CERVICAL CANCER is an abnormal growth of cells on the cervix, or an abnormal growth of cells that began in the cervix. Cervical cancer is almost 100 percent preventable through regular routine screening, avoidance of controllable risk factors and vaccination against the human papillomavirus (HPV). According to the American Cancer Society (ACS), there were an estimated 12,170 cases of invasive cervical cancer diagnosed in the United States during 2012, and over 4,200 deaths occurred nationally as a result of cervical cancer. In Indiana, approximately 250 new cases of cervical cancer and 85 cervical cancer-related deaths occur annually among females.¹

Who Gets Cervical Cancer?

- HPV infection is the single greatest risk factor for cervical cancer.³ HPV is passed person-to-person through sexual contact. Delaying first sexual activity, limiting sexual partners, using condoms during sex and being vaccinated can reduce the risk of contracting HPV.
- The Centers for Disease Control and Prevention (CDC) recommends HPV vaccination for boys and girls ages 11-12. There are two vaccines (Cervarix and Gardasil) currently available. Both vaccines are recommended for 11 and 12 year-old girls, and for females 13 through 26 years of age, who did not get any or all of the doses when they were younger. One vaccine (Gardasil) is recommended for boys aged 11 or 12 years, and for males aged 13 through 21 years of age, who did not get any or all of the three recommended doses when they were younger. In addition, the vaccine is also recommended for gay and bisexual men, and men who have compromised immune systems (including people living with HIV/AIDS) through age 26 years-old, who did not get any or all of the doses when they were younger.³
- Indiana females are most often diagnosed with cervical cancer during their middle adult years. During 2011, 81 percent of cervical cancer cases occurred among Indiana females less than 65 years-old, including 36 percent of cases occurring among women ages 25 to 44 and 46 percent among women ages 45 to 64.⁴
- During 2002-2011, in Indiana, African-American women, compared to white women, had a 22 percent higher cervical cancer incidence rate (9.5 versus 7.8 cases per 100,000 females) and a 50 percent higher mortality rate (3.6 versus 2.4 deaths per 100,000 females) (Figure 2). While many factors are probably impacting this disparity, one apparent issue is that African-American women tend to be diagnosed more often after the cervical cancer is no longer localized.
- According to the ACS, women who smoke are twice as likely to develop cervical cancer when compared to non-smokers. For help quitting, or to help a loved one quit, contact the Indiana Tobacco Quitline at 1-800-QUIT NOW (1-800-784-8669) or www.quitnowindiana.com.

Figure 1. Percent of Cervical Cancer Cases Diagnosed During Each Stage — Indiana, 2007-2011

*Age-adjusted. Does not include in situ cases which are not reportable.
Source: Indiana State Cancer Registry.

DURING 2007-2011, of the 1,250 Indiana residents who received a diagnosis of invasive cervical cancer, 534 (42.7 percent) were diagnosed in the local stage, 663 (53.0 percent) were diagnosed in the regional or distant stage and 53 (4.2 percent) had unknown staging [See Figure 1].

Figure 2. Cervical Cancer Incidence and Mortality Rates by Race* — Indiana, 2002–2011

*Rate among African-American females is significantly higher (P<.05) than the rate among white females
Source: Indiana State Cancer Registry.
Can Cervical Cancer Be Detected Early?

Yes! In the United States, the cervical cancer death rate declined by almost 70 percent between 1955 and 1992, mainly because of the effectiveness of Pap smear screening.5

There are two screening tests that can help prevent cervical cancer or find it early. The Pap test (or Pap smear) looks for precancers, cell changes on the cervix that might become cervical cancer if they are not treated appropriately. The HPV test looks for the virus that can cause these cell changes.

The United States Preventive Services Task Force recommends screening for cervical cancer in women ages 21 to 65 with a Pap test every three years; or, for women ages 30 to 65 who want to lengthen the screening interval, screening with a combination of a Pap test and an HPV test every five years.

In 2012, 73.2 percent of Indiana women age 18 and older reported having had a Pap test during the past three years. There was no difference in the rate among white non-Hispanic, black non-Hispanic and Hispanic females.2

What Can You Do To Help Prevent Cervical Cancer?

- Get vaccinated! Protecting yourself from HPV decreases your risk for cervical and other cancers.
- Practice safe sex.
- Be smoke free. Visit www.quitnowindiana.com for free smoking cessation assistance.
- Have routine Pap screenings.
- Ask for an HPV test with your Pap test if you are 30 years-old or older.
- Watch for abnormal vaginal discharge and bleeding.

GET INVOLVED: Join the Indiana Cancer Consortium (ICC)

- The ICC is a statewide network of over 100 agencies including the Indiana State Department of Health.
- ICC seeks to reduce the cancer burden in Indiana through the development, implementation and evaluation of a comprehensive plan that addresses cancer across the continuum from prevention through palliation.
- Become a member at www.indianacancer.org.

Community resources

- To learn more about the Indiana Breast and Cervical Cancer Program, visit www.in.gov/isdh/24967.htm or call the Indiana Family Helpline at 1-855-HELP-1ST (1-855-435-7178).
- To view a toolkit of resources and information regarding Indiana’s cervical cancer burden, visit the ICC website at www.indianacancer.org/cervical_cancer_toolkit/.
- For tobacco cessation assistance, contact the Indiana Tobacco Quitline at 1-800-QUIT NOW (1-800-784-8669) or www.quitnowindiana.com.

References