



New Zealand

Gynaecological Cancer Foundation®



Gynaecological Cancers

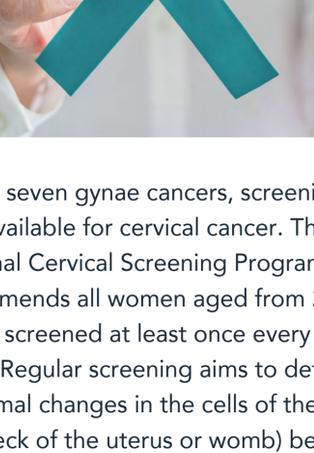
The Silent Killers

Somewhere in New Zealand today, someone will die from a gynaecological cancer.

Yet for generations of New Zealand women, and their partners, being aware of the cancers that may be forming “down there” is difficult, confronting and too often ignored.

They are this country’s silent killers. We seldom talk about them.

The New Zealand Gynaecological Cancer Foundation was formed over fifteen years ago with the aim of bringing awareness of those cancers “down there” more to the forefront of women’s lives, and ensuring women know that while some of these cancers are very treatable, sadly some are not. Therefore, the need for self-monitoring and personal vigilance is vital.

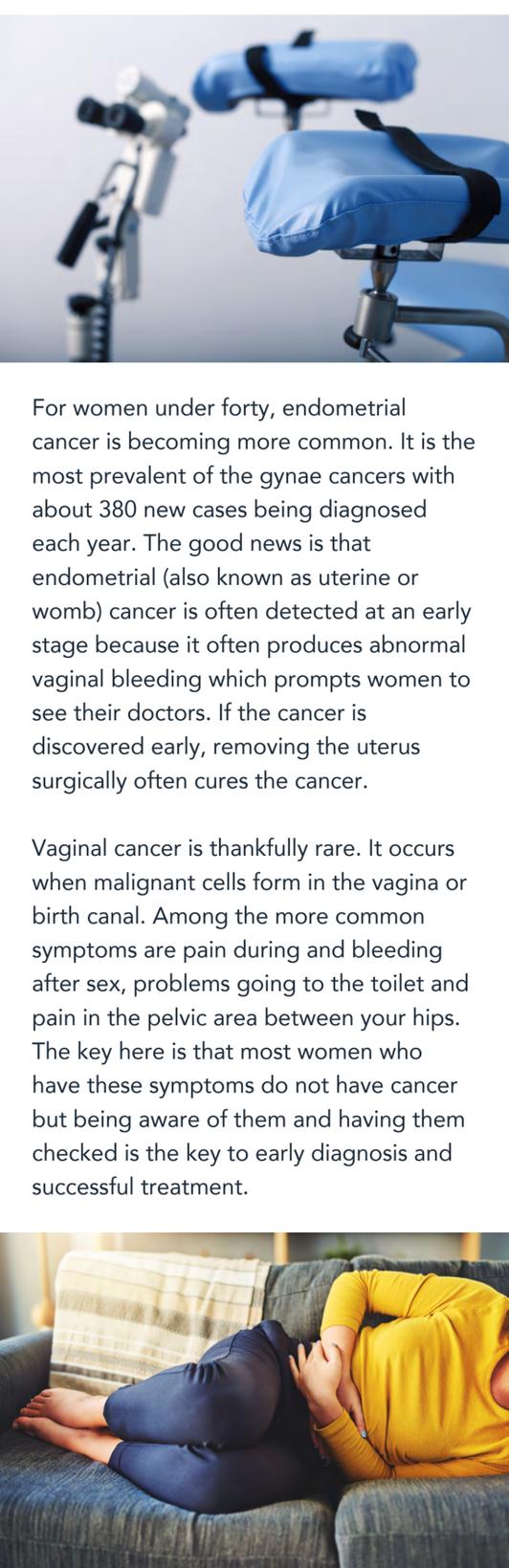


So, the best weapon in the battle against them is, and always has been, early diagnosis and early recognition of the symptoms.

There are seven gynaecological cancers:

- Cervical
- Ovarian
- Endometrial, also known as uterine or womb
- Vaginal
- Vulval
- Gestational Trophoblastic Disease (GTD)
- Primary Peritoneal Cancer (PPC)

Sadly, these cancers as a group have some of the worst outcomes for women and that is why recognizing symptoms early, and seeking professional help is key to the early diagnosis.

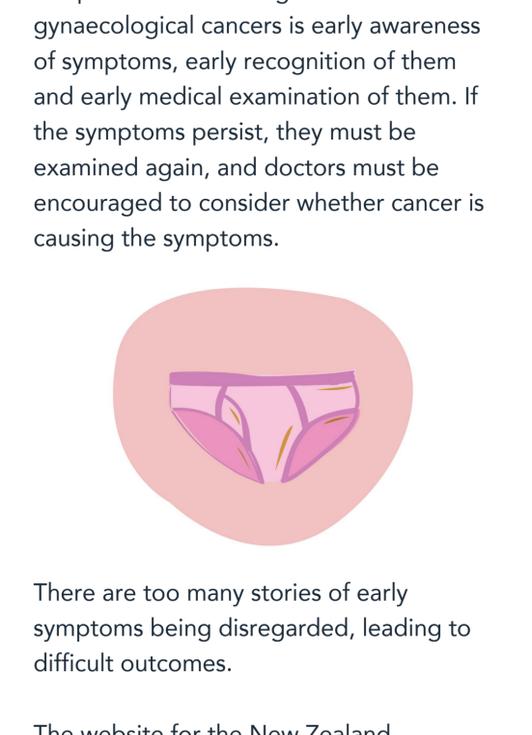


Of the seven gynae cancers, screening is only available for cervical cancer. The National Cervical Screening Programme recommends all women aged from 25 to 69 are screened at least once every three years. Regular screening aims to detect abnormal changes in the cells of the cervix (the neck of the uterus or womb) before the cells can develop into cancer. Most of the women who develop cervical cancer have either never been screened or have been screened infrequently. The HPV (human papilloma virus) vaccine does protect against some forms of cervical cancer, but even those vaccinated women should still have regular testing.

For women under forty, endometrial cancer is becoming more common. It is the most prevalent of the gynae cancers with about 380 new cases being diagnosed each year.

Since the National Screening Programme started, the number of women who die of the disease has dropped by nearly two thirds but sadly we still lose about one New Zealand woman to the illness each week.

The most serious gynae disease is ovarian cancer. Unfortunately, one woman dies due to this specific cancer every two days, yet many women with a very early stage of ovarian cancer often don’t have any symptoms at all. But women who notice abdominal bloating, a change in appetite and eating habits, a more frequent need to go the toilet or a general tiredness or lack of energy may be experiencing early signs of ovarian cancer. If this is the case, medical examination is highly recommended and if the symptoms continue, women should insist on ovarian cancer being considered as a reason.



For women under forty, endometrial cancer is becoming more common. It is the most prevalent of the gynae cancers with about 380 new cases being diagnosed each year. The good news is that endometrial (also known as uterine or womb) cancer is often detected at an early stage because it often produces abnormal vaginal bleeding which prompts women to see their doctors. If the cancer is discovered early, removing the uterus surgically often cures the cancer.

Vaginal cancer is thankfully rare. It occurs when malignant cells form in the vagina or birth canal. Among the more common symptoms are pain during and bleeding after sex, problems going to the toilet and pain in the pelvic area between your hips. The key here is that most women who have these symptoms do not have cancer but being aware of them and having them checked is the key to early diagnosis and successful treatment.

The most common cause of vulval cancer, a skin cancer which develops around the opening of a woman’s vagina, is infection with the HPV. This virus is a common sexually transmitted infection that causes most cases of cervical cancer and is responsible for about half of vulval cancers.

Using condoms can help the spread of HPV but the best way to prevent the infection is to be immunized against it before you become sexually active. A vaccine is available for both boys and girls in New Zealand.

Usually vulval cancer starts in one small localized area and if diagnosed early, it can be removed before it spreads to other parts of the body. Some symptoms like a lasting itch or irritation on the skin of the vulva or an open sore or growth such as a mole which is visible on the skin.

It cannot be stressed enough that the best weapon in the battle against gynaecological cancers is early awareness of symptoms, early recognition of them and early medical examination of them.

There are two other diseases which are now included in the group known as gynaecological cancers. They are Gestational Trophoblastic Disease and Primary Peritoneal Cancer. They are shortened to GTD and PPC.

GTD involves an unusual growth of uterine cells that would normally form the placenta during a healthy pregnancy. It is highly treatable and women with GTD can still have a regular pregnancy.

PPC is a close relative of epithelial ovarian cancer. It is relatively rare, the cause is unknown, but it is possible to have PPC even if ovaries have been removed.

It cannot be stressed enough that the best weapon in the battle against gynaecological cancers is early awareness of symptoms, early recognition of them and early medical examination of them. If the symptoms persist, they must be examined again, and doctors must be encouraged to consider whether cancer is causing the symptoms.



There are too many stories of early symptoms being disregarded, leading to difficult outcomes.

The website for the New Zealand Gynaecological Cancer Foundation (nzgcf.org.nz) offers a myriad of information about symptoms, awareness, screening and more comprehensive information about what and where you can get help if you think you, or a friend, may be susceptible to a gynaecological cancer.

Remember these are the silent killers. But some are treatable, and screening is available for cervical cancer.

Awareness of the symptoms is key. There can be no better advice if you think something is wrong “down there” then **SEE YOUR DOCTOR**

