





Dr. Christopher McCann, a gynecologic oncologist with Bon Secours Gynecologic Oncology Specialists in Newport News.

In addition, many of the risk factors for cervical cancer are related to sexual activity, including having many sexual partners, sex at an early age or other sexually transmitted infections.

As a result of this stigma, some women may be reluctant to talk to their doctor about their gynecological problems because that may also mean sharing their sexual history.

SURPRISING FACTS OF CERVICAL CANCER

Nall, a wife and mother of twin boys, admits that she may be in the minority when it comes to the stigma of cervical cancer. When she was diagnosed at age 34, she told anyone and everyone about her condition.

"I never felt like there should be a stigma or that I should feel ashamed about it, so I count myself as very lucky when it comes to that," she says. "But I also attribute that to being very educated on the subject."

She is also committed to empowering other women with that kind of knowledge. She is an advocate with Cervivor (cervivor. org), an online community that educates women about cervical cancer, HPV and the vaccines used to prevent HPV infections.

When she talks to women in groups or one-on-one, she tries to undo some of the misinformation surrounding cervical cancer, much of which is spread by social media.

"I think a lot of people are surprised when they get the facts," says Nall.

One of these facts is that HPV is so common that almost everyone who is sexually active will pick it up at some point in their lives, even those who have only one sexual partner.

"People have a misunderstanding that, even though HPV is considered a sexually-transmitted infection, it's very prevalent," says McCann. "And it doesn't necessarily mean that you have these other risk factors associated with it."

PREVENTING CERVICAL CANCER

Nall also spreads the word about HPV vaccines, which are safe and effective and can protect women from diseases caused by HPV. These are typically given to girls ages 11 or 12 years.

However, even women who have been vaccinated should still have screenings for cervical cancer— a Pap smear and sometimes a newer genetic test for HPV—because the vaccine may not work against all types of HPV.

"The reason we do screening is to try to pick up precancerous lesions that can be treated more conservatively," says McCann, "rather than having a cervical cancer that may require more radical surgery or even chemotherapy and radiation."

Gynecologists now recommend that most women ages 21 to 65 have a Pap smear every three to five years rather than every year.

Screening works, but may not catch aggressive, fast-growing cancers, like the type that Nall was diagnosed with. This is why annual gynecology exams are still important.

"There are cases where women are screened and still develop a cervical cancer," says McCann.
"But if they are seeing their gynecologist and having exams, then we might still be able to pick even those up."

In addition to regular screenings and annual visits, Nall says that women should be more proactive about their health, something that helped in her case.

After being misdiagnosed, she still felt that something wasn't right. So she returned for her annual gynecology visit a little bit early. This is when her doctor caught the cervical cancer—in time for the cancer treatments to work.

"I think being your own advocate and educating yourself and asking those questions of your doctor can really save your life," says Nall.









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