

Chapter 1 : Cervical Cancer Treatment, Surgery, Diagnosis & Clinical Trials | City of Hope in Los Angeles,

Coping with cervical cancer. Find out what you can do, who can help and about how to cope with a diagnosis of cervical cancer. Your feelings. You might have a number of different feelings when you're told you have cancer.

Listen A diagnosis of cervical cancer can leave you and your loved ones feeling uncertain, anxious and overwhelmed. There are important treatment decisions to make, emotional concerns to manage, and insurance and financial paperwork to organize, among other practical concerns. It is helpful to keep in mind that there are many sources of information and support for people coping with cervical cancer. By learning about this diagnosis and its treatment options, communicating with your health care team, and surrounding yourself with a support network, you will be better able to manage your cervical cancer and experience a better quality of life.

Understanding Your Diagnosis and Treatment Plan Cervical cancer occurs when the cells found in the cervix begin to change and grow uncontrollably, forming a tumor also called a nodule , which can be either cancerous or benign. There are a wide range of treatments for cervical cancer, including surgery, chemotherapy, radiation therapy and targeted therapy. If treatment is necessary, ask your health care team to recommend reliable publications and websites to learn more. Knowing what to expect can help you feel more in control.

The Importance of Communicating with Your Health Care Team Because cervical cancer is a complex condition with complex treatment options, good communication between you and your health care team is key. Your oncologist, nurses, and other members of your health care team work together to treat your cervical cancer. Since medical appointments are the main time you will interact with your team, being as prepared as possible for these visits is important. It will help ensure that you understand your diagnosis and treatment, get answers to your questions, and feel more satisfied with your overall care.

Finding Resources While cervical cancer can present many challenges, keep in mind that you do not need to cope with this diagnosis on your own. Your friends and family are important sources of strength and support. There are also many local and national support services available to assist you. There are many organizations that provide help with medical billing, insurance coverage, and reimbursement issues. There is also financial assistance available to help people who cannot afford the cost of their medications. Good places to start your research are the websites of the Cancer Financial Assistance Coalition www.cancerfinancialassistance.org. Check your local phone directory for listings. To learn more, visit www.gettingemotional.org.

Getting Emotional Support Adjusting to and finding ways to cope with a cervical cancer diagnosis is an important part of healing, along with treatment. There are many organizations, such as CancerCare, that provide support services to help people affected by cancer. Individual counseling is available to help you learn ways to cope with the emotions and challenges raised by your diagnosis. Support groups can connect you with other patients in a safe, supportive environment.

Chapter 2 : Coping with advanced cancer | Cervical Cancer | Cancer Research UK

Cervical cancer occurs when the cells found in the cervix begin to change and grow uncontrollably, forming a tumor (also called a nodule), which can be either cancerous or benign. There are a wide range of treatments for cervical cancer, including surgery, chemotherapy, radiation therapy and targeted therapy.

Click to share on BBM Opens in new window After successfully treating your cervical cancer, maybe you can have to face with fear of its recurrence. It is important that you should use some ways to cope with it. What is a recurrence? A recurrence occurs when your cervical cancer relapse in the original location or somewhere else in the body, which is also called metastasis. You can also have a new, unrelated cancer diagnosed in another part of the body. The tests still remain limited in detecting all the cells. So some cells may be left behind and they resurface later as a recurrence or metastasis. It is normal that your fear comes after treatment. But too much worrying can affect your quality of life and hinder your ability to accomplish long-term goals and plans. It is proved that the proportion of survivors with cancer recurrence is only percent, including cervical cancer recurrence. So why you have to immerse yourself in fears without doing anything to deal with them? Here are tips for you. How to cope with it Identify your triggers There is something triggering anxiety and then fear without your consciousness. They may be the anniversary of your diagnosis or a follow-up appointment. To cope with your fear, you have to identify these triggers. Besides, you can plan activities that help you distract from thinking about cancer. You can write out what can help you reduce your anxiety level and think positive about yourself. Give stress a time limit You can have fears of cervical cancer recurrence, but just allow them to be available in your mind within a minute, an hour or one day. Trying to not think about them can drive you crazy. Instead, you can set a dude for yourself that you may feel whatever in a time limit. When time is up, your work will remind that you need to move on. Talk about it Sharing with your loved ones is always an effective way to cope with your fear, including fear of your cancer recurrence. They are willing to give you the biggest support if you tell them that you need help. Talking about it not only helps yourself release negative thoughts but also gives your family and friends a chance to know about your concern. Let them know that you welcome their continued emotional support and encouragement to help you deal with your fear. So, planning for a healthy diet and doing physical activating is necessary. A healthy lifestyle will enhance overall your health and well-being. Focus on things you can control like nutrition and exercise. They can help you to keep cancer far from you. So, a follow-up care for prevention and early detections is necessary. Never ignore the role of consistent appointments with your oncologist for screening and evaluation after your treatment. This helps a lot in being aware of warning signs and erase them. Instead of fearing what you can control, you should keep yourself healthy and be positive as much as possible. Hello Health Group does not provide medical advice, diagnosis or treatment.

Chapter 3 : Coping - Cervical cancer - Macmillan Cancer Support

Doctors call this part of cancer treatment "palliative care." It is an important part of your treatment plan, regardless of your age or the stage of disease. Coping with physical side effects. Common physical side effects from each treatment option for cervical cancer are described in the Treatment Options section.

Pap test In a Pap test, your doctor uses a vaginal speculum to hold your vaginal walls apart. Next, a sample of cells from your cervix is collected using a small cone-shaped brush and a tiny wooden spatula 1 and 2. Your doctor then rinses the brush and spatula in a liquid-filled vial 3 and sends the vial to a laboratory for testing. Screening Cervical cancer that is detected early is more likely to be treated successfully. Most guidelines suggest that women begin screening for cervical cancer and precancerous changes at age 21. During a Pap test, your doctor scrapes and brushes cells from your cervix, which are then examined in a lab for abnormalities. A Pap test can detect abnormal cells in the cervix, including cancer cells and cells that show changes that increase the risk of cervical cancer. This test may be an option for women age 30 and older, or for younger women with an abnormal Pap test. **Diagnosis** **Cone biopsy** During a cone biopsy, a doctor surgically removes a cone-shaped piece of tissue from the cervix. Typically, the cone-shaped piece includes tissue from both the upper and lower part of the cervix. If cervical cancer is suspected, your doctor is likely to start with a thorough examination of your cervix. A special magnifying instrument called a colposcope is used to check for abnormal cells. During the colposcopic examination, your doctor is likely to take a sample of cervical cells for laboratory testing. To obtain tissue, your doctor may use: **Punch biopsy**, which involves using a sharp tool to pinch off small samples of cervical tissue. **Endocervical curettage**, which uses a small, spoon-shaped instrument called a curet or a thin brush to scrape a tissue sample from the cervix. If the punch biopsy or endocervical curettage is worrisome, your doctor may perform one of the following tests: **Electrical wire loop**, which uses a thin, low-voltage electrical wire to obtain a small tissue sample. Generally this is done under local anesthesia in the office. **Cone biopsy**, which is a procedure that allows your doctor to obtain deeper layers of cervical cells for laboratory testing. A cone biopsy may be done in a hospital under general anesthesia. Tests such as X-rays, CT scans, magnetic resonance imaging (MRI) and positron emission tomography (PET) help your doctor determine whether your cancer has spread beyond your cervix. **Visual examination of your bladder and rectum.** Your doctor may use special scopes to see inside your bladder and rectum. **Stages of cervical cancer include:** Cancer is confined to the cervix. Cancer is present in the cervix and upper portion of the vagina. Cancer has moved to the lower portion of the vagina or internally to the pelvic side wall. Cancer has spread to nearby organs, such as the bladder or rectum, or it has spread to other areas of the body, such as the lungs, liver or bones. **Treatment** Treatment for cervical cancer depends on several factors, such as the stage of the cancer, other health problems you may have and your preferences. Surgery, radiation, chemotherapy or a combination of the three may be used. **Surgery** Early-stage cervical cancer is typically treated with surgery to remove the uterus (hysterectomy). A hysterectomy can cure early-stage cervical cancer and prevent recurrence. But removing the uterus makes it impossible to become pregnant. Your doctor may recommend: **The cervix and uterus are removed along with the cancer.** **Simple hysterectomy** is usually an option only in very early-stage cervical cancer. The cervix, uterus, part of the vagina and lymph nodes in the area are removed with the cancer. **Minimally invasive surgery** may be an option for early-stage cervical cancer. Surgery that preserves the possibility of becoming pregnant also may be an option, if you have very early-stage cervical cancer without lymph node involvement. **Radiation** Radiation therapy uses high-powered energy beams, such as X-rays or protons, to kill cancer cells. Radiation therapy may be used alone or with chemotherapy before surgery to shrink a tumor or after surgery to kill any remaining cancer cells. Radiation therapy can be given: **Externally**, by directing a radiation beam at the affected area of the body **external beam radiation therapy** **Internally**, by placing a device filled with radioactive material inside your vagina, usually for only a few minutes **brachytherapy** Both externally and internally **Premenopausal women** may stop menstruating and begin menopause as a result of radiation therapy. If you might want to get pregnant after radiation treatment, ask your doctor about ways to preserve your eggs before

treatment starts. Chemotherapy Chemotherapy uses medications, usually injected into a vein, to kill cancer cells. Low doses of chemotherapy are often combined with radiation therapy, since chemotherapy may enhance the effects of the radiation. Higher doses of chemotherapy are used to control advanced cervical cancer that may not be curable. Follow-up care After you complete treatment, your doctor will recommend regular checkups. Ask your doctor how often you should have follow-up exams. Supportive palliative care Palliative care is specialized medical care that focuses on providing relief from pain and other symptoms of a serious illness. Palliative care specialists work with you, your family and your other doctors to provide an extra layer of support that complements your ongoing care. When palliative care is used along with all of the other appropriate treatments, people with cancer may feel better and live longer. Palliative care is provided by a team of doctors, nurses and other specially trained professionals. Palliative care teams aim to improve the quality of life for people with cancer and their families. This form of care is offered alongside curative or other treatments you may be receiving. Request an Appointment at Mayo Clinic Clinical trials Explore Mayo Clinic studies testing new treatments, interventions and tests as a means to prevent, detect, treat or manage this disease. Coping and support No one can be prepared for a cancer diagnosis. Everyone deals with a cervical cancer diagnosis in his or her own way. Until then, you can start to take control by attempting to: Learn enough about cervical cancer to make decisions about your care. Write down your questions and ask them at the next appointment with your doctor. Get a friend or family member to come to appointments with you to take notes. Ask your health care team for further sources of information. Find someone to talk with. You may feel comfortable discussing your feelings with a friend or family member, or you might prefer meeting with a formal support group. Support groups for the families of cancer survivors also are available. Cancer treatments can be exhausting. Let friends and family know what types of help would be most useful for you. Having goals helps you feel in control and can give you a sense of purpose. But choose goals that you can reach. Take time for yourself. Eating well, relaxing and getting enough rest can help combat the stress and fatigue of cancer. Preparing for your appointment Make an appointment with your doctor if you have any signs or symptoms that worry you. What you can do Be aware of any pre-appointment restrictions, such as not eating solid food on the day before your appointment. Write down your symptoms, including any that may seem unrelated to the reason why you scheduled the appointment. Write down your key medical information, including other conditions. Write down key personal information, including anything that increases your risk of STIs, such as early sexual activity, multiple partners or unprotected sex. Make a list of all your medications, vitamins or supplements. Ask a relative or friend to accompany you, to help you remember what the doctor says. Write down questions to ask your doctor. What kinds of tests do I need? What treatments are available, and what side effects can I expect? What is the prognosis? How often will I need follow-up visits after I finish treatment? What to expect from your doctor Your doctor is likely to ask you a number of questions. Being ready to answer them may make time to go over points you want to spend more time on. You may be asked: What symptoms are you experiencing? How severe are they? When did you first begin experiencing symptoms? Have they changed over time? Have you had regular Pap tests since you became sexually active? Have you ever had abnormal Pap test results in the past? Have you ever been treated for a cervical condition? Have you ever been diagnosed with an STI? Have you ever taken medications that suppress your immune system? Do you or have you ever smoked? Do you want to have children in the future?

Early-stage cervical cancer is typically treated with surgery to remove the uterus (hysterectomy). A hysterectomy can cure early-stage cervical cancer and prevent recurrence. But removing the uterus makes it impossible to become pregnant. Your doctor may recommend: Simple hysterectomy. The cervix and uterus are removed along with the cancer.

Cervical cancer is a type of cancer that develops in the cervix of the uterus of a woman, caused by the human papilloma virus. The second most common type of cancer in women worldwide is the cervical cancer. Caused by Human Papillomavirus infection, a sexually transmitted infection, it mostly occurs in women in their productive period of life, on an average of 38 years. The rise of cervical cancer occurs in 30 to 34 years and is in the peak of its forms in the age of 55 to 65 years. However, with the medical advancements, proper treatment and preventive measures, cervical cancer can not only be cured but it can also be prevented. Before, we know more about the survival rate of cervical cancer and its treatment and cure, let us read about the symptoms, causes, risk factors and stages of cervical cancer. Signs and Symptoms of Cervical Cancer: Cervical cancer usually does not come along with prominent signs and symptoms. Hence, it is very important to undergo the cancer screening tests or Pap Smear tests to check if cervical cancer has developed or not. This test is usually offered to women within the age group of 25 years to 64 years. In this test, a small brush wipes some of the cells from the cervix the entrance from the vagina to the womb. If any abnormality in these cells is found, it is a sign of a pre-cancer stage. From this stage, cervical cancer can be prevented. However, if the cervical cancer has already occurred, the treatments must be started at once. With abnormality, a few signs and symptoms of cervical cancer are seen and they are – Abnormal vaginal bleeding, especially after sex or between periods Pain during sex Pain in the pelvic region Vaginal bleeding continued even after menopause Blood stains in vaginal discharge. These symptoms can, however, be related to some other diseases and not necessarily be of cervical cancer. Yet, no matter what it is associated with, as you find these symptoms, you must not delay in having the cause diagnosed and start the treatment as early as possible. Causes and Risk Factors of Cervical Cancer: There are more than types of the HPV and they are the main cause of the two types of cervical cancer – the adenocarcinoma and the squamous cell cancer. Amongst these types of HPV, two types i. This virus comes into contact through sexual intercourse. Cervical Cancer Caused Due to Smoking – Research has proven that smoking can be a significant risk factor for women to develop cervical cancer. This is because a cancer causing chemical benzyrene is emitted from the cigarettes and is found in the lining of the cervix. They damage or limit the function of the Langerhans cells that fight against different diseases. Hence, for smokers, the HPV infection is usually neither prevented nor cured and as a result leads to cancer. Circumcision a Factor in the Cause of Cervical Cancer - According to some research, women who have sex partners who are circumcised are less likely to develop cervical cancer. Those, with partners without circumcision, will be at high risk of acquiring the HPV. Multiple Sex Partners as a Cause for Cervical Cancer- Having multiple sex partners would increase the risk of developing this disease, since the more partners you have sex with, the higher you are at risk of developing cervical cancer. However, it does not mean that those, who have developed cervical cancer, are promiscuous. Those, who have a single sex partner, but the partner have had multiple sex partners, are also at high risk of this disease. Genes - Those, who have first degree women relatives like sister, mother or daughter with cervical cancer, are at high risk of developing cervical cancer. Use of Contraceptive Pills as a Cause of Cervical Cancer- Prolonged use of the contraceptive pills and giving birth to too many children are also considered to be high risk factors for developing cervical cancer. Immune system - Women with a weak immune system, who have been suffering from HIV, taking steroids for long time or have gone through an organ transplant, are more likely to develop this disease. Even if your mother has been taking DES pills, when you were in the womb, you will grow a weak immune system and as a result, may develop cervical cancer. Stages of Cervical Cancer and Its Cure: Diagnosing the stage of cervical cancer is important, since it determines where to start the treatment from. There are four different stages of developing cervical cancer and they are – Stage 1 of Cervical Cancer and its Cure: When the cancer is just

in the neck of the womb, it is the stage 1 of cervical cancer. Usually surgery, radiotherapy and also chemotherapy are offered as treatment for stage 1 cervical cancer. Stage 2 of Cervical Cancer and its Cure: When the cancer spreads out of the neck of the womb and reaches the surrounding tissue, it is called the stage 2 cervical cancer. Here also, a combination of surgery, radiotherapy and chemotherapy is offered as treatment. Stage 3 of Cervical Cancer and its Cure: When the cancer spreads throughout the cervix as well as the entire pelvic structure and goes down to the ligaments that line the pelvis and the lower part of the vagina and the muscles, it is known as the stage 3 cervical cancer. Surgery cannot help at this stage of cervical cancer and only radiotherapy and chemotherapy are offered. Stage 4 of Cervical Cancer and its Cure: When the cancer spreads out to the other body parts other than the cervix and womb, like the bladder or rectum, as well as to the lungs, it is the stage 4 or the advanced stage of cervical cancer. In this stage, surgery is done to eliminate those parts, that can stop the cancer from spreading further and also chemotherapy and radiotherapy are done. The fourth most common cause of cancer and deaths in women worldwide is cervical cancer. Approximately , new cases of cervical cancer are registered annually worldwide, with a registered , deaths. During each stage of treatment of cervical cancer, there are different survival rates. It is imperative that the stage of cervical cancer is properly diagnosed and the treatment is started instantly without delay for its proper cure. Treatment of Cervical Cancer: Surgery to Treat Cervical Cancer- In case of stage 1 and stage 2 cervical cancers, surgery is an option to cure the disease. Removing the cervix and uterus, the fallopian tubes, part of the vagina or the ovaries, as well as the lymph nodes surrounding the area where the tumour has developed, can lead to a possibility that the cervical cancer would not spread. Radiation Therapy Treatment for Cervical Cancer” To cure the cancerous cells, rather to destroy them, high frequency radioactive rays are sent to the pelvic region either from outside, or from inside. In a session of a few minutes, radioactive rays are sent to the cancer region from outside the body. In case of sending radioactive rays from inside the body, a cylinder filled with radioactive substances is inserted into the vagina and the rays are sent for a few minutes. This mode of treatment has a significant amount of side effects. Chemotherapy to Treat Cervical Cancer” Some drugs are taken orally and can be taken at home and some drugs are inserted right into the veins and are given in the hospital or clinics. In this process, the fast growing cancer cells are destroyed by the drug, but as a threatening side effect, it can also destroy the healthy cells that grow and divide fast, such as the blood cells, cells in the hair root and cells in the line of the digestive tract. Hence, weakness due to blood cell damage, hair loss, nausea, vomiting, poor appetite and diarrhoea are common side effects. In most cases, chemotherapy is given along with radiation therapy. Prevention of Cervical Cancer: The positive aspect of cervical cancer is that it can be prevented well, unlike the most other kinds of cancers. Since it is caused by the HPV, a vaccination may ensure that this virus does not cause the cancer in the later times. Cervical cancer vaccine is highly recommended for girls as well as boys within the age group of 11 to 16. If these vaccines are given to them before they are exposed to the virus, it can significantly prevent most cases of cervical cancer. Condoms can make sure that you do not get exposed to the HPV virus during sex. However, it cannot be possible for couples, who are planning for a baby. Coping With Cervical Cancer: First of all, those, who are worried about the possibility of growing cervical cancer, must know that the cause of the disease, HPV is a virus that every woman at some point in her life will develop. In most cases, they disappear on their own. But, those for whom the virus does not disappear, it can develop into a cancer. The good news here is that it takes a long time to develop the disease, probably 10 to 20 years of the infection. Hence, there is enough time to undergo a Smear test to check for the presence of pre-cancer cells or cancer cells. Those, who go through this test in every two to three years, are at a high chance of being diagnosed right at the beginning of the disease and be treated properly, with a high survival rate for cervical cancer. Coping with the news that you have developed cervical cancer might be difficult in the very first place. However, if you are diagnosed with cervical cancer at the very early stage, there is enough reason to be happy about the fact that you are still getting a lot of chance to treat the disease and live a normal life. However, those, who are diagnosed with cervical cancer at a later stage, can have a palliative treatment and also a psychological support system to deal with this. The next most important and practical factor to cope with is a disturbed sexual life for cervical cancer patient. Your sexual life might undergo a radical change and in that case, you will have to take the advice of a medical expert to cope with

this. However, when you are having the treatment, especially the radiation therapy for cervical cancer, you will have to wait for a week or so, to let your body heal from the damage from the rays. After that you can have normal sex life. There is a string fear and misconception that sex will worsen your cancer, but that is not the fact and you will also not pass the cancer to your partner, since cervical cancer is not infectious. The HPV although is and you may pass that on to your partner. Yet, you must understand that not every person with HPV will have cancer. Along with other emotional issues, the financial issues must also be considered as an important factor to cope with. Treatments are expensive and elaborate, as they continue to go on for a long time. It is better to cope with this problem soon. Cervical cancer is a common disease and many women have had it and are having it. They are still surviving with much believe in themselves and the treatment. Hence, there is enough reason to think that you are not the only one and also not consider it as the end of the world. Get your kids vaccinated with the HPV vaccines to make sure that they do not grow this disease.

Chapter 5 : CBT Therapy for COPING with CANCER, ABCT

To know that you have cancer is shocking news for all women. Many women are led to a state of shock when they discover that they have cervical cancer and many others have succumbed to death after having discovered cervical cancer in its advanced stages.

Surgery Surgery for cervical cancer is done to remove the tumor and not leave any cancer cells behind. A gynecologic oncologist can determine if a tumor can be safely removed with surgery. The type used depends on the extent stage of the cancer, as well as your desire to have children. The most common types of surgery for invasive cervical cancer include: This is a type of biopsy. Your doctor may use this procedure instead of a hysterectomy to treat a stage IA1 cancer if you want to get pregnant in the future. He or she can do this procedure in the office under local anesthetic. The doctor uses a laser knife or an electric wire to remove a cone-shaped piece of tissue from the outer part of the cervix. A pathologist examines the cells under a microscope to make sure no cancer cells are found around the edges of the cone. In many cases, women are cured after one procedure. However, when using this treatment there is a small chance that the cancer will come back. So make sure to keep all follow-up appointments with your doctor. A doctor removes your whole uterus and cervix through your abdomen or vagina. This surgery requires regional or general anesthesia. You are sedated or asleep. You stay at least one night in the hospital. Women often recover faster when the hysterectomy is done through the vagina. Laparoscopic or robot-assisted surgery also usually leads to faster recovery. Talk about the removal of your ovaries and tubes with your surgeon before the surgery. Removing ovaries causes menopause and long-term side effects. A doctor removes your uterus, cervix, the upper part of your vagina and the tissue that holds your uterus in place. The surgeon removes the lymph nodes in the pelvic area to test them for disease spread. The doctor can remove all the tissues through an incision in your abdomen. He or she may be able to use minimally invasive techniques, like laparoscopic surgery. This is a surgery where these tools are used through smaller cuts. This surgery is done with general anesthesia. You are asleep during the procedure. You may spend several days in the hospital. This is important for younger women. This procedure is less often used. It is an option that may be used to preserve fertility in young women. The doctor removes your cervix, pelvic lymph nodes, upper part of your vagina and surrounding tissue. The uterus is then reattached to the remaining vagina. For certain people, this procedure is as likely as a radical hysterectomy to cure cervical cancer. The procedure is complex. It should only be done by a gynecologic oncologist who has experience with this method. After this surgery, there is an increased risk of infertility and pregnancy-related complications. For a future pregnancy, you may need fertility treatments and high-risk pregnancy care. It may be delivered externally using focused beams of energy, or internally, placing an energy emitting substance in or near the tumor site. Your doctor may advise radiation therapy in these cases: You have cervical cancer that has spread beyond the cervix. You have a large cancer that is found only in the pelvis. When cancer is large, radiation therapy is the preferred treatment. You need treatment after surgery to make sure that all the cancer cells are gone. You have early-stage cervical cancer, so you can have radiation instead of surgery. Radiation therapy works as well as radical hysterectomy for treating small cervical cancer. You need treatment to shrink a tumor before surgery. Women with cervical cancer who are treated with radiation usually receive low-dose chemotherapy at the same time. This makes the radiation work more effectively. For smaller cancer or one that has not spread, radiation works as well as surgery. Doctors also use radiation for larger cancer or one that has spread in combination with other therapies or to help control symptoms. City of Hope is a leader in image-driven radiation planning, using computed tomography and magnetic resonance imaging scans to determine tumor size and location. This ensures radiation is accurately delivered to the tumor site, while minimizing exposure to nearby normal tissues. This personalized medicine approach may be further enhanced by molecular or genetic testing of your cancer, which can help identify treatments that are more effective and with fewer side effects. In addition to standard drug treatments, patients may also be eligible for new, promising drugs through our clinical trials program.

Chapter 6 : Coping with Cervical Cancer | CancerCare | CancerCare

A diagnosis of cervical cancer can bring about a wide range of emotions and questions. Because many of the treatments for cervical cancer can have a permanent impact on the reproductive system, people with this diagnosis often express concern about fertility and the ability to carry children after.

Sign up now Cancer diagnosis: Learning that you have cancer is a difficult experience. After your cancer diagnosis, you may feel anxious, afraid or overwhelmed and wonder how you can cope during the days ahead. Here are 11 suggestions for coping with a cancer diagnosis. Get the facts about your cancer diagnosis Try to obtain as much basic, useful information about your cancer diagnosis as you need in order to make decisions about your care. Write down your questions and concerns beforehand and bring them with you. What kind of cancer do I have? Where is the cancer? Can my cancer be treated? What is the chance that my cancer can be cured? What other tests or procedures do I need? What are my treatment options? How will the treatment benefit me? What can I expect during treatment? What are the side effects of the treatment? When should I call the doctor? What can I do to prevent my cancer from recurring? How likely are my children or other family members to get cancer? Consider bringing a family member or friend with you to your first few doctor appointments to help you remember what you hear. You might also want to consider how much you want to know about your cancer. Some people want all the facts and details, so they can be very involved in the decision-making process. Others prefer to learn the basics and leave details and decisions to their doctors. Think about which approach works best for you. Keep the lines of communication open Maintain honest, two-way communication with your loved ones, doctors and others after your cancer diagnosis. You may feel particularly isolated if people try to protect you from bad news or if you try to put up a strong front. If you and others express emotions honestly, you can all gain strength from each other. Anticipate possible physical changes Now “ after your cancer diagnosis and before you begin treatment ” is the best time to plan for changes. Ask your doctor what changes you should anticipate. If drugs will cause hair loss, advice from image experts about clothing, makeup, wigs and hairpieces may help you feel more comfortable and attractive. Insurance often helps pay for wigs, prostheses and other adaptive devices. Members of cancer support groups may be particularly helpful in this area and can provide tips that have helped them and others. Also consider how treatment will impact your daily activities. Ask your doctor whether you can expect to continue your normal routine. You may need to spend time in the hospital or have frequent medical appointments. If your treatment will require a leave of absence from your normal duties, make arrangements for this. Maintain a healthy lifestyle This can improve your energy level. Choose a healthy diet consisting of a variety of foods and get adequate rest in order to help you manage the stress and fatigue of the cancer and its treatment. Exercise and participating in enjoyable activities also may help. Recent data suggest that people who maintain some physical exercise during treatment not only cope better but also may live longer. Let friends and family help you Often friends and family can run errands, provide transportation, prepare meals and help you with household chores. Learn to accept their help. Accepting help gives those who care about you a sense of making a contribution at a difficult time. A cancer diagnosis affects the entire family and adds stress, especially to the primary caregivers. Accepting help with meals or chores from neighbors or friends can go a long way in preventing caregiver burnout. Find time for the activities that are most important to you and give you the most meaning. If needed, try to find a new openness with loved ones. Share your thoughts and feelings with them. Cancer affects all of your relationships. Communication can help reduce the anxiety and fear that cancer can cause. Try to maintain your normal lifestyle Maintain your normal lifestyle, but be open to modifying it as necessary. Take one day at a time. When the future is uncertain, organizing and planning may suddenly seem overwhelming. Consider how your diagnosis will impact your finances Many unexpected financial burdens can arise as a result of a cancer diagnosis. Your treatment may require time away from work or an extended time away from home. Consider the additional costs of medications, medical devices, traveling for treatment and parking fees at the hospital. Many clinics and hospitals keep lists of resources to help you financially during and after your cancer treatment. Talk with your health care team about your options.

Questions to ask include: Will I have to take time away from work? Will my friends and family need to take time away from work to be with me? Will my insurance pay for these treatments? Will my insurance cover the cost of medications? How much will my out-of-pocket costs be? Do I qualify for disability benefits? How does my diagnosis affect my life insurance? It may help to talk to people who have been in your situation. Other cancer survivors can share their experiences and give you insight into what you can expect during treatment. You may have a friend or family member who has had cancer. Or you can connect with other cancer survivors through support groups. Ask your doctor about support groups in your area or contact your local chapter of the American Cancer Society. Online message boards also bring cancer survivors together.

Fight stigmas Some old stigmas associated with cancer still exist. Your friends may wonder if your cancer is contagious. Many people will have questions and concerns. By and large, others will take their cues from you. Share your feelings honestly with family, friends, a spiritual adviser or a counselor. Keep a journal to help organize your thoughts. When faced with a difficult decision, list the pros and cons for each choice. Find a source of spiritual support. Set aside time to be alone. Remain involved with work and leisure activities as much as you can. Turn to these comforts now, but also be open to trying new coping strategies.

Chapter 7 : Coping with cervical cancer

database with lodging information near cancer treatment centers across the U.S. To learn more, visit calendrierdelascience.com GETTING EMOTIONAL SUPPORT Adjusting to and finding ways to cope with a cervical cancer diagnosis is an important part of healing, along with treatment.

Pictures of success Coping with cervical cancer Coping with the diagnosis of cervical cancer and the uncertainty was hard, and at times very lonely. After my first cone biopsy, I lived with fear that the cancer would come back, and unfortunately, it did. What I learned is that being sick, especially having cancer, scares people away. Or use a surrogate. They made me feel even more guilty and selfish about being sad. So the alternative was not to talk about it with people, which meant sometimes it overwhelmed me, and I would just start crying. Coping strategies are very important. Protecting yourself from difficult situations is also important. How can you expect someone coping with cancer that may prevent her from having children to come celebrate your children? I just had to think about redefining my entire life. And so I felt guilty at times for being upset about having cervical cancer. I have learned that grief is a complex thing. I went to a counselor who expressed great surprise at how hopeful I was in spite of my situation. I truly believed that somehow things would be okay. And I forgave myself for having cancer. I tell them my story. I tell them what I lost and what I almost lost. See a counselor or your pastor if that might help you. Take time to for your grief and healing. Like any traumatizing life experience, cervical cancer takes something away from you, but it can also give something back if you let it. It takes away your basic trust in your body and your health, at least for a while, but it can help you find strength you might not know you have. Copyright , , , , , Having babies after cervical cancer.

Chapter 8 : Podcast: Coping with Cervical Cancer |

Cervical cancer is the fourth most common cancer in women worldwide. The primary risk factor for cervical cancer is human papillomavirus (HPV) infection. Start here to find evidence-based information on cervical cancer treatment, causes and prevention, screening, research, and statistics.

Cervical Cancer Overview What is cervical cancer? Cervical cancer is cancer that starts in the cervix, the narrow opening into the uterus from the vagina. Most cervical cancers 80 to 90 percent are squamous cell cancers. Adenocarcinoma is the second most common type of cervical cancer, accounting for the remaining 10 to 20 percent of cases. Adenocarcinoma develops from the glands that produce mucus in the endocervix. While less common than squamous cell carcinoma, the incidence of adenocarcinoma is on the rise, particularly in younger women. More than 13, women in the United States will be diagnosed with cervical cancer each year, and more than 4, of women will die. Cervical cancer is the fourth most common type of cancer for women worldwide, but because it develops over time, it is also one of the most preventable types of cancer. Deaths from cervical cancer in the United States continue to decline by approximately 2 percent a year. This decline is primarily due to the widespread use of the Pap test to detect cervical abnormalities and allow for early treatment. Most women who have abnormal cervical cell changes that progress to cervical cancer have never had a Pap test or have not had one in the previous three to five years. Cervical cancer tends to occur during midlife. It is most frequently diagnosed in women between the ages of 35 and 65. It rarely affects women under age 20, and more than 15 percent of diagnoses are made in women older than 65. But in women over 65, cancer typical occurs in women who were not receiving regular screening. What causes cervical cancer? There are over different types of HPV, most of which are considered low-risk and do not cause cervical cancer. High-risk HPV types may cause cervical cell abnormalities or cancer. HPV is estimated to be the most common sexually transmitted infection in the United States. A woman with a persistent HPV infection is at greater risk of developing cervical cell abnormalities and cancer than a woman whose infection resolves on its own. Certain types of this virus are able to transform normal cervical cells into abnormal ones. In a small number of cases and usually over a long period of time from several years to several decades, some of these abnormal cells may then develop into cervical cancer. Symptoms of Cervical Cancer Precancerous cervical cell changes and early cancers of the cervix generally do not cause symptoms. For this reason, regular screening through Pap and HPV tests can help catch precancerous cell changes early and prevent the development of cervical cancer. Possible symptoms of more advanced disease may include abnormal or irregular vaginal bleeding, pain during sex, or vaginal discharge. Notify your healthcare provider if you experience: Abnormal bleeding, such as Bleeding between regular menstrual periods Bleeding after sexual intercourse Bleeding after a pelvic exam Bleeding after menopause Pelvic pain not related to your menstrual cycle Heavy or unusual discharge that may be watery, thick, and possibly have a foul odor Increased urinary frequency Pain during urination These symptoms could also be signs of other health problems, not related to cervical cancer. If you experience any of the symptoms above, talk to a healthcare provider. Cervical Cancer For an overview of HPV and cervical cancer, click here to view the slides from a presentation made by Dr. Ramondetta is a Professor of Gynecologic Oncology at the M. NCCC is a program of Listen.

Chapter 9 : Cervical cancer - Diagnosis and treatment - Mayo Clinic

Cervical cancer is different from cancer that begins in other regions of the uterus (uterine or endometrial cancer). If detected early, cervical cancer has a very high cure rate. If detected early, cervical cancer has a very high cure rate.

Behavior Therapy and Cognitive Behavior Therapy are types of treatment that are based firmly on research findings. These approaches aid people in achieving specific changes or goals. Changes or goals might involve: A way of acting: Behavior Therapists and Cognitive Behavior Therapists usually focus more on the current situation and its solution, rather than the past. Behavior Therapists and Cognitive Behavior Therapists treat individuals, parents, children, couples, and families. Replacing ways of living that do not work well with ways of living that work, and giving people more control over their lives, are common goals of behavior and cognitive behavior therapy. If you are looking for help, either for yourself or someone else, you may be tempted to call someone who advertises in a local publication or who comes up from a search of the Internet. You may, or may not, find a competent therapist in this manner. It is wise to check on the credentials of a psychotherapist. It is expected that competent therapists hold advanced academic degrees. They should be listed as members of professional organizations, such as the Association for Behavioral and Cognitive Therapies or the American Psychological Association. Of course, they should be licensed to practice in your state. You can find competent specialists who are affiliated with local universities or mental health facilities or who are listed on the websites of professional organizations. You may, of course, visit our website www. These aims are achieved through the investigation and application of behavioral, cognitive, and other evidence-based principles to assessment, prevention, and treatment. Cancer is the number two killer in the United States after heart disease. One in every four people will develop cancer. In general, there are three basic forms of cancer based on the part of the body that is affected: A diagnosis requires a biopsy of a tissue sample from the primary site of the cancer. In addition to determining where in the body the cancer originated, patients are evaluated to determine the extent of the disease. Several factors, such as the type of cancer, the disease stage, whether there is any spread or metastases, and physical effects. When individuals are first diagnosed with cancer there is often a reaction of disbelief accompanied by many negative emotions, which can include depression, anxiety, and extreme fear. Physical and psychological reactions can change over time for instance, with a change in type of treatment, or after follow-up tests, etc. Generally, the more widespread the disease, and the more physical impairment or disfigurement, the more difficult it may be to adjust psychologically to the disease. Difficulties in adjustment can interfere with day to day living, work, and relationships with significant others. There are many causes of cancer. Although cancer researchers have been able to identify the causes of some types of cancer. Other factors that can contribute to the development of cancer include viruses, diet particularly high fat diets, and the environment. Conventional modes of treatment can include surgery, radiation therapy, chemotherapy, and immunotherapy. Each of these types of treatment can result in a wide variety of side effects. For example, radical cancer surgery may cause disfigurement, loss of an organ or limb, and may require reconstructive surgery and extensive rehabilitation. Chemotherapy may be associated with bone marrow suppression which may lead to greater susceptibility to infection, bleeding, or anemia, hair loss, and impairment to heart, lung, and kidney functions, as well as nausea, numbness, and fatigue. New medications are available that can be effective in controlling some of these side effects. Radiation therapy can result in injury to skin or organs near the affected area. There has been a lot of research on how cancer affects us. This research has shown that cancer patients experience emotional distress, which may include depression, anxiety, fear of the disease, and fear of death, and anger. Cancer and its treatment can also produce physical side effects. Marital and other significant relationships may be affected. Although these reactions are seen in most cancer patients, there are different levels of disruption and emotional distress in each patient. For some cancer patients, the level of disruption and emotional distress is quite high; for others, the adjustment is less difficult. There is evidence that the majority of individuals with cancer adjust successfully over time. The better a patient can cope with the cancer, the more likely that he or she can enjoy a better quality of life. In order to deal with cancer, individuals engage in behaviors to directly

address the disease; for example, choosing a problem-oriented approach to help with decisions around the type of treatment and where the treatment will be taken. Having a reason to live, such as caring for a family, wanting to contribute to a business or charity, or continuing a favorite hobby, is especially helpful in coping with cancer. Positive relationships with others help the patient adjust. Individuals need to feel that they can develop and maintain warm and trusting relationships. If family and friends react with denial or disbelief, or blame the patient for causing the cancer, this may lead to poorer adjustment. Education Educational strategies have been used to teach cancer patients about the medical system, the disease, treatment options, treatment side effects, coping death and dying, and behavioral skills, such as stress management and relaxation training. These strategies may lessen the adverse side effects of cancer treatments. Behavior Therapy One area that has been the focus of most of the research for psychological interventions is the use of relaxation training learning to relax certain muscle groups, or biofeedback to reduce chemotherapy treatment side effects. Relaxation training is effective in reducing anxiety, nausea, and vomiting, both before and after chemotherapy. There are several goals in the use of behavior therapy with cancer patients. The first goal is to help the individual learn to problem solve around dealing with the disease, its treatment and side effects, and to increase feelings of control over the disease. The second goal of behavior therapy approaches is to address specific problems, such as sexual dysfunction, which the cancer or cancer treatment s may cause. A third goal of behavioral approaches is to deal with compliance issues that may directly affect the success of medical treatments for the cancer. Cognitive Behavior Therapy Individuals with cancer often have many fears and misconceptions about the disease, its outcome, its treatments, and their own ability to cope. Cognitive behavioral approaches can help patients to identify negative beliefs that may hinder their ability to accept the diagnosis and cope with the disease. Once dysfunctional beliefs are identified, individuals can challenge these negative thoughts, develop more rational responses, and think more positively, particularly regarding their role in adjusting to the disease. The ability to examine negative thoughts objectively and to replace them with more positive, adaptive thoughts greatly enhances quality of life. Cognitive therapies are also used to help individuals who are terminally ill to accept or reduce their fear of death and dying. Other cognitive strategies involve imagery in conjunction with relaxation training. Group Support The role of group support therapy in facilitating adjustment to cancer is clearly upheld. Group settings allow individuals to feel a sense of community and to realize that they are not alone in having cancer. In addition, group settings allow for individuals to be exposed to positive role models who have successfully dealt with the disease. For more information or to find a therapist: Please feel free to photocopy or reproduce this fact sheet, noting that this fact sheet was written and produced by ABCT.