PATHFINDER INTERNATIONAL

Single-Visit Approach to Cervical Cancer Prevention

Counseling Cue Cards











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Counseling Guidelines for the Single-Visit Approach

When counseling women, make sure you:

- Use language women will understand.
- **Explain** information in detail, and in a non-threatening manner.
- Ensure confidentiality.
- Allow women time to consult with family members before a recommended procedure if she wants to.
- Allow women to have someone in the room only if she provide consent
- Encourage women to ask questions and allow time for discussion.
- **Provide** additional sexual and reproductive health information and referrals if needed.
- **Always** ask and obtain a woman's consent before procedure and before sharing information.

What is the cervix?

- $_{\circ}~$ Is at the bottom end of the uterus.
- Forms a canal between the uterus and vagina.
- Must dilate (widen) for the baby to be born.
- Can be seen with naked eye using a speculum and a good light source

What is the cervix?





What is cervical cancer?

- Is a disease where the cells of the cervix become abnormal and grow without limit.
- Starts with an infection from a virus called human papillomavirus (HPV) without producing any symptoms for a long time.
- Is a serious disease that takes time to develop and can be prevented and treated if diagnosed early or before the cancer actually begins.
- Causes abnormal vaginal bleeding, foul smelling vaginal discharge, or lower abdominal pain at an advanced stage.
- Is more common in women over 40 years of age.
- Is one of the leading cause of cancer death among women.

What is cervical cancer?





Human Papillomavirus (HPV)

Normal cervix



Invasive cervical cancer

Who is at risk for developing cervical cancer?

- Every women who has had sexual intercourse is at risk of an HPV infection that may subsequently develop into cervical cancer.
- Women who are at greater risk of getting cervical cancer include those:
 - Who do not get a regular screening test.
 - Whose sexual initiation is at a young age.
 - Who have many sexual partners and/or have had sexual intercourse with a man who has had many sexual partners.
 - With a weakened immune system from HIV infection, immune suppressive illness, and drugs.
 - With a family history (mother and/or sister) who had cervical cancer.
 - Who smoke or used to smoke.

• HIV+ women:

- Are more readily infected with HPV.
- Are more vulnerable to persistent HPV infection and precancerous lesions.
- Develop precancerous lesions more rapidly.

Who is at risk for developing cervical cancer?





How to lower your risk for cervical cancer:

- Delay first sexual intercourse.
- Avoid multiple sexual partners.
- Practice safe sex by using condom.
- Seek regular cervical cancer screening and follow up.
- Quit smoking.
- Get the HPV vaccine (if available).



How to lower your risk for cervical cancer:





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What is Visual Inspection with Acetic Acid (VIA) and why is important?

- A test where the provider applies vinegar to the cervix and can identify the presence of a precancerous lesion with the naked eye due to color change.
- Identifies precancerous lesion(s) when it is still possible to treat before developing into cancer.
- Is painless, takes a short amount of time, and the results are provided immediately.
- Is available to women who are 30-45 years old.
- Provide opportunity to identify other unrecognized gynecologic problems including cancer.
- **Cervical cancer** can be easily prevented with a simple screening test called VIA and precancer treatment called cryotherapy.

What is Visual Inspection with Acetic Acid (VIA) and why is important?



How VIA test is performed:

The VIA test involves the following steps:

Step 1: I will inspect and palpate the abdomen and the external genitalia.

Step 2: I will use a simple instrument (speculum) to open your vagina to allow me to see the cervix clearly. You may feel slight pressure from the speculum.

Step 3: Once I can see your cervix clearly, I will apply water-like solution (vinegar) to it to allow me to see if it is healthy. The vinegar may feel cold when it is applied.

Step 4: I will remove the instrument (speculum) and then we will discuss the results of the VIA test.

How VIA test is performed:







Speculum for pelvic examination and VIA testing

What are the expected VIA test results?

• VIA negative means:

- There are no visible precancerous lesion(s) found in your cervix.
- It is unlikely that you will develop cervical cancer within the next 5 years.
- No treatment is needed.

• VIA positive means:

- The test shows a precancerous lesion(s).
- The lesion(s) can be treated easily and immediately with cryotherapy (in most cases). If the lesion is too big (rare cases), we will refer you to other alternative treatment.
- To be VIA+ does not mean you have cancer it indicates a precancerous condition.

• Suspicious for cancer means:

Provider – in rare cases the test may show conditions that are suspicious for cancer.

- You can't be treated with cryotherapy.
- I suggest seeking further evaluation to confirm the diagnosis and get appropriate treatment as early as possible.
- I am going to offer you a referral so you can receive the appropriate care.

What are the expected VIA test results?



VIA negative



VIA positive

Suspicious for cervical cancer



Post VIA counseling following a negative VIA test result

- There are no visible precancerous lesion(s) found in your cervix.
- It is unlikely that you will develop cervical cancer within the next five years.
- No treatment is needed.
- To continue to prevent getting cervical cancer in the future you need to do similar testing every five years.
- You may come back to this clinic any time when you need advice or services.
- You can visit any health facility or provider for additional services, such as other gynecological problems and/or family planning.
- Do you have any questions?

Provider – give client an appointment card for follow-up visit in 5 years.



Post VIA counseling following a positive VIA test result

Pre-cryotherapy counseling for eligible women:

- Your VIA test showed abnormal cervical tissue which can be removed with a procedure called cryotherapy.
- Cryotherapy is a safe procedure with limited pain and few side effects.
- Cryotherapy removes abnormal cervical tissue from the cervix. Once they are removed, new and healthy cells grow back.

Likelihood of success:

 One cryotherapy session successfully treats 90 out of 100 women with precancerous lesions. This means that 10 out of 100 treated women may need to be re-treated with cryotherapy or received additional treatments.

What to expect while the cryotherapy is being conducted:

- You will feel a cold sensation in the vagina and sometimes lower abdominal pain. It takes less than 30 minutes.
- There is no need for anesthesia or any other medication before the procedure.
- During the cryotherapy, you will hear a hissing noise, but it is nothing to worry about.
- Cryotherapy only involves removing abnormal cervical tissue. It will not be used for treatment or removal of any other internal or external female genitalia.

What to expect after cryotherapy:

- You should expect to have watery vaginal discharge that could last for 4-6 weeks.
- You may or may not have lower abdominal-cramping and spotting/light bleeding.
- You are strongly advised to avoid sexual intercourse for about 4 weeks. If this is not possible you will need to use a condom.
- You will need to return to the clinic after one year to be re-tested to verify that the treatment has been effective.
- Do you have any questions?

Are you willing to have cryotherapy? If yes, please sign a consent form.

Cryotherapy (for eligible women):



Pre-treatment



Immediately after treatment



4 months after treatment

Post-cryotherapy counseling:

- You should expect to have watery vaginal discharge that could last for 4-6 weeks;
- You may or may not have lower abdominal-cramping; and
- You may or may not have spotting/light bleeding.

Details for self-care at home:

- It is essential that you abstain from sexual intercourse for 4 weeks following treatment. (If total abstinence is not possible, we will supply you with condoms).
- Abstinence will allow proper healing after cryotherapy treatment and reduce transmission of HIV (including other types or resistant strains of the virus for HIV+ women).
- Avoid internal douching and use of vaginal tampons.
- o If you experience mild pain, you can take any analgesics (pain killers).

Return to the clinic to seek care as soon as possible if you experience the following:

- Fever for more than two days.
- Severe lower abdominal pain, especially if accompanied by fever.
- Bleeding for more than 2 days that is heavier than your heaviest days of menstrual bleeding.
- Bleeding with clots.
- Foul smelling vaginal discharge.

Next scheduled visit and post-cryotherapy pre-packaged set:

- Provide the woman with her next scheduled visit date (1-year after cryotherapy)
- Provide a post-cryotherapy pre-packaged set.

Post-cryotherapy counseling:







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