

# Course Summary

## BC Cancer Primary Care Learning Sessions: Cervical Cancer

### **Lesson 1: Prevention & Screening**

- Cervical Cancer is preventable through appropriate HPV immunization, screening and treatment of identified lesions
- HPV is the leading cause of cancer of the cervix. Screening for HPV is an effective first step to identifying cervical cancer in asymptomatic patients
- Providers should be aware of systemic and personal barriers that can impact patients' participation in screening programs. Self-screening options serve to reduce some of these barriers and represent an opportunity to increase access to care for patients across BC and has shown to be as effective as provider-collected samples
- Primary Care Providers play a vital role in educating patients on HPV and cervical cancer, and in recommending prevention, screening, and follow-up strategies, keeping in mind each patient's unique experience with healthcare enablers and barriers

### **Lesson 2: Diagnosis & Treatment**

- Patients presenting with signs and symptoms should be investigated/managed following best practices, including a speculum examination for collection of an LBC sample for co-testing (HPV and cytology).
- If any suspicious abnormalities are found on speculum examination, initiate an urgent referral for colposcopy without waiting for co-test results.
- The role of primary care practitioners in providing continuity of care to their patients in all settings, both directly and by coordination of care with other health care professionals, reduces the fragmentation of care and thus improves patient safety and the overall quality of care.
- Patients with a potentially life-limiting disease or illness may benefit from a palliative approach to care including advance care plan (ACP) that incorporates the patient's values and personal goals, indicates potential outcomes, and identifies linkages with other health care professionals that would be involved in the care, as well as their expected roles.
- While waiting to see the oncologist about further cancer management, early referral to a fertility clinic to discuss fertility preservation by the PCP should be considered. This can help avoid treatment delays.

### **Lesson 3: Survivorship, Surveillance & Late Effects**

- Survivorship care is a fundamental component of post-treatment care. Primary care practitioners provide an essential role for the continuity of patient care in all settings, both directly and through the coordination of care with other health care professionals, reducing the fragmentation of care, improves patient safety, and enhances the overall quality of patient care.
- Cancer surveillance after patients have received curative intent treatment for their cervical cancer should reflect the risk of recurrence. Practitioners should use clinical judgement and consider co-morbid conditions and patients' goals of care to evaluate the benefits of surveillance in patients who are unlikely to benefit from additional therapy.
- Life after cervical cancer entails patients returning to some familiar aspects of life, but they may require support from their primary care provider to make new choices including lifestyle changes (nutrition, activity, weight management, smoking cessation, alcohol, etc.)
- Treatment of cervical cancer can have an impact on many wellness aspects for patients, including monitoring for bone health, concerns needing conversations on hormone replacement therapy and the impact on sexual health and fertility.
- Late effects following treatment can include post-surgical concerns, cardiotoxicity, peripheral neuropathy and cognitive function impact resulting from chemotherapy.