

Know your normal: What to watch for with gynecologic cancers

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Featured topic and speakers

You know your body best. When something changes, keeping track of it and speaking up can make a difference.

In this video, Kimberly Levinson, MD, MPH, and Rebecca Lynn Stone, MD, MS, explain what women should know about cervical, uterine and ovarian cancers, from cervical cancer screening and HPV prevention to symptoms such as unusual bleeding, abdominal pain, bloating and frequent urination.

You'll also get practical questions to bring to your next doctor's appointment:

- What symptoms or changes should I watch for?
- Does my personal or family history affect my risk?
- Should I consider genetic counseling or testing?
- What screening or prevention steps are right for me?

You do not need to have all the answers before talking with your doctor. Know your normal, track changes and speak up early.

For more information from physicians on reproductive cancers, check out this [What Doctors Want Patients to Know™ article](#).

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Speakers

- **Kimberly Levinson, MD, MPH**, gynecology/gynecologic oncology
- **Rebecca Lynn Stone, MD, MS**, gynecological oncology/gynecology, Johns Hopkins Medicine

Transcript

Narrator: Gynecologic cancers start in the female reproductive system, but they are not all the same. They can begin in different places, cause different symptoms and be found in different ways. That is why knowing your body and knowing what to watch for matters.

Each year, over 100,000 women in the U.S. are diagnosed with gynecologic cancer. The three most common types of gynecologic cancers are uterine, ovarian and cervical. The most common uterine. The hardest to detect. Early ovarian. The most preventable cervical. But every gynecologic cancer is different from where it begins to how it's detected and the symptoms it may cause.

Dr. Levinson: Cervical cancers actually do not have early symptoms, and so screening for cervical cancer is really the best way for us to try to pick up early changes and catch them before they become a cancer. A pap smear test is what everybody has come to know, because it's been done for the longest period of time. But what's important to understand is that a pap smear test is actually not a very sensitive test.

On the other hand, an HPV test is very sensitive. Additionally, we have a unique opportunity to actually prevent people from ever getting cervical cancer, and that is by using the HPV preventive vaccine.

Narrator: It's important to remember one test does not screen for everything. For other gynecologic cancers, symptoms and risk matter.

Dr. Levinson: For some cancers, in order to try to detect them early and to pick them up at early stages, sometimes cancers present with symptoms. So for example, uterine cancers often present with vaginal bleeding.

Narrator: With uterine cancer, that could mean bleeding after menopause, bleeding between periods, or periods that become heavier, last longer, or are simply different from what's normal for you. Ovarian cancer can be even harder to recognize. Some women may have no symptoms at first, and others have symptoms that are easy to dismiss.

Dr. Stone: That is why detecting ovarian cancer early is so difficult. You may have heard of the other common symptoms, like abdominal pain, cramping, bloating, frequent urination. The problem with those symptoms is that they are very common, ordinary symptoms that all of us have grown up to normalize or dismiss, honestly, every day of every month of our lives, because these are symptoms that many of us commonly have, with ovulation or when we have our period.

And so, we're taught to ignore these symptoms, because we have to go to work. We have to take care of the kids. We have to make the dinner or take care of the parents. And so, we are very used to ignoring these. And we have these for many, many months before they become alarming.

Narrator: Questions that are important to ask at your next doctor's visit. What risk factors, symptoms, or changes should I be aware of and watch out for? Does my personal or family history change my risk? Do I need to consider genetic counseling or testing? What screening or prevention steps are right for me?

Dr. Levinson: Ask your doctor if you are due for cervical cancer screening. And most importantly, know what is being done during that screening test. Are you getting a pap smear? Are you getting an HPV test? And what are the results, and what needs to be done? That is your best way to prevent cancer.

Narrator: Screening is one part of the conversation. Your personal history, family history and symptoms matter too. It helps to come prepared with questions and with notes about what has changed in your body.

Dr. Stone: The most practical tip is probably the same tip that any woman would give to anyone else. Keep track of it. If you're keeping a journal or a log of the symptoms, that's incredibly compelling, because you're providing the doctor then with very discrete data. No matter how common a symptom might seem, a symptom that is persisting or worsening, making it hard to sleep, that you find yourself taking pain medication for or being

preoccupied with, I recommend that you see a doctor. We spend our whole lives taking care of other people and worrying about other people and interpreting for other people, and we really need to just take a minute, a pause to think about what this means for us.

Narrator: You don't need to have all the answers. Talk to your doctor about any concerning symptoms. Know your normal, track changes and speak up early.

Disclaimer: This video is for educational purposes only and is not medical advice. If you have questions about your health, please consult your doctor.