

Harper's BAZAAR

Health
News

The Tests That Can Save Your Life

Women's cancers are often curable if CAUGHT EARLY.
Read on to find out how to make sure you're being properly screened. By Sari Botton

In the grand scheme of things, actress and uterine-cancer survivor Fran Drescher was lucky. Even though it took two agonizing years and eight doctors to determine that her crampy midcycle spotting and assorted aches and pains weren't just signs of perimenopause, she was fortunate enough to be diagnosed at stage one. Better yet, seven years after her hysterectomy, she remains cancer free. Now, through her non-profit organization, Cancer Schmancer (cancerschmancer.org), she's on a mission to educate women about the importance of asking for the tests that can lead to early detection. "We have to become more proactive," Drescher says, "so that all women's cancers can be diagnosed in stage one—and cured." Beth Y. Karlan, a gynecologic oncologist and director of the Women's Cancer Research Institute at Cedars-Sinai Medical Center in Los Angeles, adds, "Most cancers, if found early, *can* be cured. For stage-one cancers, there's about a 90 percent survival rate of five years or more."

First: Get Your Doctor's Attention "When you go to the gynecologist now, they only examine 30 percent of the plumbing," says Drescher. "There's nothing north of the cervix that gets checked. It's as if you went to the dentist and they looked at only a third of your teeth." If you're at risk genetically or have symptoms, tell your doctor and ask whether you need one or more of the following tests. These are the most up-to-date initial screening and diagnostic tools for ovarian, cervical, breast, and uterine cancer. "The most important thing is to arm yourself with information," says Vicki Seltzer, chairman of obstetrics and gynecology at New York's Long Island Jewish Medical Center and North Shore University Hospital. "You want to say, 'How do you *know* I don't have cancer? That I don't need more tests?'"

The Newest Tests to Know About

• **Transvaginal ultrasound:** For women who have symptoms associated with ovarian or uterine cancer and those with an inherited predisposition. An ultrasonic wand is placed inside the vagina to see the ovaries and uterus. Some women's-health lobbyists, including

Drescher, believe this should be part of every woman's annual checkup, as it is a quick and painless way to screen for cancer.

• **Endometrial biopsy:** If you have abnormal bleeding or a predisposition for uterine cancer, a small sample of the lining of your uterus is taken to examine for abnormal cells.

• **Human papilloma virus (HPV) test:** If you've had an abnormal Pap and you're over 30, this test checks a sample of your cervical cells for HPV, which can lead to cervical cancer.

• **BRCA1 and BRCA2 blood test:** If there is breast, ovarian, and/or fallopian-tube cancer in your family, this test may be used to pick up inherited gene mutations associated with breast and ovarian cancer.

• **CA 125 blood test:** If you're symptomatic or predisposed to ovarian or uterine cancer, this checks for elevated or rising levels of the CA 125 protein, which could indicate a tumor.

• **Breast MRI and ultrasound:** "Women at very high risk for breast cancer should discuss having one or both of these annually in addition to a mammogram," Seltzer says. Also advised for women with dense breast tissue.

How to Know If You Need These Tests

• **You've noticed changes in your body.** Some discomforts that can be signs of ovarian cancer include bloating, pain in the pelvic or abdominal areas, difficulty eating or feeling full quickly, and frequent urination. If you have any of these symptoms (or others), say something. "If you have irregular bleeding or postmenopausal bleeding, talk to your doctor," says Noah D. Kauff, a clinical geneticist and gynecologic surgeon at Memorial Sloan-Kettering Cancer Center in New York City.

• **You have a family history of cancer.** A major determinant for risk is inherited predisposition. "Communicate your family history to your doctor," Karlan says. "You need information on your parents, grandparents, siblings, aunts, uncles, and cousins." Having any blood relative who has had cancer indicates that you could be at higher-than-average risk.

Tests You Should Be Doing Already

• **Breast self-exam:** All women need to do this monthly, one week after their period ends.

• **Mammogram:** Women of average risk should start at 40 and repeat annually.

• **Bimanual pelvic and rectovaginal exams:** At your annual checkup, the doctor feels inside your vagina and rectum for abnormalities.

• **Pap test (a.k.a. cervical cytology):** Performed annually, unless there are abnormal results—then every six months. ■