

Cervical Cancer: Understanding Its Causes, Risk Factors, and Preventive Measures

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Abstract

Cervical cancer is a form of cancer that begins in the cervix, the lower portion of the uterus, due to abnormal cell growth that can spread or invade other areas of the body. In its early stages, cervical cancer usually shows no obvious symptoms, which is why regular screenings are essential for detecting it early. As the cancer advances, symptoms such as pelvic pain, unusual vaginal bleeding, and pain during intercourse may occur. While bleeding after sex is not always a serious concern, it can be a sign of cervical cancer. The main cause of cervical cancer is a persistent infection with specific strains of Human Papillomavirus (HPV), especially types 16 and 18, which account for about 70% of cervical cancer cases worldwide. However, not everyone with HPV will develop cervical cancer, as the infection is common and usually clears up on its own. In addition to HPV, various other risk factors contribute to cervical cancer, such as smoking, a compromised immune system, the use of birth control pills, having multiple sexual partners, and early sexual activity. Genetic factors can also increase the likelihood of developing the disease. Cervical intraepithelial neoplasia (CIN), a precancerous condition, typically develops over a period of 10 to 20 years before cervical cancer can occur. Squamous cell carcinomas account for approximately 90% of cervical cancer cases, while adenocarcinomas represent around 10%, with other types being rare. Early detection through screening and vaccination against HPV is key to preventing the onset of cervical cancer, as these measures can help reduce the impact of high-risk HPV types responsible for the majority of cases.

Keywords: Cervical cancer, human papillomavirus (HPV), squamous cell carcinoma, cervical intraepithelial neoplasia (CIN), risk factors

INTRODUCTION

Cervical cancer begins in the cervix, the narrow, lower section of the uterus that links the uterus to the vagina. Cervical cancer typically develops slowly due to abnormal cell growth in the cervix. Before cancer forms, the cervical cells undergo a stage called dysplasia, where abnormal cells are present in the cervical tissue. If these abnormal cells are left untreated or not removed, they can eventually turn cancerous, spreading to the cervix and nearby areas [1].

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The cervix is made up of two primary parts: the ectocervix, which is the outer portion visible during a gynecological exam, and the endocervix, the inner section that connects to the uterus and is lined with glandular cells that secrete mucus. The region where the ectocervix and endocervix meet, called the squamocolumnar junction or transformation zone, is the most common site where cervical cancers develop [2].

REVIEW OF LITERATURE

Cervical cancer can be challenging to identify in its early stages because symptoms typically do not

emerge right away. In the initial stage (stage I), possible signs may include watery or bloody vaginal discharge, which could be heavy and have a foul odor. Additionally, abnormal bleeding, such as bleeding after sexual intercourse or between menstrual cycles, may occur. However, it is essential to note that these symptoms are not always a sign of cancer, as they can also be linked to other conditions [3].

Risk factors for cervical cancer involve various lifestyle choices, infections, and genetic elements. A significant risk factor for cervical cancer is infection with high-risk strains of Human Papillomavirus (HPV), which is responsible for nearly all cases of the disease. Other contributing factors include early sexual activity, having multiple sexual partners, smoking, and a compromised immune system, such as in individuals with HIV. Regular Pap tests are essential for detecting precancerous changes in cervical cells before they progress to cancer. Early detection is important, as it typically takes 3 to 7 years for precancerous changes to develop into cancer [4].

Cervical cancer is usually diagnosed through routine screenings, such as Pap tests and HPV tests. If abnormalities are detected, further testing like colposcopy, punch biopsy, or endocervical curettage may be required to confirm the diagnosis. These procedures allow healthcare professionals to obtain tissue samples from the cervix for additional analysis.

STAGES OF CERVICAL CANCER

Cervical cancer is classified into two stages, each indicating the extent of the cancer's spread:

- *Stage I:* The cancer is confined to the cervix and has not spread to deeper tissues.
- *Stage II:* The cancer has spread beyond the cervix to the upper vagina or nearby tissues, but has not yet reached the pelvic walls.

These stages are essential for guiding treatment decisions and predicting the prognosis for patients with cervical cancer. Early detection is vital for better treatment success and higher survival rates. Regular screenings, HPV vaccination, and understanding risk factors are essential measures for reducing cervical cancer incidence and improving early diagnosis [5].

MANAGEMENT AND TREATMENT OF CERVICAL CANCER

Cervical cancer treatment involves a collaborative approach, with a gynecologic oncologist playing a key role in overseeing care. Treatment choices depend on factors like the stage of cancer, the patient's age and overall health, and their desire to maintain fertility. Treatment options include radiation therapy, chemotherapy, surgery, immunotherapy, and targeted therapy. In certain cases, patients may also have the opportunity to join clinical trials that test innovative and experimental treatments. It is crucial to discuss these options with an oncologist to determine the most suitable treatment plan for each person. [6].

Radiation Therapy

Radiation therapy is a common treatment for cervical cancer, utilizing energy beams to target and destroy cancer cells. There are two main types of radiation therapies used for cervical cancer treatment:

- *External beam radiation therapy (EBRT):* This method uses an external machine to deliver high-energy radiation directly to the tumor.
- *Brachytherapy:* This technique involves placing radiation directly at or near the cancer site, allowing for a more targeted treatment.

Both methods aim to reduce or eliminate tumors and are often combined with other treatments, depending on the cancer's stage and location.

Chemotherapy

Chemotherapy involves the use of strong medications to kill cancer cells. These drugs can be taken orally or injected intravenously, allowing them to enter the bloodstream and target cancer cells throughout the body. Typically, chemotherapy consists of a combination of drugs given in cycles, with

each cycle following a specific schedule depending on the cancer's location and the prescribed medications. The primary objective is to eliminate any cancer cells that may have spread beyond the cervix.

Surgery

Surgical treatments for cervical cancer differ based on the stage and location of the cancer. For early-stage cancers, less invasive procedures may be used to remove only the cancerous tissue, while more extensive surgery may be necessary for advanced stages. Common surgical procedures include:

- *Laser surgery*: Uses a focused laser beam to burn off cancerous tissue.
- *Cryosurgery*: Freezes and destroys cancer cells.
- *Hysterectomy*: Involves the removal of both the uterus and cervix, typically used for more advanced cases.
- *Trachelectomy*: A surgical procedure that removes the cervix and the upper portion of the vagina while preserving the uterus for patients who want to retain their fertility.
- *Pelvic exenteration*: A more extensive procedure that involves removing the uterus, cervix, bladder, rectum, and part of the colon, typically reserved for advanced cancer.

Immunotherapy

Immunotherapy is an emerging treatment method that boosts the body's immune system to recognize and eliminate cancer cells. Cancer cells often avoid detection by mimicking healthy cells, but immunotherapy helps the immune system recognize and eliminate these abnormal cells. By blocking cancer cells' ability to disguise themselves, immunotherapy provides a powerful tool in the fight against cervical cancer, particularly in cases that do not respond to traditional treatments.

CAN CERVICAL CANCER BE COMPLETELY CURED?

Cervical cancer can be fully cured, particularly when identified in its early stages. Timely detection and swift treatment greatly enhance the likelihood of a successful outcome. When cervical cancer is treated effectively, it may go into *remission*, meaning the cancer has disappeared from the body. However, even after remission, there is still a possibility of the cancer returning, so continued monitoring is essential.

Prevention of Cervical Cancer

There are several steps you can take to lower the risk of developing cervical cancer:

1. *Get regular pap smears*: Routine Pap tests are essential for identifying abnormal cells before they turn into cancer. Regular gynecological check-ups are also important.
2. *HPV vaccination*: The HPV vaccine is recommended for eligible individuals. Since HPV infection is a primary cause of cervical cancer, vaccination can greatly reduce the risk.
3. *Practice safe sex*: Using condoms or other barrier methods during sexual activity can help reduce the risk of contracting HPV, which plays a role in the development of cervical cancer.
4. *Limit sexual partners*: Reducing the number of sexual partners decreases the chances of exposure to HPV.
5. *Quit smoking*: Smoking is a significant risk factor for cervical cancer. Stopping smoking or avoiding tobacco products can greatly lower the risk of developing the disease.

Survival Rates for Cervical Cancer

Cervical cancer survival rates are influenced by the stage at which the cancer is diagnosed and whether it has spread to other parts of the body. According to the National Cancer Institute, the following 5-year relative survival rates are reported for cervical cancer:

- *91% survival rate*: If the cancer has not spread beyond the cervix, the 5-year relative survival rate is 91%. Early-stage diagnosis accounts for nearly half of all cervical cancer cases.
- *60% survival rate*: If the cancer has spread to adjacent tissues, the survival rate decreases to approximately 60%.
- *19% survival rate*: If the cancer has spread to lymph nodes and other distant organs, the survival rate decreases to about 19%.

It is essential to keep in mind that these statistics are general estimates, and individual results may differ. Early detection, treatment, and continuous medical care play a key role in improving survival rates for those diagnosed with cervical cancer.

DISCUSSION

Cervical cancer is one of the most preventable cancers, yet it remains a significant public health concern worldwide. The primary cause of cervical cancer is a long-lasting infection with high-risk strains of human papillomavirus (HPV), especially types 16 and 18, which are linked to the majority of cervical cancer cases. This virus is transmitted through sexual contact, and although many HPV infections are short-lived and go away on their own, long-lasting infections can lead to changes in cervical cells, eventually resulting in cancer [7].

The risk factors for cervical cancer are diverse and stem from a combination of different elements. Infections like HIV, which weakens the immune system, also elevate the risk, as the body's ability to clear HPV infections is compromised. Additionally, socioeconomic factors, including limited access to healthcare and poor education regarding preventive measures, contribute significantly to the incidence of cervical cancer, especially in low-resource settings [8].

In recent years, there have been notable improvements in cervical cancer prevention strategies. The HPV vaccine is considered one of the most effective ways to prevent cervical cancer, as it protects against the high-risk strains of the virus that are most likely to cause cancer, significantly reducing the risk. In addition to vaccination, regular cervical screenings through Pap smears or HPV testing are crucial for the early detection of precancerous changes. Early identification enables prompt treatment, greatly decreasing the risk of illness and death from cervical cancer [9].

Despite the availability of preventive measures, there are still obstacles to effective prevention, especially in developing countries. In many areas, access to the HPV vaccine and routine screening programs is limited due to financial, cultural, and logistical barriers. Additionally, public awareness about the importance of vaccination and regular screenings is often insufficient. To overcome these challenges, efforts should focus on educating people about the risks of cervical cancer, increasing access to vaccines and screening services, and strengthening healthcare infrastructure [10].

CONCLUSION

Cervical cancer continues to be a major cause of cancer-related deaths in women globally, but notable advancements have been achieved in its prevention and early detection. Despite these advances, cervical cancer incidence remains high in many parts of the world, especially in low-income and middle-income countries, where access to preventive healthcare is often limited.

The implementation of universal HPV vaccination programs and the widespread availability of cervical cancer screening are essential to reduce the burden of this disease globally. Effective prevention strategies rely heavily on public health campaigns that raise awareness about the advantages of vaccination and the importance of regular screenings. Additionally, addressing healthcare disparities by improving access to preventive services, particularly in underserved areas, will be crucial in reducing cervical cancer-related morbidity and mortality.

In conclusion, while cervical cancer is a preventable and treatable disease, the global fight against it requires continued efforts in education, vaccination, screening, and access to healthcare. The partnership between governments, healthcare providers, and communities is crucial to making sure every woman has access to the resources and information necessary for preventing and early detection of cervical cancer. With sustained investment in prevention and early detection strategies, the global incidence of cervical cancer can be significantly reduced, saving millions of lives.

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