for cervical cancer. HPV is a group of more than 150 related viruses that can be passed directly to others by skin-to-skin contact, most often with the mouth or genital areas. Certain HPV types are strongly linked to cancers. You are at risk if you have: sexual contact, especially at a young age (before 18) a high number of sexual partners having one partner who is known to be high-risk a weakened immune system A diet low in fruits and vegetables Mother took DES (diethylstilbestrol) while pregnant Family history of cervical cancer Smoking Long term use of oral contraceptives (birth control pills) Chlamydia infection Multiple pregnancies 	 If you are age 21 or older and have a cervix, talk with your health care provider about the cervical screening test(s) you should have done. Your health care provider may recommend that you have a pap smear, HPV testing, or both done every 3 to 5 years. If you are over age 65 and had regular screenings in the past 10 years with normal results and no history of cancer in the past 25 years, you do not need to be tested for cervical cancer. If you have had your cervix removed for reasons not due to cancer and have no history of cervical cancer or serious pre-cancer, you do not need to be tested. If you had the HPV vaccine you should follow the screening guidelines for your age group.

Colon or Rectal

Risk Factors	Screening for Normal Risk
 Over 45 years old Being male African Americans, American Indians and Alaska Natives have a higher rate of colon and rectal cancer compared to other racial groups Being inactive and/or overweight Diet high in red/processed meat Diet low in fruits and vegetables Smoking Heavy alcohol use Family history of colorectal cancer syndrome or adenomatus polyps Type 2 diabetes Family history of colon or rectal cancer, colorectal polyps, or chronic inflammatory bowel disease (Crohn's Disease or Ulcerative Colitis) History of radiation to the abdomen (belly) or pelvic area to treat prior cancer 	 Starting at age 45, one of the following tests may be ordered by your doctor. Talk to your doctor about which test is best for you. Tests that find polyps and cancer are: Colonoscopy every 10 years Flexible sigmoidoscopy every 5 years* CT colonography (virtual colonoscopy) every 5 years* Flexible sigmoidoscopy every 10 years combined with a yearly high-sensitivity FIT test* Stool tests that can be done at home and mainly find cancer are: High-sensitivity fecal immunochemical test (FIT) every year* High-sensitivity guaiac-based fecal occult blood test (gFOBT) every year* Multi-targeted stool DNA test (mt-sDNA) every 3 years*

Lung

Risk Factors	Prevention
 Smoking Exposure to second hand smoke Family or personal history of lung cancer Exposure to cancer-causing agents in the workplace or the environment (asbestos, fibers, radon, some chemicals, uranium, arsenic, vinyl chloride, diesel exhaust) 	Currently there are no tests to check for lung cancer in people who are at average risk. There are screening guidelines for those who are at high risk of lung cancer due to cigarette smoking.
	 Talk with your doctor about whether you should start screening.

Endometrial (Lining of the Uterus or Womb)

Risk Factors	Screening for Normal Risk
 Being overweight Eating foods high in animal fats Family history of endometrial or colorectal cancer Personal history of breast or ovarian cancer Having infertility or never had a baby Period (menstruation) began before age 12 and stopped after age 50 Having taken Tamoxifen or long term estrogen replacement therapy without progesterone (if you still have a uterus) Personal or family history of a genetic colon cancer syndrome 	 At present there are no screening tests that are reliable to detect most endometrial cancers in a woman who has no symptoms. At the time of menopause, all women should be told about the risks and symptoms of endometrial cancer. Report any unexpected bleeding, spotting or pelvic pain to your doctor. Having regular pelvic exams can find some cancers, including some advanced uterine cancers.

Skin

Risk Factors	Screening for Normal Risk
 Exposure to ultraviolet light (UV rays) (sunlight) Sun sensitivity (skin may burn easily if you have naturally blonde or red hair) Personal or family history of melanoma Many moles (more than 50) that are large and irregularly shaped (bigger than a pencil eraser) Too much exposure to sunlight and bad sunburns before age 18 Use of tanning beds Weakened immune system Older age 	 Tell your health care provider about any personal or family history of skin cancer. Talk with your health care provider about your need for periodic professional skin exams. Do a monthly skin self-exam. You may need to have a family member/partner help you look for changes with your skin, freckles or moles on your head and back. Report any new moles, lesions or changes in moles or lesions to your health care provider. Have a skin exam during your regular health check-up.

The American Cancer Society, American Heart Association and American Diabetes Association have joined together on this advice. To lower your risk for cancer, heart (cardiovascular) disease and diabetes aim at these goals:

- Get to a healthy weight and maintain it.
- Be active exercise at least 30 minutes 5 or more days a week.
- Eat at least 5 servings of vegetables and fruits every day.
- Do not smoke, vape or use tobacco. Ask for help to quit.
- Limit the amount of alcohol you drink.
- Limit your time in the sun and stay in the shade as much as possible.
- Wear sun protective clothing.
- Use 30 SPF sunscreen every 2 hours to all areas of your skin not covered by clothing.
- Do not use tanning beds.

Additional resources for more information:

- JamesLine at 1-800-293-5066 or on the web at cancer.osu.edu
- American Cancer Society at 1-800-ACS-2345 or on the web at
 <u>www.cancer.org</u>
- The National Comprehensive Cancer Network at <u>www.nccn.org</u>
- National Cancer Institute 1-800-4 CANCER (800-422-6237) on the web at <u>cancer.gov</u>
- National LBGT Cancer Network at <u>www.cancer-network.org</u>

Other helpful Patient Education handouts:

The ABCDE's of Melanoma and Skin Self-Exam

Cancer Genetics Consultation

Colorectal Cancer Screening

Endometrial Biopsy

Laser Treatment for Gynecology

Questions and Answers About Having a Mammogram

Sun Safety for Cancer Survivors