



# gyno•info

CANCER SCARE • PEE PROBLEM • NIPPLE BUMPS

## DID THE #1 STI JUST GET DEADLIER?

We unpack troubling new stats about a dangerous—but preventable—disease.

BY KRISSY BRADY

**MAYBE YOU SAW** the doomsday headlines: Fatality rates for cervical cancer are twice as high as previously estimated. Black women are now 76 percent more likely to die of it, and women from other racial groups have more than 45 percent higher odds. Meanwhile, diagnoses of precancerous cervical lesions—i.e., abnormal cells that can lead to cancer—among women ages 21 to 25 are up nearly 10 percent. *What?!* How did this barely-talked-about condition become such a killer overnight?

The truth: It hasn't—not really. It turns out that old fatality studies were based on flawed data, and while these new stats sound way scary, they still reflect a relatively small number of people (cervical cancer kills 10 in 100,000 black women every year and nearly 5 in 100,000 white women).



Meanwhile, more young women are being diagnosed because, under the Affordable Care Act, testing became more accessible.

The earlier it's caught, the better: Cervical cancer is seldom deadly if precancerous cells are ID'd during a Pap smear and treated. In fact, screenings and vaccinations, which can prevent 93 percent of all cases, have made the disease relatively rare in America (about 13,000 full-blown cases each year versus 250,000 breast-cancer diagnoses).

So: sigh of relief. But you still can't let your guard all the way down. Black women remain at higher risk, which researchers attribute to poorer access to health care. And all sexually active women should stay vigilant, since cervical cancer is virtually always caused by human papillomavirus (HPV)—the most common STI in the U.S. (An estimated 79 million Americans are currently infected.) Here, your action plan for staying safe.

### Use Condoms

Of the 150 or so different strains of HPV, around 15 are linked to cervical cancer, says Mario Pineda, MD, a gynecologic oncologist at Northwestern Memorial Hospital in Chicago. One report found that 20 percent of women and 25 percent of men ages 18 to 59 are currently infected with high-risk types.

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SOURCE: RICE  
UNIVERSITY, 2017

Since HPV is transmitted primarily through skin-to-skin contact, you can lower your risk by always using condoms.

### Consider the Vaccine

The HPV vaccine protects against the virus strains that cause 90 percent of cervical cancers, says Tina Raine-Bennett, MD, an ob-gyn at Kaiser Permanente in Oakland, California. Yet almost 40 percent of women under age 26 are going without it (most insurers don't cover the shots for women older than 26). Some understandably fear side effects. But experts say the most commonly reported ones are soreness or swelling at the injection site. Of the 90 million HPV vaccines administered in the U.S. in the last decade, only 0.003 percent have resulted in more adverse reactions.

### Get Tested

More than 50 percent of new cases strike women who've never or rarely been tested. But since cervical cancer grows slowly, regular Pap smears can catch it early, when the lesions can be easily removed. Women should get a Pap every three years in their 20s and every three to five years after age 30 (along with an HPV test, another swab screening that aids in early detection), unless your doc says otherwise, according to Dr. Pineda. ■



## URINE TROUBLE

If your leggings get a little, uh, moist during your workout—and it's not just sweat—you may have stress urinary incontinence (SUI). Even if you've never pushed a human out of your vagina, frequently straining to poop or even sucking in your stomach can lead to leakage, says Evelyn Hecht, president of EMH Physical Therapy, in New York City. So can loads of exercise. In one study, up to 80 percent of athletes who've never given birth had SUI while playing high-impact sports. Luckily, you can retrain your body to hold it in. In addition to kegels (squeezing your down-there muscles), Hecht recommends squats, bridges (lie on your back with knees bent and feet flat, raise and lower your hips), and hip adductors (place a soft, medium-size ball between your knees and squeeze knees together). At least 2 sets of 10 reps of each exercise three times a week should keep your Spandex dry.

—HELEN ZOOK



Ask  
Dr.  
Ashton

I have bumps on my areolae. Is that normal?

That depends on what you mean by *bumps*. Your areolae have glands underneath them, which can produce soft, raised nodules known as Morgagni tubercles around the edges of the nipple. Those are totally normal. But an isolated bump on your nipple could be a pimple or blocked hair follicle, both of which are a type of infection. Ask yourself: *Is the bump new? Is it red or painful?* If the answer is yes, you should get it checked out.

SOURCE: JENNIFER ASHTON, MD, OB-GYN AND ABC NEWS CHIEF WOMEN'S HEALTH CORRESPONDENT