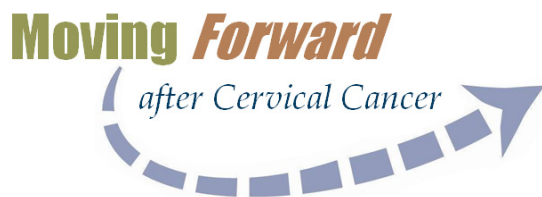


# Cervical Cancer Information

## Follow-Up Care Plan

► PART 2 OF 3

Information and resources  
for cervical cancer patients  
in Manitoba after completion  
of treatment.



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# Introduction

## Moving Forward after Cervical Cancer

This booklet is Part 2 (of 3) of the Follow-Up Care Plan package. It provides gynecological cancer specific information about:

- follow-up care
- side effects you might be experiencing and what the best course of action might be
- post treatment programs you may be interested in

Part 1 - Personalized Follow-Up Care Plan and Treatment Summary outlines your personal follow-up schedule (including necessary tests and appointments, what symptoms to watch for, and a summary of the treatments you received to treat your gynecological cancer). If you misplace your Part 1, please call your oncologist's office. A new copy can be provided for you.

Part 3 - Moving Forward after Cancer booklet is a general resource focused on wellness and health promotion, the reduction of future risk, and resources and supports available in Manitoba after being treated for any type of cancer.

Part 2 and 3 are available online at [movingforwardaftercancer.ca](http://movingforwardaftercancer.ca).

Please go to [www.movingforwardaftercancer.ca](http://www.movingforwardaftercancer.ca) for additional information that you may find helpful, such as videos and links to various websites.

### Breast and Gyne Cancer Centre of Hope

Call 1-888-660-4866 or 204-788-8080

- Helps you find your way as you move forward after treatment
- Answers questions
- Provides information and support
- Connects you to programs and resources in Winnipeg and across Manitoba

## Moving Forward after Cancer Treatment



## Follow-Up Care Plan

►PART 3 OF 3



Information and resources for  
cancer patients in Manitoba  
after completion of treatment.



**Moving Forward**  
after Cancer Treatment

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COMMUNITY ONCOLOGY PROGRAM

# Table of Contents

What to Expect After Cervical Cancer & Treatment .....	2
Emotional and Psychological Impact of Cancer and Treatment.....	3
Potential Side Effects After Cervical Cancer Treatment.....	7
Managing Bowel Changes Following Treatment for Cervical Cancer .....	12
Exercise and Activity Following Cervical Cancer .....	14
Recurrence: Are You Worried Cancer May Return?.....	18
Cervical Cancer Support & Resources.....	19
Screening Recommendations For Family.....	23
Glossary.....	25

**Important Caution:** This summary document does not prescribe or recommend any particular medical treatment or care for cancer or any other disease and does not substitute for the independent medical judgment of the treating professional.

# What to Expect After Cervical Cancer & Treatment

Now that you are done treatment you may feel relief. You may also have many other feelings. After putting a lot of energy into treatment it may be hard to adjust to life after cancer treatment. This can mean changes to how you feel emotionally and physically. In this booklet we will talk about:

- Some of the challenges you may notice
- Give plans for dealing with them
- Programs and supports that may help you

## What is my follow-up plan?

We will still want to watch you closely for the next 5 years. It is very important to come to all of your scheduled visits at CancerCare Manitoba. Please see your personalized treatment summary and follow-up guidelines (Part 1 of the Follow-Up Care Plan) for more information on your specific follow-up plan.

If you have had:

- **surgery** you will see the Gyne-Oncologist at 6 weeks after surgery
- **pelvic radiation, +/- chemotherapy** you will see the Radiation Oncologist at 8 weeks and the Gyne-Oncologist at 12 weeks

## What can I expect at each visit?

You may feel anxious about follow-up visits. This is normal. We will examine you at each visit to watch for treatment side effects, signs of recurrent cancer, or a new cancer. At follow-up visits you will have a:

- Pelvic exam & lymph node survey
- Pap test. If you have had your cervix removed, the Pap will be from the vaginal cuff (area at the top of the vagina)
- Ask about new symptoms such as vaginal bleeding, chest, back, or pelvic pain or pressure, unexplained cough or shortness of breath, anorexia, sudden weight loss, and urinary changes such as increased urgency and/or frequency

At these visits you can:

- Talk about lasting physical or emotional side effects
- New symptoms
- Ask for help to manage side effects caused by your cancer and treatment

There are programs at CancerCare that are free and can help you in your recovery. Some medications can also be used.

Examples: hormone replacement therapy and/or physiotherapy

Other prescriptions for non-cancer issues are to be given by your primary care provider

Use your vaginal dilator daily if you have had radiation to the pelvis +/- high-dose radiotherapy (HDR).

Dilators help to:

- Prevent narrowing or shortening of the vagina
- Make future medical examination of the pelvis to be as comfortable as possible
- Decrease pain with sexual intercourse

*(see the Care for Women after Radiation to the Pelvis booklet)*

## How often should I see my family doctor?

See your family doctor\* within 3 months of your last treatment. We will tell you if you need to see your family doctor sooner.

\*When we refer to family physicians in this booklet, we are also including primary care nurse practitioners.

Don't have a family physician or nurse practitioner?

Family Doctor Connection Program can help you! - Ph: 204-786-7111 or 1-866-690-8260

# Emotional and Psychological Impact of Cancer and Treatment

## Living With Hope and Uncertainty

A cancer diagnosis and treatment can be a traumatic life event. Some women wonder how they will move forward after going through this life-changing time. After treatment is done you may feel a bit lost. Family and friends are happy you are done treatment. You did it! They are grateful you are done so you can “get back to normal”. You may not feel as excited.

Many survivors feel sadness, anxiety, fear, jealousy, anger, and frustration. People who have gone through treatment often feel like they are grieving. There are losses that happen along with cancer and you have the right to grieve for them. Often it is grieving the losses that can cause you to feel different than others around you. During treatment you were busy. Now is the time when the feelings, emotions, thoughts, reactions and ideas have the time to say “here we are.”

## I think I may be depressed. Is this normal? Why now?

Many women feel sad, fatigued, scared, angry, or overwhelmed after treatment. Some develop depression. Ensure that you talk with your doctor about how you are feeling. Many people benefit from counselling and/or medication. Getting enough sleep, activity, and social interaction can be helpful. The same things you don't feel like doing when you are down are the things that help manage a depressed mood.

Make sure you let someone close to you know how you are feeling and consider counselling through Patient and Family Support Services. If you have any thoughts about harming yourself or anyone else, call the crisis line at 204-786-8686, call 911 or go to the nearest emergency room immediately.

## I'm feeling anxious. Is this common?

Increased anxiety is very common during and after treatment as you cope with many life changes, decisions, and challenges. Research shows counselling and/or medication are very effective for helping with anxiety. Other strategies known to be helpful include:

- Learn what triggers your anxiety and what helps you relax
- Talk to your family physician about your concerns
- Seek support from family, friends, spiritual or religious groups, support groups, and counsellors
- Practice mind/body activities such as breathing techniques, restorative yoga, meditation, guided imagery, soothing music, and mindfulness

## I worry about the cancer coming back – particularly when I have aches or pains. What will help?

Many people worry about the cancer coming back – the good news is the worry usually lessens over time

- Practice a healthy lifestyle (physical, psychological, emotional, and spiritual)
- Maintain a good relationship with your health care provider
- Maintain a sense of hope, optimism, and humor
- Seek support from family, friends, support programs, and professionals
- Stay up to date on gynecological cancer resources

# Emotional and Psychological Impact of Cancer and Treatment

## I am having problems concentrating and am finding my memory is not what it used to be. Is something wrong with me?

Many women have what we call “brain fog” for some time after treatment. Most people return to their normal pre-cancer function in 6-12 months. Some women find it may last up to 2 years after treatment is done. There are some things that you can do to help:

- Use a daytimer to track appointments and medications
- Create lists as reminders
- Place items (such as car keys, cell phones, planners) in the same place
- Allow extra time to finish personal and work related tasks
- “Exercise” the brain; Sudoku or memory games
- Exercise your body
- Talk to us (Gyne-Oncology team) and/or ask for a referral to an Occupational Therapist.
- Attend the “Brain Fog” Education Program offered by CancerCare Manitoba
- Manage depression and anxiety

## When should I return to work?

You need time after treatment is done to recover psychologically and physically. Physical recovery after surgery usually takes about 6 weeks with some women back to work at that time. For women who have had chemoradiation it may take longer; around 3 months after treatment is done. Psychological recovery can take longer than the physical recovery.

When treatment is over people begin to notice the emotional impact of the journey. This may be the first time you have had the energy to process what you have just been through. This may be a good time to seek support from other cancer survivors or supportive care professionals.

Talk with your healthcare team and workplace/disability provider to decide the right timing for you. A gradual return to work may be best. Patient and Family Support Services offers many supports and programs to aid in your recovery.

You can also use [www.cancerandwork.ca](http://www.cancerandwork.ca) to help you with going back to work.

## My family and friends think I should be “over it” by now, but I’m not. Is this normal?

People in your life often do not know what to expect once treatment is over. They just want you to be well but this may take much longer than others expect. It will likely take time for you, your family, and your friends to figure out your new normal. Give yourself permission to ask for help. Try your best to be honest with people about how you are feeling, and what you need. Don't forget to be patient and kind to yourself.

## I have noticed some of my relationships have changed. What can I do?

Once treatment is over, it is common to find that some relationships may have deepened while others are less close. You may feel hurt or disappointed in some people, and pleasantly surprised by others. Consider letting others know how you feel, or perhaps it is enough to know they did the best they could.

### **Now that I am feeling better, my family seems to be struggling. Is this normal?**

Now that your family can be less worried about you they may need time to deal with their own feelings. Counselling is available from CancerCare Manitoba Psychosocial Oncology for friends and family as well as patients.

### **I am having difficulty accepting how my body looks and feels – how can I get through this and feel better about it?**

You may be upset about how your body looks and feels after treatment. Some women feel less feminine, or experience changes in sensation. It can take time and a lot of reassurance from the woman's partner for her to accept her changed body. Women also tend to judge themselves harshly and hold themselves to a high standard (often influenced by media messages). While loving words from her partner can help, it is the woman who needs to come to a place of acceptance, and this can take a long time. It may take time and patience to become accustomed to the changes and to regain comfort with your body. Many women find it helpful to meet with others who have been through a similar experience. The Gyne Cancer Patient and Family Educator can put you in touch with other women who have been treated for cervical cancer. It is also important to take good care of yourself and engage in activities that make you feel good, such as exercise, manicure, pedicure, or massage. Slowly become more familiar with your "new" body by looking at it directly or in a mirror, touching it, and learning what feels "normal".

### **I feel like less of a woman after the surgery – what can I do to feel like I used to about myself?**

It's also important to talk to your health care providers about how you are feeling. Sometimes these feelings are related to depression. Depression is common among cancer survivors, and can be treated.

If you think you may be depressed, talk to your family physician or call CancerCare Manitoba Patient and Family Support Services for an appointment with one of the counsellors at 204-787-2109 or 1-866-561-1026.

### **I have no desire to be sexual anymore – is this normal and when will it get better?**

There are a number of reasons why sexual desire may decrease during/after cancer treatment. It is very common and normal – and it may get better – but why wait and wait? Make an appointment to see a sexuality counsellor and get some help!

### **How can I get my interest in intimacy and sexuality back?**

You may feel like your body is less attractive, or you may have less sensitivity to arousal. Sometimes people feel less "connected" to their body after having many health care providers examine them so often. Or your partner may be worried about hurting you. Start with lots of closeness and make a "date" to become intimate. Ensure you talk about your needs and concerns with your partner.

### **I find that sexual touching of my genitals is unpleasant – why is this happening and is there anything I can do to make the pain go away?**

This may be happening for all sorts of reasons including hormonal changes, anxiety, side effects of treatments, etc. Finding help for this depends on the reason for the "unpleasant" feeling. Talk to us (Gyne-Oncology) so we can look for the source of the problem. Seeing a sexuality counsellor can help.

You can contact the Sexuality Counselling Clinical Nurse Specialist by phone at 204-787-4495 or toll-free at 1-866-561-1026

# Emotional and Psychological Impact of Cancer and Treatment

Professional support is available to patients and families free of charge and without a referral, even after being discharged from the cancer clinic. Counselling is available in person, by phone, or by video conference through MBTelehealth.

## Patient and Family Support Services

### Patient and Family Counselling

Cancer affects the physical body, as well as the emotional, social, and spiritual needs of the person with cancer and their family or loved ones.

- Many women and their loved ones have found it helpful to talk to a professional counsellor.
- The counsellors at CancerCare Manitoba have experience, training, and knowledge to help you and your family cope with cancer and its treatments. They often meet patients for the first time after treatment is done because these feelings and emotions are so common.
- A counsellor can meet with you alone, or include your family. Family and loved ones are also welcome to meet on their own.
- **Call 204-787-2019 or toll-free at 1-866-561-1026 to request an appointment.**

### Moving Forward After Breast or Gyne Cancer Session

*Celebrating the End of Treatment*

As a patient who has finished treatment you are welcome to join the Moving Forward After Breast or Gyne Cancer Session. Here you will learn, share, and ask questions to help move forward after your cancer treatment. This session is provided by our nurses as well as a social worker.

Topics covered include:

- Side effects left behind from treatment
- Sexuality, intimacy and dating
- Emotional impact of cancer
- Living with hope, and the fear of recurrence
- Getting back to work
- Follow-up care/role of your family doctor

**FOR MORE INFORMATION AND TO REGISTER, CALL:**

**204-788-8080 or Toll Free: 1-888-660-4866**

**Where: Breast and Gyne Cancer Centre of Hope**

**691 Wolseley Ave**

**There is no charge for this session.**

**Family members are welcome to attend.**



# Potential Side Effects After Cervical Cancer Treatment

## Menopause and Treatment Induced Menopause

**Treatment induced menopause (TIM)** is caused by medical treatment. With TIM, women usually skip **perimenopause**.

*Perimenopause:*

- Starts age 45 to 55.
- A slow decrease in the hormones (estrogen and progesterone) that are made by your ovaries. Your period starts to be irregular.
- As hormone levels lower further your period stops.

*Menopause:*

- When you have not had a period for 12 months.

**TIM with cervical cancer can be caused by:**

Surgical menopause:

If both ovaries are removed with surgery TIM is:

- Sudden.
- Starts at the time of surgery.
- Permanent.

Radiation to the pelvis:

- TIM is usually permanent.

## What can I expect with Treatment Induced Menopause?

TIM can cause more extreme menopausal symptoms. There are many ways to cope with them.

### Common Menopause Symptoms:

- Hot flashes
- Night sweats
- Problems sleeping, such as not being able to fall asleep
- Weight gain
- Vaginal dryness or vaginal itching
- Some loss of bladder control
- More frequent bladder infections
- Mood swings or getting easily irritated
- Problems with memory and concentration

## Symptoms of Menopause and What You Can Do:

There are ways to help cope with your menopausal symptoms. With some simple strategies and lifestyle changes you may notice symptoms improve. We may suggest you try medications to manage your symptoms. Talk to your gynecologist about your options. Some options are:

- Hormone replacement therapy (HRT).
- Vaginal estrogen.
- Non-hormonal medications.
- Lifestyle changes.

# Potential Problems After Cervical Cancer Treatment

**Hormone replacement therapy (HRT)** can be used if your type of cancer is not fed by hormones. The amount of estrogen in HRT is much lower than the estrogen usually made by your ovaries. HRT can be in the form of birth control pills, estrogen patch, or vaginal estrogen.

## Vaginal Estrogens

- Treat the walls of the vagina when they are thinner and less stretchy.
- Place in the vagina, or apply to the vulva.
- Talk to your Gyne-Onc team before you use. You will need a prescription.

**Non-hormonal medications** can help with hot flashes and mood changes.

Effexor: Is classed as an anti-depressant and can be very helpful with treating hot flashes.

Clonidine: Is classed as a blood pressure medication.

Other medications: Gabapentin and Vitamin E supplements.

\*CancerCare Manitoba offers this list as information and does not endorse any particular product.

**Herbal therapies:** More research is needed. We do not know:

- How well herbal therapies work.
- How safe they are for women who have had cancer and are going through menopause.

Talk with us (Gyne-Oncology team) or CancerCare pharmacist (self-refer at 204-787-1902) before taking any herbal product.

Problem or Effect	What You Can Do At Home
<b>Hot Flashes and Mood Swings</b>	<p>TIPS:</p> <ul style="list-style-type: none"> <li>• Exercise daily. Talk to your doctor about what is safe for you</li> <li>• Try vitamin E</li> <li>• Use fans when warm</li> <li>• Acupuncture</li> <li>• Wear natural and moisture-wicking fabrics and dress in layers</li> <li>• Find out what your triggers are and avoid them. Caffeine and alcohol can be triggers</li> <li>• Choose cold food and drinks</li> <li>• Get enough sleep:               <ul style="list-style-type: none"> <li>- Sleep in a cold room</li> <li>- Adjust bed covers (lighter/ moisture-wicking)</li> <li>- Talk to your doctor about sleep medications</li> </ul> </li> <li>• Eat a balanced diet</li> <li>• Reach out to supports around you</li> <li>• HRT or other non-hormone medications may help</li> </ul>

Problem or Effect	What You Can Do At Home
<p><b>Vaginal changes such as dryness, narrowing of vagina, and/or painful intercourse (sex):</b></p> <p>Low estrogen can cause tissue in the vagina to thin or be painful.</p> <p>Surgery Types:</p> <ul style="list-style-type: none"> <li>• <b>Radical Hysterectomy:</b> The tip of the vagina is shortened 1-2cm at surgery. Many women adjust to this change over time. Your vagina increases in length when you are sexually excited. You can have sex after your 6 week surgical follow-up if you are healed. Talk with us at your follow-up visit.</li> <li>• <b>Total Abdominal Hysterectomy:</b> Your vagina is the same size as before surgery. You can have sex after your 6 week surgical follow-up if you are healed. Talk with us at your post-op visit.</li> <li>• <b>Trachelectomy:</b> Your vagina is the same size as before surgery. You can have sex after your 6 week surgical follow-up if you are healed. <b>You must use birth control to prevent pregnancy.</b> Talk with us at your post-op visit.</li> </ul> <p>*Note:  <b>Radiation to the pelvis</b> causes fibrosis (thickening and loss of flexibility to vaginal tissue) and you make less lubricating fluid. You can have sex during treatment or choose to wait until treatment is over. Talk to us if you have questions.</p>	<p>Talk to us (Gyne-Oncologist) about your options. You will need a prescription:</p> <ul style="list-style-type: none"> <li>• Hormone replacement therapy (HRT)</li> <li>• Vaginal estrogen</li> <li>• Non-hormonal medication options</li> </ul> <p>TIPS:</p> <ul style="list-style-type: none"> <li>• Try regular intercourse 1-2 times per week. Use lubricant prior to intercourse. Some positions may be easier than others.</li> <li>• Use vaginal moisturizer 3 times per week.</li> <li>• Use vaginal dilators as directed: CANO booklet (<a href="http://jgh.ca/uploads/gynonc/Radiotherapy/DilatorBooklet.docx.pdf">http://jgh.ca/uploads/gynonc/Radiotherapy/DilatorBooklet.docx.pdf</a>)</li> </ul> <p><b>Lubricants:</b> Example: Astroglide* or K-Y Intrigue*</p> <ul style="list-style-type: none"> <li>• Use just before and during sex.</li> <li>• Mimics vaginal fluids.</li> <li>• Scented or flavoured products can cause irritation.</li> </ul> <p><b>Vaginal Moisturizers:</b> Examples: Replens*, Vitamin E, Gynatrol*</p> <ul style="list-style-type: none"> <li>• Non-hormonal products that do not need a prescription.</li> <li>• Lasts longer and are not used during sex.</li> <li>• Helps tissue regain moisture and stretch. Talk to us about vaginal moisturizers.</li> <li>• Use water soluble vaginal moisturizers.</li> <li>• Use at bedtime, 3 to 5 times per week, for at least 3 months. At first you may have burning but as tissue becomes healthier this should stop. If burning does not stop talk to us.</li> </ul>

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# Other Possible Side Effects After Cervical Cancer Treatment

You may (or may not) have had some of the following side effects after treatment for cervical cancer. You may have other symptoms not listed below. Some of these problems may start during or shortly after treatment; others may not appear for months or even years, or they may never appear.

It may take time to see your side effects improve or go away. You may need to work with your health care team to try various strategies, medications, therapies, and lifestyle changes to find what works. Sometimes side effects go away on their own, while others may last for a very long time.

If any of these side effects are a problem or are stopping you from doing your usual activities, talk about them with your health care provider.

\*Detailed resource and contact information can be found in the Cervical Cancer Support and Resources section of this book.\*

Problem or Effect	What You Can Do At Home	Who Can Help You with the Problem
<p><b>Fatigue</b> (feeling constantly tired) has an impact on many dimensions of wellbeing, including: physical, emotional, cognitive, social, and spiritual</p> <p>Fatigue: may increase after surgery, • starts to decrease within a few weeks of your surgery</p> <p>If you have had radiation your fatigue may increase for the first few weeks after treatment is done. Usually by 2-3 months after treatment it begins to improve</p>	<ul style="list-style-type: none"> <li>• Exercise - be physically active if you can (start with 10 minutes twice a day)</li> <li>• Rest when you feel tired and nap during the day if you need to (be careful not to nap too late in the day as this can affect your ability to sleep at night)</li> <li>• Examine your sleeping environment and make improvements where possible</li> <li>• Try eating 5 to 6 small meals a day instead of 3 large ones               <ul style="list-style-type: none"> <li>- this helps your body to stay energized throughout the day</li> </ul> </li> <li>• Drink lots of fluids</li> <li>• Practice mind/body activities such as breathing techniques, restorative yoga, guided imagery, soothing music, and mindfulness</li> </ul>	<ul style="list-style-type: none"> <li>• Talk to us (Gyne-Oncology team) and/or ask for a referral to an Occupational Therapist</li> <li>• There are a variety of programs that may help you with your fatigue</li> <li>• Contact CancerCare Manitoba's Patient and Family Support Services at 204-787-2109 or 1-866-561-1026 extension 2109.</li> <li>• Contact Gyne Cancer Patient and Family Nurse Educator at 204-788-8039  <a href="http://www.cancercare.mb.ca/home/patients_and_family/cancerrelated_fatigue/cancerrelated_fatigue_resources">http://www.cancercare.mb.ca/home/patients_and_family/cancerrelated_fatigue/cancerrelated_fatigue_resources</a></li> </ul> <p>View CancerCare Manitoba's Living Well with Cancer-Related Fatigue Video Series:  <a href="http://www.cancercare.mb.ca/home/patients_and_family/cancerrelated_fatigue/">http://www.cancercare.mb.ca/home/patients_and_family/cancerrelated_fatigue/</a></p>
<p><b>Skin changes</b> due to chemotherapy, radiation or surgery</p>	<ul style="list-style-type: none"> <li>• Use a gentle soap (Dove*)</li> <li>• Use unscented lotions on the area of treatment 2 to 3 times a day</li> <li>• When bathing, use a clean washcloth and don't scrub the area. Pat the skin dry</li> <li>• Wear loose clothing and natural fabrics</li> <li>• Refer to the Managing Skin Changes After Treatment section in Part 3</li> </ul>	<ul style="list-style-type: none"> <li>• Talk to your primary care provider or us (Gyne-Oncology team)</li> </ul>

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Problem or Effect	What You Can Do At Home	Who Can Help You with the Problem
<p><b>Loss of muscle strength and/or weight gain</b></p> <p>(Trouble with daily activities, exercising, and/or unwanted weight gain)</p>	<ul style="list-style-type: none"> <li>• Follow the Canada Food Guide for healthy eating recommendations</li> <li>• Keep a food diary</li> <li>• Participate in regular activity, such as walking, yoga, or pilates</li> <li>• Start with 10 minutes twice a day and work your way up to your new goal!</li> </ul>	<ul style="list-style-type: none"> <li>• Talk to us (Gyne-Oncology team) about being active and/or ask for a referral to a registered dietitian in your community</li> <li>• Ask for a referral to a physiotherapist or athletic therapist if further support is needed</li> <li>• Look for an exercise facility in your community</li> <li>• Enroll in the programs offered by CCMB free of charge such as yoga, and Moving Forward after Cancer Wellness Program. Call 204-787-2109 to register.</li> </ul>
<p><b>Lymphedema</b>- Can be caused by removal of the lymph nodes with surgery, or by changes to connective tissue from pelvic radiation</p> <p>Signs and symptoms:</p> <ul style="list-style-type: none"> <li>• Swelling or puffiness in the leg</li> <li>• Ache or pain in the leg</li> <li>• Difficulty moving the leg</li> <li>• Tightness of skin</li> <li>• Leg heaviness</li> </ul> <p>Call your doctor to make a diagnosis of lymphedema</p>	<p>How can I reduce my risk of developing lymphedema or decrease the effects in the future?</p> <ul style="list-style-type: none"> <li>• Watch for signs of infections (redness, pain, swelling, hot spots) and seek medical attention ASAP</li> <li>• Reduce or maintain your weight to help prevent lymphedema</li> </ul>	<ul style="list-style-type: none"> <li>• Talk to a lymphedema specialist at the Lymphedema Association of Manitoba <a href="http://www.lymphmanitoba.ca">www.lymphmanitoba.ca</a></li> <li>• Physiotherapy may help</li> <li>• Contact the Vodder School for a specialized physiotherapist <a href="http://www.vodderschool.com">www.vodderschool.com</a>.</li> <li>• Contact Gyne Cancer Patient &amp; Family Educator for more information and resources at (204) 788-8080</li> </ul>
<p><b>Urination problems due to surgery or radiation therapy</b></p> <ul style="list-style-type: none"> <li>• Frequent need to pee</li> <li>• Difficulty emptying bladder</li> <li>• Need to wear a pad</li> </ul>	<ul style="list-style-type: none"> <li>• Practice Kegels (see Exercise section for instructions)</li> <li>• Empty bladder frequently and regularly</li> <li>• Avoid bladder irritants such as coffee and spicy food</li> <li>• If self catheterizing do so prior to intercourse</li> <li>• Wear cotton panties</li> </ul>	<ul style="list-style-type: none"> <li>• Talk to your primary care provider or us (Gyne-Oncology team) about how you are feeling.</li> <li>• Riverview Incontinence Program - physician or nurse referral required Phone: 204-478-6108</li> <li>• Incontinence &amp; Pelvic Pain Clinic (Nova Physiotherapy &amp; Sports Injury Clinic) Phone: 204-982-9176*</li> <li>• Physio4U*- Brandon, Manitoba. Phone: 204-725-4066</li> <li>• Wellness Institute at Seven Oaks Hospital - Physiotherapy services 204-635-3900</li> </ul>

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# Managing Bowel Changes Following Treatment for Cervical Cancer

## Bowel Changes

Bowel changes can be short term (less than 3 months) or chronic (more than 3 months). Changes can make it hard to get back into your regular diet. Your stools may be:

- Too hard or too soft.
- Not often enough or too frequent.
- Loose, irritable, or gassy.

**Surgery** can cause adhesions (scar tissue in or around the bowel). Adhesions can cause a bowel obstruction (the bowel becomes blocked and stool does not pass). During a radical hysterectomy nerves around the bowel can be affected. This also can cause bowel changes.

**Radiation treatment** can cause bowel changes while on treatment, months or even years later. Parts of the abdomen (examples: intestines, colon and rectum) are in the radiation treatment area. This can lead to fibrosis of these areas.

Some tips that you may find helpful to manage bowel changes are:

- Talk to the dietitian at CancerCare Manitoba by calling 204-787-2109 to arrange an appointment.
- Slowly add foods back into your diet, in small amounts, one at a time.
- Try probiotics.

Contact us (Gyne-Oncology team):

- To review medications that can help.
- If your bowel movements change months after treatment and stay that way for 3 weeks.
- If you are unable to have a bowel movement for over 4 days (you may also go to the emergency department).\*

**\*Call us as soon as possible with changes in your bowels that last for over 3 weeks.\***

Chronic bowel problems can cause problems when eating:

- Fruits
- Vegetables
- Whole grains
- Foods with fibre: Example legumes, beans, lentils etc

**As symptoms improve, slowly try and add these foods to your diet.** If you have diarrhea, gas, or cramping after trying a food, avoid that food and try again at a later time.

**If you have had an ostomy** (an opening to allow drainage from your bowel) and have trouble with gas, try these tips:

- Limit foods that affect you. Some common problem foods are cabbage, onions, dried beans and peas, lentils, lettuce, cucumber, broccoli, cauliflower, radishes, brussels sprouts, corn, turnip, green pepper, sauerkraut, melons, grapes, raw apple, prunes, and raisins.
- Talk to a dietitian and/or your ostomy team about how to keep your bowels regular.
- Avoid:
  - o Chewing gum
  - o Talking while eating
  - o Carbonated beverages and drinking with a straw

The Winnipeg Ostomy Association can offer extra support and answer your questions about your ostomy  
Contact: [www.ostomy-winnipeg.ca](http://www.ostomy-winnipeg.ca) or call **204-938-5757**

## What You Can Do

### Tips for Controlling Constipation:



- Eat at the same time each day.
- Move your bowels at the same time each day.
- Drink 8 or more cups of liquid every day (example: water, juice, soup). You need liquids to help keep stool soft (more if drinking alcohol or exercising a lot).
- Do some light exercise after each meal such as walking.
- Check with your family doctor before using product containing methyl-cellulose or psyllium (example: Metamucil or All Bran Buds). They can cause more constipation if you have had radiation.
- Choose foods that help with bowel movements.
  - Examples: prune, apple, grape, pear, papayas, kiwis, and rhubarb. Use with caution. If you have had radiation you may need to avoid these foods.
- Stool softeners (found at any pharmacy) can help soften hard stools.
- Practice Kegels (see Exercise section for instructions).

### Tips for managing diarrhea/frequent bowel movements, cramping, and abdominal gas:

- Sip fluids slowly during the day (6-8 cups per day).
- Drink fluid between meals not with meals.
- Eat smaller meals more often.
- Peel and remove seeds when eating fruit and vegetables.

#### Limit:

- Drinks containing caffeine (such as coffee or cola soft drinks).
- Alcohol.
- Fatty or greasy foods (eg. French fries, fried meats, bacon, potato chips, gravies, and rich desserts).
- Spicy foods.

#### Eat more foods with soluble fibre:

- Examples: oatmeal, oat bran, barley, white rice, bananas, white bread, applesauce, and canned fruit such as peaches and pears).

#### Eat fewer foods with insoluble fibre:

- Examples: wheat bran, whole grain breads and cereals, beans, peas, popcorn, and raw vegetables (well cooked vegetables are ok).

- **Contact CancerCare Manitoba's Dietician team at 204-787-2109 or 1-866-561-1026 extension 2109.**



- Riverview Incontinence Program\*:
  - Physician or nurse referral required 204-478-6108

- Incontinence & Pelvic Pain Clinic (Nova Physiotherapy & Sports Injury Clinic\*) 204-982-9176

\* CancerCare Manitoba offers this list as information and does not endorse any particular product or service.

# Exercise & Activity Following Cervical Cancer

Research shows that regular exercise and healthy lifestyle choices can:

- Improve your overall health
- Lessen risk of developing another cancer
- Lessen risk of developing a chronic illness
- Improve your physical, emotional, social, and spiritual health

In Part 3 of this package called “Moving Forward After Cancer Treatment,” which is also available on our website at [www.movingforwardaftercancer.ca](http://www.movingforwardaftercancer.ca), you will find suggestions to help you stay healthy and information on resources to help you:

- Maintain a healthy body weight
- Quit smoking
- Exercise regularly
- Reduce your alcohol intake
- Eat a healthy diet
- Be sun safe to help reduce your risk of skin cancer

Being physically active after treatment is important even if you were not active before cancer. Research on exercise and cancer shows benefits. These include:

- An improved quality of life
- **Less:**
  - Fatigue
  - Peripheral neuropathy
  - Depression
  - Anxiety
  - Sleep problems

For more advice and tips on how to get started with exercise and activity, see the **Part 3 - Moving Forward After Cancer Treatment** booklet. **Always check with your primary care provider before starting an exercise plan.**

## Exercise Precautions Following Cervical Cancer

- If you have swelling in the abdomen, groin, or lower extremity talk to us before starting to exercise your lower body.
- You should be assessed for lymphedema before vigorous exercise or resistance training is started.
- If you have lymphedema you should:
  - Exercise under the care of a lymphedema specialist or your medical team,
  - Wear a well-fitting compression garment during exercise,
  - Be careful to prevent injury to the lower body.
- If you have osteoporosis know your risk for fractures.
- If you have peripheral neuropathy seated or supported exercise (such as a stationary bike or water-walking) is better than weight bearing or standing/stepping exercise (such as jogging or dancing).
- Part 3 - Moving Forward After Cancer Treatment has further precautions you may need to take when starting to exercise.



## Exercise with Bowel Problems

Exercise can speed up your food digestion.

Some tips for exercise are:

- Go to the bathroom before exercising
- Take short breaks to go to the bathroom during exercise
- Know where nearby washrooms are before you start exercising
- Sip water during exercise; do not gulp down large amounts before or early on
- The more intense the activity, the more you sweat, the more water you need to drink
- With stress/urgency incontinence or the need to pee often or urgently:
  - A pad or panty liner can help
  - Regular Kegel exercises (see below) can help
  - Talk to us (Gyne-Oncology team)

## Kegel Exercises

### How do I do Kegel Exercises?

First ask your primary care provider how to do them right. He or she can help you get started.

It is sometimes hard to figure out the right muscles to tighten for a Kegel. Use the diagram on page 14 of this book to help guide you.



You might learn to do Kegel exercises by:

- Putting a finger inside your vagina and squeezing the muscles around your finger; or
- Pretend you are sitting on a marble and have to pick up the marble using your vagina

The muscles involved are **not** in your belly or thighs.

After you learn which muscles to tighten, you can do the exercises in any position (sitting in a chair, standing or lying down). You do not need to do them while you are in the bathroom.

The mobile phone app **Gynzone** has a daily Kegel routine you can follow and customize as you need. Go to [www.gynzone.net](http://www.gynzone.net) to download it.

### How often should I do the exercises?

Do the exercises 3-4 times a day, every day if possible, or at least 4 days a week. Each time, flex your muscles 8 to 12 times, and hold them tight for up to 10 seconds each time you tighten, and relax them for 10 seconds between contractions. If you do Kegel exercises regularly, you can expect results within a few months. For continued benefits, make Kegel exercises a permanent part of your daily routine.

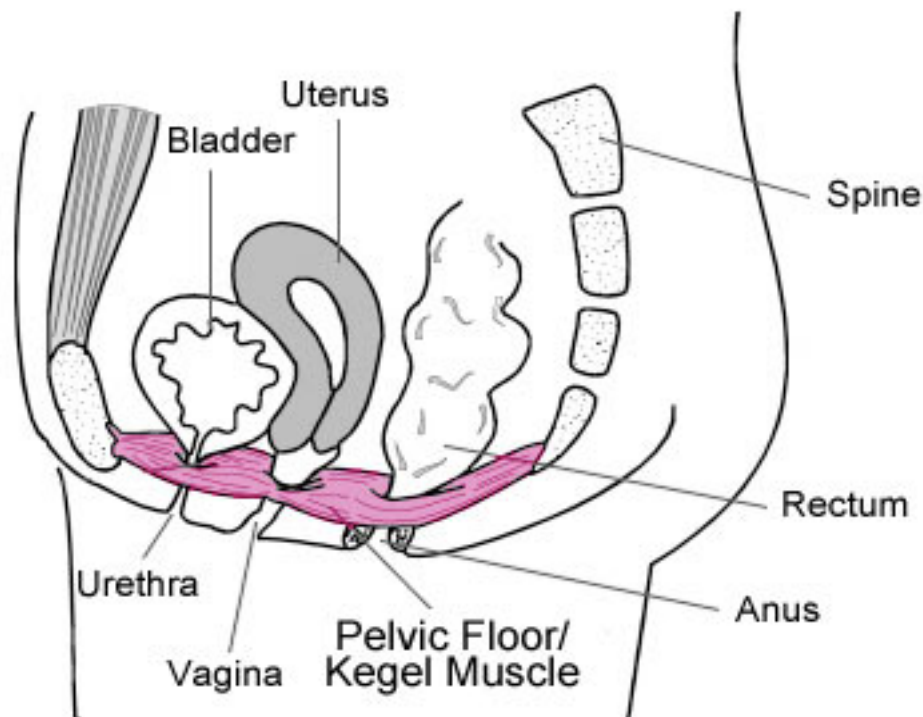
# Exercise & Activity Following Cervical Cancer

## How do Kegel exercises help?

Kegel exercises can help:

- Reduce urine leaks in people who have “stress incontinence”, which means they leak urine when they cough, sneeze, laugh, or strain
- Control sudden urges to urinate that happen to people with “urgency incontinence” (urgency incontinence is also known as urge incontinence - when you feel like you have to pee “right now” or very often and often result in leaking before getting to the bathroom )
- Control the release of gas or bowel movements
- Reduce pressure or bulging in the vagina caused by pelvic organ prolapse. (If you have a bulge in the vagina, see us (Gyne-Oncology team) to find out the cause.)
- Might also be helpful for women who have problems reaching orgasm

You may benefit from support by a Physiotherapist that specializes in helping strengthen the pelvic floor muscle. Talk to us (Gyne-Oncology team) about pelvic floor physiotherapy.



# Exercise & Activity Following Cervical Cancer Programs

**CancerCare Manitoba Cancer Specific Exercise Programs: All CancerCare Manitoba Patient and Family Support Services programs are offered at no cost to the participants**

**Yoga and Cancer** is a free program for patients on treatment or finished treatment within the past year.

For information call 204-787-2109 or toll free at 1-866-561-1026 extension #72109.

The programs listed below may be free or charge a fee to attend.

**Moving Forward after Cancer Wellness Program** is a free workshop series for patients with all cancers following treatment. The focus is on taking control of your survivorship and getting back to wellness. It is also a chance to meet others who have been through similar experiences.



Please call CancerCare Manitoba Patient and Family Support Services at 204-787-2109 or 1-866-561-1026 extension #72109 for more information and to register.

**Other programs at facilities throughout the city that may have a cost associated with them are:**

**Cancer Management Exercise Program** is a twice a week, 11 week program that is approximately 1.5 hours/session.

Focuses on addressing individualized goals in a small group setting.

Located at Rady Jewish Community Centre

Cost: Members \$125, non-members \$165. Possibility of sliding scale, funding dependent.

Address: Rose & Max Rady Jewish Community Centre, 123 Doncaster Street, Winnipeg, MB

To register or for more information call: 204-477-7510

**Get Better Together** is a free 6 week workshop at the Wellness Institute that is designed to help Manitobans with ongoing health conditions take control of their health. Topics include healthy eating, communication, physical activity, and pain management. Supported by Manitoba Health and Regional Health Authorities. Please call 204-632-3927 to register or visit <http://www.wellnessinstitute.ca/GBT>.

**First Steps to Activity** is a group program that teaches you strategies to easily incorporate activity back into your daily routine. This program can help sedentary individuals make lasting changes to ensure long-term good health and well-being. Participants will have access to the Centre for the duration of the program daily from 1:00 pm – close.

Duration: 12 weeks, once weekly. Cost: \$150, financial assistance/sliding scale available. Address: 1390 Taylor Ave, Winnipeg, MB

To register call 204-488-8023.

**Active Living Centre, University of Manitoba** No specific groups offered; conduct physical assessments and personal training. Duration: 6 weeks.

Cost: Varies, see website. Assessment and one personal training session begins at \$62 for members, \$74 for non-members. Option to purchase 1/3/6/12 session-package.

Address: 430 University Crescent, University of Manitoba.

To register call 204-474-6100.

# Recurrence: Are You Worried Cancer May Return?

A part of follow-up is to try to find any recurrence of cancer as early as possible (when cancer comes back after treatment, it is called recurrence). You might find it hard not to worry about the cancer coming back. This is a very common worry for people who have had cancer.

If cervical cancer reoccurs, it is usually in the first two years after treatment. We (Gyne-Onc team) will see you more often in the first two years. The chance of the cancer returning lowers each year after. If cancer comes back, where it is found is often related to the type of treatment you had.

- Radiation or chemoradiation: recurrence is often in the cervix, upper vagina, pelvic wall, or chest.
- Surgery: recurrence is often in the upper vagina, where the cervix was surgically removed.

Treatment options for reoccurrence depends on:

- The treatment you have already had
- Your overall health
- Where the reoccurrence is found in your body

Treatment for reoccurrence can be used for:

- Curative intent (goal is to cure the cancer)
- Control of the cancer (no longer curable)
  - To decrease symptoms caused by the cancer
  - To extend your life

## What to Watch For: Be Alert To The Following Signs

Talk to us (Gyne-Oncology team) and your primary care provider if you have any of these changes **as soon as possible**.

Signs of a recurrence:

- Vaginal spotting, bleeding, or bleeding after sex
- New or unexplained pain in your pelvis
- New swelling to one or both legs
- Change in vaginal discharge
- Hard to pass urine or unable to pass urine
- New lumps in your neck and groin area
- Shortness of breath or coughing up blood

Talk to us (Gyne-Oncology team) and your primary care provider if **these symptoms are new to you and last more than 3 weeks**:

- A new cough
- A new pain or pressure in your abdomen, back, or pelvis
- Enlarged lymph nodes (can sometimes feel like new “lumps”)
- Fatigue (feeling constantly tired) or large change in energy or ability to be active
- Not feeling like eating
- Weight loss
- Increased need to pee or peeing more frequently
- Lack of bladder control
- Not able to fully empty bladder

# Cervical Cancer Support & Resources

## Support Groups

### Peer Support



It can be helpful to talk with someone who has had cervical or gynecological cancer and finished treatment. A Peer Support Program can offer a match with a trained volunteer that has had a similar experience with gynecological cancer. All information is confidential. Volunteers do not provide medical advice or counselling. Peer support is offered by phone or in person.

To arrange to talk with a peer support volunteer, call:

- CancerCare Manitoba Breast & Gynecological Cancer Centre of Hope - Peer Support Program 204-788-8080 or 1-888-660-4866
- Canadian Cancer Society - CancerConnections 204-786-0616 or 1-800-263-6750

### Expressive Arts Group for People with Cancer

A CancerCare Manitoba Patient and Family Support Services program for people who have been treated with any type of cancer in the past two years. Use creativity and art-making in supportive group therapy to explore your cancer experience. Please call 204-787-1325 for more information and to register.

### Mindfulness Practice

A CancerCare Manitoba Patient and Family Support Services 8 week program for people living with cancer and their families interested in mindfulness. Please call 204-787-4122 for more information and to register.



In addition to breast cancer support groups and programs listed there are many other programs and groups for all types of cancer available through CancerCare Manitoba Patient and Family Support Services.

**Support Group for Women Diagnosed with Gynecological Cancer within the Past Year** is an 8 week support group for women who have been diagnosed with a cervical cancer within the past year. For the date of the next group meeting, please call 204-258-1073.

To find information on other programs and group sessions check:

- Navigator newsletter
- CancerCare Manitoba website [www.cancercare.mb.ca](http://www.cancercare.mb.ca)
- Call CancerCare Manitoba, Patient and Family Support Services at 204-787-2109 or 1-866-561-1026 ext #72109 and ask to speak to a counsellor who can help you sort out which programs may be the best fit for you.

### Online Support Groups



Professionally led face-to-face and online support groups provide an environment for those living with cancer with an opportunity to interact with others in a similar situation.

**CancerChat Canada** has professionally led face-to-face and online support groups that provide an environment for those affected by cancer with an opportunity to talk with others in similar situations. Call 1-877-547-3777 extension 645234 or go to [www.cancerchatcanada.ca](http://www.cancerchatcanada.ca).

# Gynecological Cancer Support & Resources

## Cancer Information Service



The Canadian Cancer Society Information Service is a national, bilingual, toll-free service available to cancer patients, their families, the general public, and health care professionals. The information you receive is confidential and tailored to your needs. The service is available Monday to Friday, 9:00am to 6:00pm in English and French. For other languages, we can access an interpreter service. Contact 1-888-939-3333.

## Newsletter



### The Navigator

A monthly newsletter and calendar of cancer-related support groups, information sessions, and other programs. For a copy of the Navigator, call 204-788-8080 or toll free at 1-888-660-4866. To view or print online, go to [www.cancercare.mb.ca](http://www.cancercare.mb.ca) under the Patient and Family section.

Please see the **Additional Supports and Resources** section in the **Part 3 - Moving Forward After Cancer Treatment** booklet for other support groups you can access.

You might want to talk with your **Gynecology Oncology Counsellor** who can help you sort out which group or program might be the best fit for you. Call 204-787-2109 for an appointment.



## How to contact Navigation Services

Your family doctor, nurse, or any other health care professional can refer you to the Nurse Navigators. Patients and families can also contact the Nurse Navigator directly for more information about cancer diagnosis, treatment, or follow up care.

## Health Authority - Cancer Navigation Services Toll-Free Phone Number

Winnipeg Regional Health Authority 1-855-837-5400  
Southern Health - Santé Sud 1-855-623-1533  
Interlake - Eastern Regional Health Authority 1-855-557-2273  
Northern Regional Health Authority 1-855-740-9322  
Prairie Mountain Health 1-855-346-3710



## MBTelehealth for Rural Patients

MBTelehealth is a hospital-based service that provides “live” video conferencing between two or more sites. Rural patients can attend presentations, programs, educational events, meetings, or one-on-one counselling sessions that are being broadcast from another site in Manitoba. Patients can view the speaker or site, see presentation slides or pictures if they are being used, and have the ability to ask questions or be part of the discussions. Sites are based out of hospitals and health care facilities throughout the province, and if available, will be booked by your primary health care team.

## Community Contact Program



Volunteers living in communities across Manitoba can provide information on cancer-related programs and resources. For more information in your community, call the CancerCare Manitoba Breast & Gynecology Cancer Centre of Hope at 204-788-8080 or 1-888-660-4866.

## First Nations, Metis and Inuit Cancer Control and Underserved Populations

**Education & Liaison Nurse** - Toll Free: 1-855-881-4395 or 204-784-2786

Call if you need assistance with:

- Concerns about your follow-up plan
- Problem-solving with FNIHB
- Questions
- What are you supposed to do next?
- Links with interpreters, spiritual/cultural care and advocacy



## Canadian Cancer Society

### Winnipeg Office

193 Sherbrook Street

204-774-7483 or toll free 1-888-532-6982

Fax: 204-774-7500

email: [info@mb.cancer.ca](mailto:info@mb.cancer.ca)



### Brandon Office

415-1st Street

204-571-2800 or toll free 1-888-857-6658

Fax: 204-726-9403

email: [info@mb.cancer.ca](mailto:info@mb.cancer.ca)

[www.cancer.ca](http://www.cancer.ca)

# Gynecological Cancer Support & Resources



**Websites – Cancer Information:** The Internet is a great source of information, but it is also full of misinformation. These websites are ones you can rely on to provide you with accurate information about Cervical concerns:

<b>Canadian Cancer Society</b>	<a href="http://www.cancer.ca/cancer-information/cancer-type/fallopian-tube/fallopian-tube-cancer/?region=on">www.cancer.ca/cancer-information/cancer-type/fallopian-tube/fallopian-tube-cancer/?region=on</a>
<b>Foundation for Women's Cancer</b>	<a href="http://www.foundationforwomenscancer.org">www.foundationforwomenscancer.org</a>
<b>National Cancer Institute</b>	<a href="http://www.cancer.gov/types/ovarian/patient/ovarian-epithelial-treatment-pdq">www.cancer.gov/types/ovarian/patient/ovarian-epithelial-treatment-pdq</a>
<b>BC Cancer Agency</b> Information on treatment and survivorship	<a href="http://www.bccancer.ca">www.bccancer.ca</a>
<b>Young Adult Cancer Canada</b> For young people with any type of cancer. Includes videos on various issues, online profiles, articles written by young survivors, and information on their annual retreat.	<a href="http://www.youngadultcancer.ca">www.youngadultcancer.ca</a>
<b>The Society of Gynecologic Oncology of Canada</b>	<a href="http://www.cancer.gov/types/ovarian/patient/ovarian-epithelial-treatment-pdq">www.cancer.gov/types/ovarian/patient/ovarian-epithelial-treatment-pdq</a>
<b>Canadian Cancer Survivor Network</b> Cervical Portal- What is cervical cancer? The Cervical Cancer Portal brings you relevant, up-to-date information on all aspects of cervical cancer—from screening and prevention to survivorship.	<a href="https://g-o-c.org/resources/patients">https://g-o-c.org/resources/patients</a>  <a href="http://survivornet.ca/en/">http://survivornet.ca/en/</a>
<b>The North American Menopause Society (NAMS)</b> NAMS is a world leader in menopause information and education. It offers: <ul style="list-style-type: none"> <li>• A wide range of resources</li> <li>• Information that is easy to read</li> <li>• Publications such as the <b>Early Menopause Guidebook</b></li> </ul>	<a href="http://www.menopause.org">www.menopause.org</a>



# Screening Recommendations For Family

## Is cervical cancer hereditary?

No. Cervical cancer is caused by a sexually transmitted virus called Human Papillomavirus (HPV). HPV is easily spread through current or past sexual contact, which can include:

- Oral, genital and/or rectal skin-to-skin contact, or
- Sex with toys.

HPV can pass from person-to-person regardless of sexual orientation. HPV infection usually has no signs or symptoms. HPV is as common as a common cold. Condoms can decrease transmission but do not completely prevent HPV.

## To lower the risk of cervical cancer:

### Get checked with regular Pap tests

A Pap test can find abnormal changes on the cervix before they turn into cancer. During a Pap test, cells are taken from your cervix, placed in liquid, and sent to a lab for assessment. In most cases, the cells are normal. If your Pap test result is abnormal, you may need a repeat Pap test, or in some cases, you may need colposcopy. Regular Pap tests with follow-up for abnormal changes can prevent most cancer of the cervix.

### Who should get checked?

Most women age 21-69, who have ever been sexually active should have a regular Pap test every 3 years. Family members should talk with their primary care provider if they have not had a Pap in the past 3 years.

### Why every 3 years?

Having a Pap test every 1 or 2 years offers very little added benefit over having a Pap test every 3 years and can expose women to unnecessary harms including:

- Discomfort or bleeding from the test
- Anxiety that may result from abnormal test results
- Over-diagnosis of abnormal cell changes that would go away on their own, and problems with future pregnancies from some treatments during colposcopy

To find out more information about cervical cancer screening or when you last had a Pap test visit – <http://www.getcheckedmanitoba.ca/cervixcheck.html>



*Interpreter services are available for you and your family at these appointments.*

### How do family members get checked?

Make an appointment with a regular health care provider or contact CervixCheck (204-788-8626) to find a Pap test clinic in your area. The Pap test is free for Manitoba residents.

### Get vaccinated against HPV

The HPV vaccines provide protection against certain types of HPV that can cause genital warts and cervical cancer, as well as cancers of the mouth, throat, anus, vulva, vagina and penis. If an HPV vaccine is received before sexual contact, it will be almost 100% effective in preventing infection (see table). Studies show that females who have already been sexually active may also benefit from receiving the vaccine. This is indicated for females between the ages of 9-45 and for males between the ages of 9-26.

### Are the vaccines safe?

Yes, the vaccines are safe. Health Canada has approved all (3 vaccines) based on a scientific review of their quality, safety and effectiveness. The most common side effects are soreness, pain and swelling at the injection site.

# Screening Recommendations For Family

## HPV vaccine limitations

- **They do not** protect against all high-risk HPV types that can cause cancer.
- They do not treat existing HPV infections.

## HPV vaccine benefits

They do:

- Protect against high-risk HPV types that are responsible for up to 90% of cervical cancers.
- Protect against other HPV-related cancers and their precursors.

They are safe and well tolerated.

Side effects are rare.

They **do not**:

- Cause HPV infection.
- Contain HPV; they contain virus-like particles.

## How can family members get the vaccine?

There are 2 ways family members can access the vaccine:

Males and females in the Manitoba HPV Immunization Program can access the vaccine at no cost through:

- the school based program.
- their regular health care provider, or a Pharmacist.

Visit the Manitoba Health website for more information about Manitoba HPV Immunization Program.

Female and male family members not in the Manitoba HPV Immunization Program can access the vaccine through:

- Their health care provider.
- Public health nurse or a Pharmacist.

## Do family members still need Pap tests if they have had the vaccine?

Yes, because the HPV vaccines do not protect you against all types of HPV that can cause cervical cancer.

**Read more: <http://www.getcheckedmanitoba.ca/cervixcheck.html>**

# Glossary

**Anxiety:** a state of being uneasy, apprehensive, or worried about what may happen; concern about a possible future event.

**Chemotherapy:** medications with cancer-fighting abilities to treat cancer. Can be used to increase effectiveness of Radiation therapy. Chemotherapy medications are sometimes referred to as anticancer agents.

**De-conditioning:** the loss of physical fitness, strength, or ability.

**Depression:** a common condition that affects your mood, resulting in feelings of sadness, hopelessness, inadequacy, worry, and dejection. Depression can affect your appetite, your motivation to perform daily activities, and your relationships.

**Diagnosis:** identification of a disease by means of a medical examination, signs, symptoms, laboratory tests and radiological findings.

**Dietitian:** licensed professional with specialized training in human nutrition who advises individuals on healthy eating.

**Fatigue:** physical or mental exhaustion; weariness.

**Hypertension:** high blood pressure.

**Menopause:** when a woman no longer gets her period.

**Occupational Therapist:** a specialist in the treatment of physical or mental illness that works to improve a person's ability to perform daily activities.

**Perimenopause:** a slow decrease in hormones made by your ovaries. Period starts to become irregular.

**Physiotherapist:** a person qualified to treat disease, injury, or impairment by physical methods such as massage, heat treatment, and exercise.

**Psychosocial Clinician:** a person with specialized training to talk with you and help you to regain social, emotional, and spiritual health. They specialize in assisting you with the quality of life aspects of cancer.

**Radiation (therapy):** use of gamma rays or high-energy x-rays to damage or destroy cancer cells.

**Radiation Oncologist:** physician who specializes in diagnosis and treatment of cancer and other diseases through the use of radiation therapy.

**Recurrence:** the return of cancer after a period of time when the person was considered cancer-free (remission).

**Remission:** a period of time during a serious illness when there are few or no signs or symptoms of the illness.

**Side Effects:** non-intended symptoms caused by medicine or treatment, such as nausea, rash, anxiety, or constipation.

**Symptom:** a sign or indication of a particular disease or disorder.

**Treatment Induced Menopause (TIM):** the start of menopause due to medical treatment.

**Urgency or Stress Incontinence:** not making it to the toilet in time, urinating (peeing) in your pants or leaking.

**Frequency:** having to pee very often.

**Urgency:** feeling like you have to pee "right now".

You can have both urgency and frequency in regards to urgency incontinence.

**Vitamins:** any of a group of substances that are found naturally in many foods; vitamins are necessary in small quantities for good health and normal development and functioning

# Notes



