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INSPIRING HEALTH



**BREAST CANCER
& CERVICAL CANCER
SCREENING**

BREAST Cancer

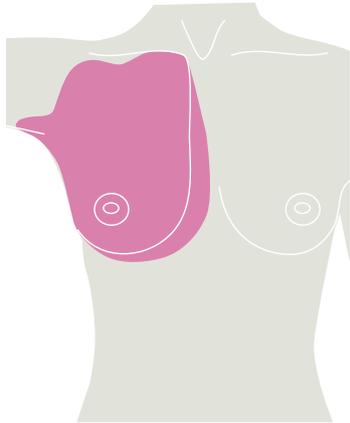
SCREENING

WHAT IS BREAST CANCER?

Breast cancer starts when cells in the breast begin to grow in an uncontrolled way and build up to form a lump (also known as a tumour). As the cancer grows, cells can spread to other parts of the body and this can be life-threatening.

Breast cancer is the most common type of cancer. Survival from the disease has been improving over time, and now about 3 out of 4 women diagnosed with breast cancer are alive 10 years later.

Breast cancer can develop in the breast, the armpit or the upper chest.



Screening helps us find breast cancers at an early stage when they are too small to see or feel. Screening does not prevent you from getting breast cancer. Breast screening picks up most breast cancers, but it misses breast cancer in about 1 in 2,500 women screened.

Some women who have screening will be diagnosed and treated for breast cancer that would never otherwise have been found, or caused them harm.

Breast screening does have some risks. Having mammograms every 3 years for 20 years very slightly increases the chance of getting cancer over a woman's lifetime.

SYMPTOMS

If you get to know how your breasts normally look and feel you will be more likely to spot any changes that could be signs of breast cancer. This is important even if you've had breast screening. **Look out for the following:**

- A lump or thickening in the breast.
- A change in the nipple. The nipple might be pulled back into the breast, or change shape. You might have a rash that makes the nipple look red and scaly, or have blood or another fluid coming from the nipple.
- A change in how the breast feels or looks. It may feel heavy, warm or uneven, or the skin may look dimpled. The size and shape of the breast may change.
- Pain or discomfort in the breast or armpit.
- A swelling or lump in the armpit.

If you have any change to your breast, you should make an appointment to see your Medical Practitioner straight away. You may not have cancer. But if you do, being diagnosed and treated at an early stage may mean that you are more likely to survive breast cancer.

RISK

The risk of getting breast cancer goes up as you get older. About 4 out of 5 breast cancers are found in women over 50 years old. Most women with breast cancer do not have a family history of the disease.

TESTS

The doctor will perform a physical breast exam and schedule for either an ultrasound or mammogram and a pap smear. Should you choose the optional vaccine, this will be administered by our nurse.

YOUR TESTS EXPLAINED

Breast Screening:

Your doctor will perform a breast exam on you and they will teach you how to do it yourself at home. Vigilance of any bumps or lumps, any discharge or any breast changes will help identify any breast disease early enough.

The doctor will then schedule you for either an ultrasound (under 40s) or a mammogram (over 40s).

Ultrasound

A breast ultrasound uses high frequency sound to obtain images of your breasts and helps assess for pathology.

Mammogram

A mammogram screening is a non-invasive imaging test that uses a low-dose x-ray system to see inside the breasts. It aids in the early detection and diagnosis of breast cancer.

Sometimes technical problems mean that the mammogram is not clear enough to read. If this happens, you will be asked to have another mammogram to get a clearer picture of your breast.

At your appointment:

- The nurse or doctor will ask you about any breast problems that you have had. If you have any questions, please ask.
- If you are having an ultrasound or mammogram the radiographer will explain what will happen.
- The whole appointment takes less than half an hour and the ultrasound or mammogram only takes a few minutes.

TEST RESULTS AND FOLLOW-UP

These tests and examination combined will help the doctor assess the health of your breasts.

Most women will receive a normal result. In about 96 out of every 100 women screened the ultrasound or mammogram will show no sign of cancer. Remember that cancer can still develop between screening tests, so tell your Medical Practitioner straight away if you notice any breast changes. Some women will need more tests because they have an

abnormal result. About 4 in every 100 women are asked to come back for more tests after screening. Out of these 4 women, 1 will be found to have cancer. The rest will not have cancer and will go back to having screening every 3 years.

If you are called back for more tests, you may have another breast examination, more ultrasound scans or more mammograms. You may also have a biopsy, which is when a small sample is taken from your breast with a needle to be checked under a microscope. You will usually get your results within a week.

If you are found to have breast cancer, you will be referred to a team of breast cancer specialists who will offer you treatment. The treatment is likely to include surgery (which may mean a mastectomy), hormone therapy, radiotherapy and possibly chemotherapy as well. These treatments can cause serious, long-term side effects.

PREPARATION FOR YOUR VISIT

General Instructions:

- Please let the nurse or doctor know if you have breast implants. You will usually be able to have an ultrasound or mammogram but please let the screening staff know beforehand.
- Please let the nurse or doctor know if you have had a mammogram recently, or are pregnant or breastfeeding as you may be advised to delay breast screening.
- Please bring along your ID cards or passport and arrive 10 minutes before the scheduled appointment time.
- If you have a pre-existing medical condition, please bring along any previous test results or reports you have for the doctor to review.

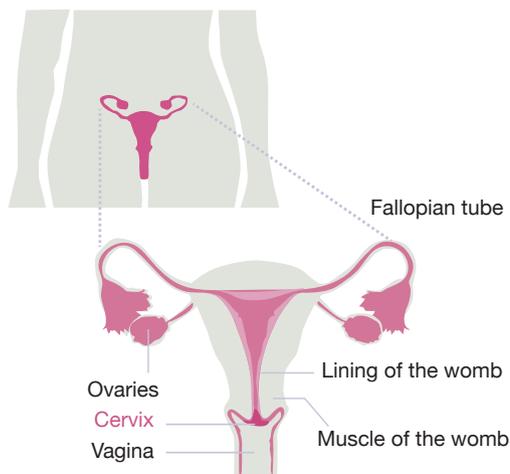
CERVICAL Cancer

SCREENING

WHAT IS CERVICAL CANCER?

Cervical cancer happens when cells in the cervix grow in an uncontrolled way and build up to form a lump (also called a tumour). As the tumour grows, cells can eventually spread to other parts of the body and become life-threatening.

Your cervix is the lowest part of your uterus (or womb), and it is found at the top of your vagina.



CAUSES

Nearly all cervical cancers are caused by a virus called human papillomavirus (or HPV for short).

HPV is a very common virus – most people will be infected with it at some point in their life. It can be passed on through any type of sexual activity with a man or woman. There are many different types of HPV, but only some of them can lead to cancer.

The types of HPV which cause cervical cancer can infect your cervix without causing any symptoms at all. In most cases, your immune system can get rid of the virus without you ever knowing you had it. But sometimes, HPV infections can cause cells in your cervix to become abnormal.

Usually, your body can get rid of the abnormal cells and your cervix returns to normal. But sometimes this doesn't happen, and the abnormal cells can go on to develop into cancer.

SYMPTOMS

Cancer can develop between your regular screening tests. So it is important to look out for anything that is unusual for you especially the following:

- Bleeding between your periods, after sex, or after menopause
- Vaginal discharge
- Pain or discomfort during sex.

If you have any of these changes, see a doctor as soon as possible. Don't wait for your next cervical screening appointment.

Usually these symptoms won't mean you have cancer, but if you are found to have cancer, getting it diagnosed and treated early can mean you are more likely to survive.

RISK

Women and men who have had multiple sexual partners are more likely to get HPV infections. But HPV is so common that most people will have the virus at some point in their life.

HPV is found on the skin around the whole genital area, and can be spread through any type of sexual activity. This means that condoms do not always protect you from getting an HPV infection.

Smoking increases the risk of cervical cancer because it makes it harder for your body to get rid of HPV infections.

Cervical cancer is rare below the age of 25. Risk is highest between the ages of 25-29. Older women can still develop cervical cancer, and about 1 in 5 cases are in women aged 65 and over.

Using the contraceptive pill for more than 5 years increases the risk of cervical cancer. However, this risk goes back down after you stop taking it. The pill also slightly increases the risk of breast cancer but reduces the risk of womb and ovarian cancers.

You may be at a higher risk if your mother, sister or daughter has had cervical cancer, or if you have has some types of cancer before.

Girls aged 12 to 13 are now offered a vaccination to protect them against the types of HPV that cause cervical cancer.

YOUR TESTS EXPLAINED

Cervical Screening:

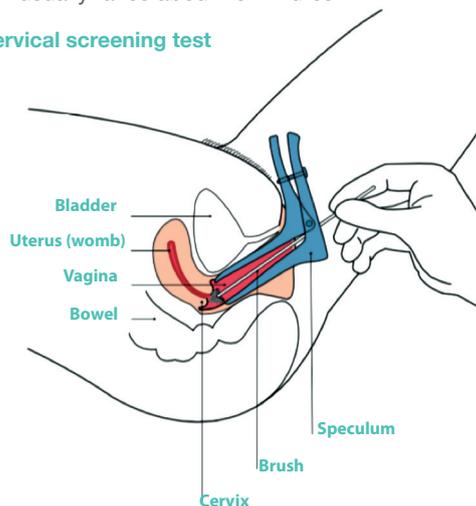
A **PAP Smear test** involves gathering a small sample of cells from your cervix. The sample is sent to a laboratory and checked under a microscope to see if there are any abnormal cells. Abnormal cells are not cancer, but they could develop into cancer if they are left untreated.

The best time to schedule for a PAP smear test is at least 5 days after the end of your menstrual period.

At your appointment:

- The nurse or doctor will ask you to undress from your waist down and lie on a bed with your knees bent and apart.
- A device called a speculum will be put into your vagina and then used to open it gently. This allows the nurse or doctor to see your cervix.
- They then use a small brush to take a sample from the surface of your cervix.
- The actual test takes only a minute or two. The whole appointment usually takes about 10 minutes.

Having a cervical screening test



HPV Vaccinations

We offer an optional Gardasil vaccine (for under 18yr) or Cervarix vaccine (pre-menopause), which are vaccines against the Human Papilloma Virus (HPV) that has been implicated in causing cervical cancer, throat cancer and genital warts.

TEST RESULTS AND FOLLOW-UP

These tests and examination combined will help the doctor assess the health of your cervix.

Most women will receive a normal result. Out of 100 women who have cervical screening, about 94 will have a normal result. If you have a normal result, you have a very low risk of developing cervical cancer before your next screening test.

Some women will have abnormal cells in their sample. Out of 100 women who have cervical screening, about 6 will have abnormal cells in their sample. Abnormal cells are not cancer, but sometimes they can develop into cancer if they are left untreated.

If you have slightly abnormal cells, your sample may be tested for the types of human papillomavirus (HPV) that can cause cervical cancer.

If you do not have an HPV infection, you have a low risk of developing cervical cancer before your next screening test. You will be recommended to have screening again in 3 or 5 years depending on your age.

If you have an HPV infection, the doctor will refer you to a specialist who will offer you another test (called a colposcopy) to look at your cervix more closely. If the person carrying out the colposcopy finds abnormal cells, they will suggest that you have the cells removed, usually during another colposcopy.

This is how screening can prevent cervical cancer.

PREPARATION FOR YOUR VISIT

General Instructions

- Your appointment should be on a day when you are not

having a period. If you don't have periods, you can be screened at any time.

- Wearing a loose-fitting skirt (rather than trousers or a tight skirts) might make it easier to get ready for the test.
- Please do not use any vaginal medications, lubricant or creams in the 2 days before you have your test because they can affect the samples your nurse or doctor takes.
- Please advise your nurse or doctor if you are pregnant, if you have had a hysterectomy, or if there is any reason why you think it would be difficult for you to have a cervical screening test. They will be able to answer any questions or concerns you may have, and will make the right arrangements for you.
- Please bring along your ID cards or passport and arrive 10 minutes before the scheduled appointment time.
- If you have a pre-existing medical condition, please bring along any previous test results or reports you have for the doctor to review.

Payment

- Pre-payment is required for all health packages

Terms and Conditions

1. Prices are inclusive of doctors fees.
2. Prices are based on a per person basis in Kenyan Currency.
3. All prices are subject to change without prior notice
4. The package pricing is extended to patients who settle the bill directly to the centre only. No discount of any kind may be applied to the package prices.

SCREENING	 BREAST & CERVICAL	
	Over 40yrs	Under 40yrs
Age		
Consultation	✓	✓
Diagnostics tests		
Bilateral Breast Ultrasound Pap Smear		✓
Bilateral Mammogram	✓	
Laboratory Tests		
Pap Smear	✓	✓
Vaccination		
Cervavix Vaccine (KES 3,220)	Optional	Optional
Price (KES)	7,500	6,500



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