

All sexually active women should have regular cervical smears to detect changes in the cervical cells that precede cancer.

According to a recent WHO publication, in rich countries most women regularly receive pap smears, which has **reduced** the rate of cervical cancers by up to **90%**.

Cancer of the cervix is very common among Nigerians and is one of the most frequent cancers among black women in Africa. Smears can be taken by trained Nursing Sisters in Primary Health Care Clinics, by General Practitioners and Gynaecologists.

The procedure is safe and not painful although many women feel uncomfortable or embarrassed about having smear taken. This is often why women neglect to have the smear taken.

It is important for the person taking the smear to sample the area of the cervix called the transitional zone, where the ectocervix and endocervix meet, as most cancers arise here. For this purpose special tools have been designed.

Cervical smears are sent to a Pathology Laboratory for staining and microscopic examination. Abnormalities are reported and a recommendation for a follow-up smear is made.

Certain changes in the cells of the lining of the cervix may indicate a risk of developing cancer. If these changes persist a follow-up smear or are severe, the patient will be referred for colposcopic examination.

The colposcope is an instrument that magnifies the cervix and indicates to the Gynaecologists where the abnormal area is. Biopsies are taken and are followed-up in certain cases by laser treatment or surgery.

If no abnormal cells are found, regular follow-up smears are recommended.

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For further information regarding
"Pap Smear" contact your
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