

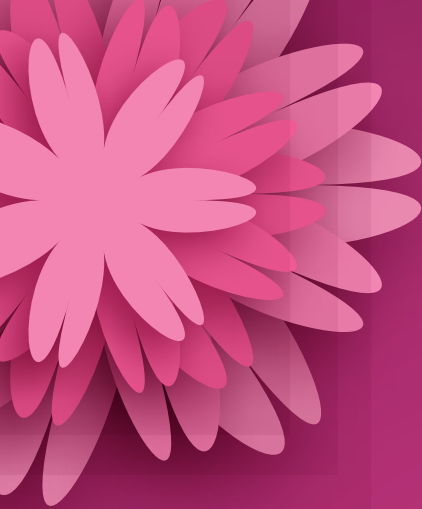
Psst!

Plan to Stay in Shape Today



WOMEN'S
health

FROM PUBERTY TO MENOPAUSE



WOMEN'S *health*

Since the beginning of time, the subtle differences of a woman's body have been something of a mystery. Vaginal dryness, premenstrual syndrome, vaginitis, and breast cancer are just some of the problems that can disrupt a woman's everyday life. It is sometimes difficult to understand the causes and symptoms associated with these health concerns.

That's why we created this guide, just for women, to help understand the various conditions that can affect them throughout their life.

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A few comments on feminine hygiene

First and foremost, female genital hygiene is essential and must be part of your routine for keeping the rest of your body clean, using just water and a mild body cleanser. It is important to know that only the external area must be washed. The interior of the vagina stays clean by itself.

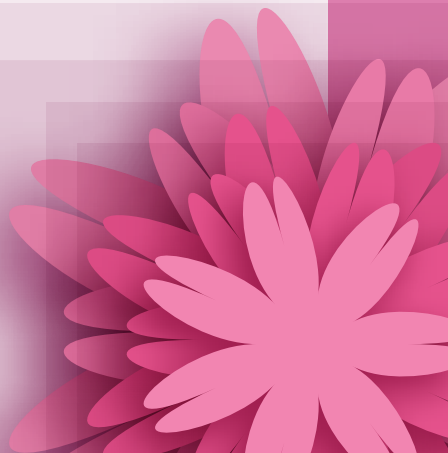
Here are some basic guidelines to follow every day, for good intimate hygiene.

- **Change your underwear daily.**
- **To prevent irritation, only wash your genitals once a day, except in cases of excessive perspiration or extreme heat.**
- **Wash your hands before you touch your genitals.**
- **Avoid underwear that is too tight or brightly colored as this can cause irritation.**
- **Avoid using the same tampon or pad for more than four or five hours at a stretch.**
- **After a bowel movement, wipe from front to back to avoid spreading bacteria towards the vagina.**
- **Choose underwear made of cotton rather than synthetic fabric which is more likely to trap moisture.**

- Change out of a damp swimsuit promptly.
- Thoroughly dry the vaginal area after showering, bathing, swimming, or using a spa, to minimize dampness.

The vagina contains bacterial flora that naturally protect against infection. It is important to maintain the bacterial balance in this area. **Using scented cosmetic products, disinfecting products, or vaginal douches is not recommended.** Besides potentially masking certain more serious problems, these products can disrupt the balance of the flora and lead to health problems such as vaginitis, vaginal irritation, and the spread of bacteria towards the uterus and the fallopian tubes.

When you're travelling or unable to take a proper shower, such as when on a hiking trip or after exercising, you may want to take along some feminine cleansing wipes to quickly freshen up. Make sure you use mild, unscented, and alcohol-free products and dry your genitals thoroughly afterwards. Only use these wipes occasionally. If used regularly, they can lead to irritation.



The great mysteries of the menstrual cycle

Periods have their own share of physical and psychological symptoms and are one of the leading causes of absenteeism, particularly for adolescent girls in school. Let's take a closer look at what happens during this process which, while normal and natural, is sometimes inconvenient.

So, how does the menstrual cycle work?

The menstrual cycle is a process the female body must go through for pregnancy to occur, or not. It may seem simple but it involves a series of complex changes.

First and foremost, it is important to understand that all these stages are controlled by hormonal changes. The average length of a menstrual cycle is 28 days. In general, it lasts between 21 and 35 days but can vary from one woman to the next and even from one cycle to the next. Some women have a shorter cycle, for others it's longer. Some women have very light flow, others a heavier flow.

Day one of the cycle is the **first day of menstruation**. This means that a cycle begins on the first day of a woman's period and continues until the first day of her next period. During this time, **ovulation**, or the release of an egg by the ovary, generally occurs **14 days before menstruation**. Each month the uterus lining, called the endometrium, swells and thickens to prepare

to receive and nourish a potential fetus. If the egg is fertilized by sperm, it implants itself in the endometrium and begins its growth in the uterus. If it hasn't been fertilized, it is expelled from the body at the same time as the thickened uterus lining, creating menstruation.

It is important to remember that if you notice a change in your normal menstrual cycle that continues over time, such as bleeding lasting seven days or more, heavier bleeding, or bleeding between periods, you need to see your health professional.

Premenstrual syndrome (PMS)... the misunderstood one

Some men believe that premenstrual syndrome is a figment of women's imagination. But it is a genuine condition that reduces a woman's quality of life when it occurs. The exact cause of premenstrual syndrome has still not been determined. However it is thought to affect about 75% of women, 25% of whom have symptoms severe enough to hinder their daily activities.

During premenstrual syndrome **physical and emotional symptoms** appear **after ovulation**. Women are said to suffer from PMS if these symptoms are repeated over a number of consecutive cycles.

The main symptoms are

- Depression
- Anger
- Irritability
- Mood swings
- Fatigue
- Anxiety
- Insomnia
- Tender breasts
- Headaches
- Swollen extremities (fingers, hands, feet)
- Acne
- And more

In general, symptoms peak in **the five days before menstruation and disappear when menstruation starts, or a few days afterwards**. Because there is an emotional side to PMS, symptoms seem more intense when combined with stressful situations at work or at home.

Premenstrual syndrome is also thought to have a genetic component. In addition a sedentary lifestyle, obesity, tobacco use, and lack of certain nutrients such as calcium and magnesium are all factors that raise the risk of PMS.

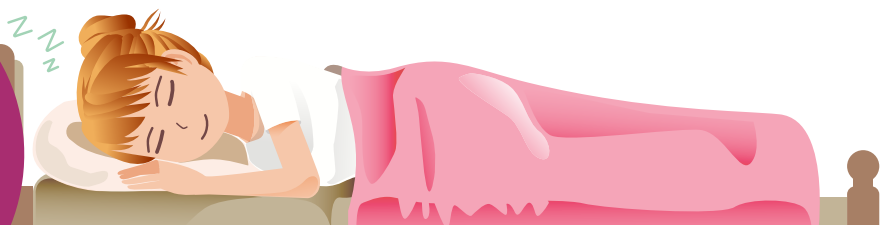
Here are some tips to help prevent or relieve the symptoms of premenstrual syndrome:

- **Exercise for at least 20 minutes three or four times a week.** Regular physical activity helps regulate certain hormones, increase blood flow to certain organs, provide a sense of enjoyment and well-being, and can also help eliminate everyday tension and stress.
- **Try to include relaxation exercises in your daily routine.** Stress has been proven to aggravate premenstrual syndrome.
- **Limit your salt intake to reduce water retention and swelling.**
- **Try not to skip meals.** Eat balanced meals at regular times.
- **Taking a painkiller can help relieve headaches and stomach cramps.** Ask your medical professional for the product best suited to your needs.



● **Maintain good sleep habits (some women suffer from insomnia or the opposite, hypersomnia, during PMS):**

- Set a regular sleep schedule (bedtime and wake-up time).
- Avoid caffeine at least six hours before bed.
- Avoid taking naps after 3 p.m. And don't nap for more than 10–20 minutes.
- Avoid nicotine before bed.
- Eat a light evening meal.
- Sleep in a dark, quiet room at a cool temperature.
- Limit the amount of liquid you drink in the evening to prevent having to go to the bathroom during the night.
- Avoid stimulating activities before bed. This includes using electronic tablets, cell phones, and/or watching TV.



In some cases premenstrual syndrome can still be extremely unpleasant despite the steps listed above. If this is the case for you, it is best to talk to your health professional about possible treatments for your most severe symptoms. If their general health allows it, some women choose to take the contraceptive pill to suppress ovulation and thus reduce cramps, headaches, and certain other symptoms associated with hormonal changes.

Others might be offered a different type of treatment if their primary symptoms are emotional such as anger, irritability, mood swings, depression, and anxiety. A conversation with your health professional can lead to a significant improvement in your quality of life!

Menstrual pain... the inconvenient one

Pain associated with menstruation, also known as dysmenorrhea, varies from one woman to the next. It is estimated that 5% to 15% of women will experience a significantly lower quality of life during their period. This can even lead to increased absence from work or school.

In most cases menstrual pain is caused when inflammatory substances (prostaglandins) are secreted by the uterus lining (endometrium). This leads to contractions that vary in frequency and intensity. Pain is mostly felt in the lower stomach, but can also occur in the legs and back. It can also cause nausea and vomiting, diarrhea, and headaches.

Generally, pain starts a few hours before menstruation begins and continues for two or three days afterwards.

Evidence suggests that women who are sedentary (not very physically active) and those with high stress levels are more likely to suffer from menstrual pain. Other factors might also contribute to dysmenorrhea, such as:

- **A sister or mother with the same symptoms**
- **Early onset of menstruation (before the age of 12)**
- **Heavy periods that last a long time**
- **Smoking**
- **Lack of sleep**
- **Unbalanced diet**
- **And more**

To prevent and reduce menstrual pain, it is vital to modify certain lifestyle habits. Regular exercise, a balanced diet, adequate and restorative sleep, managing stress, stopping smoking, and other changes can all help.



But despite healthy habits, pain can still persist. Here are some tips to help relieve menstrual pain:

- **Take a relaxing warm bath.**
- **Place a hot/warm water bottle on your stomach.**
- **Stretch and meditate.**
- **Rest and relax!**



If needed, a painkiller might help. Ask your healthcare professional for advice.

If the tips above and/or an over-the-counter painkiller don't help, it is best to make an appointment with a health professional.

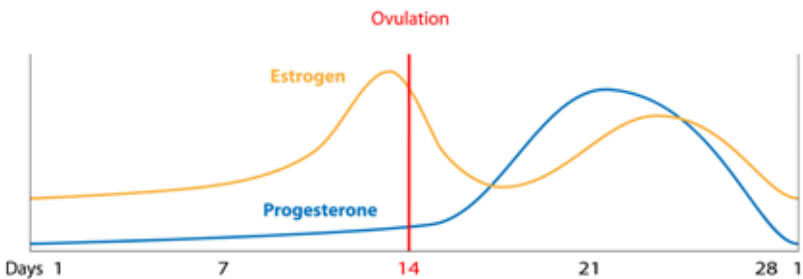
As with PMS prevention, if their general health allows it, some women will choose to take the contraceptive pill to suppress ovulation and thus reduce the risk of menstrual pain.

Menstruation-related headaches... the unbearable ones

The first thing to understand is that women are more susceptible to headaches and migraines. Hormonal fluctuations have the potential to trigger headaches. These variations often appear at puberty, particularly during ovulation and menstruation and tend to drop off after menopause. Menstrual headaches can be highly debilitating. For this reason it is important to seek a diagnosis to try to prevent them or at least try to reduce potential triggers, for the best possible pain management.

During the menstrual cycle, hormones undergo many natural variations. Levels of estrogen, the main hormone that causes headaches, first drop slightly after ovulation, then take a second nosedive right before menstruation. For many women this significant reduction in estrogen triggers intense pain that can even lead to a migraine.

HORMONAL VARIATIONS DURING THE MENSTRUAL CYCLE



Some women suffer from headaches at different times in their cycle while others experience them only when menstruating. Headaches during menstruation are normally much longer, severe, debilitating, and hard to manage.

Symptoms can range from just a headache to a debilitating migraine accompanied by sensitivity to light and sound, vision problems, and throbbing pain that can even lead to nausea and vomiting.

The pain window generally starts two days before menstruation begins and continues for about three days afterwards.

This is on average, as each woman experiences symptoms differently. But when symptoms occur, simple steps such as retreating to a dark, quiet room, applying a cold compress to your forehead, resting, and relaxing can help. Painkillers, anti-inflammatories, and other more specific medications can be taken to relieve pain. Ask your health professional about your options.

Proper treatment of headaches usually offers women a much higher quality of life. If you experience severe headaches with your periods, don't suffer in silence. Talk to a health professional.

As with PMS and menstrual pain prevention, if their general health allows it, some women will choose to take the contraceptive pill to suppress ovulation and thus reduce hormonal variations.

However, despite taking the contraceptive pill, unfortunately some women may experience headaches during the few days without hormones. In this case women might be advised to take the pill continuously, i.e. start a new packet without a break. Taking the medication without a break prevents a drop in hormones and thus reduces the risk of headaches occurring during menstruation.

PLEASE NOTE: A medical exam is required before taking the contraceptive pill, either with or without a break. This is particularly important for women with migraines. Taking the pill may be contraindicated with certain types of migraines. Ask your healthcare professional for advice.

Oral contraceptives... your allies

As mentioned above, a woman's menstrual cycle is regulated by various hormonal changes.

Oral contraceptives or birth control pills work by **maintaining a constant hormone level** in the body and **suppressing ovulation**, among other things. Basically, they replace the natural menstrual cycle with an artificial cycle.

By acting on ovulation and constant estrogen levels, oral contraceptives can significantly reduce premenstrual syndrome, dysmenorrhea, and menstruation-related headaches.

But there are some contraindications associated with these medications. Talk to your health professional to find out if this is a good option for you.

As mentioned, taking the pill without a break generally lessens the symptoms associated with PMS, menstrual pain, and migraines, but can also reduce the many symptoms of menstruation and their effect on a woman's quality of life. Birth control pills also have the potential to reduce other physical and psychological symptoms such as: stomach pains, breast pain, significant loss of blood that can cause anemia in some women, and more. In addition they are safe to use and, contrary to some schools of thought, taking them continuously is not linked to an increased risk of breast cancer or cardiovascular disease. Talk to your doctor to find out if this solution is right for you.

Vaginal dryness... the unpleasant one

Vaginal dryness (known scientifically as atrophic vaginitis) often occurs during hormonal changes, more specifically, when **estrogen levels drop**. Estrogen plays an important role in vaginal lubrication and maintaining the structure of the vaginal wall. For this reason vaginal dryness is particularly common in women close to and experiencing menopause, and in women who have recently given birth, especially if they are nursing.

A woman suffering from vaginal dryness is likely to experience not only reduced vaginal lubrication, but also pain during intercourse, itching, and a lasting burning sensation, along with abnormal vaginal discharge. Vaginal dryness can also be caused by certain medications including oral contraceptives, antihistamines, some antidepressants, and more.

What are the options for correcting vaginal dryness?

- Vaginal lubricants (available over the counter):** These reduce friction and discomfort during intercourse. They provide rapid, short-term relief. They must be used during intercourse and be applied directly in the vagina or on the penis. **Water - or silicone-based lubricants are best** because they can be used with latex condoms. Oil-based lubricants can damage latex condoms, reducing their ability to prevent pregnancy and protect against sexually transmitted and blood borne infections (STBBI). Oil-based lubricants should be used only with polyurethane condoms.

WARNING: Warming or flavored lubricants are more likely to irritate skin and even cause a yeast infection.

- **Vaginal moisturizers (available over the counter):** These are designed to maintain constant moisturization levels in the vagina. They must be used regularly two to three times a week. Unlike lubricants, they are not designed for occasional use, such as just before intercourse, because this is likely to cause irritation. However, a woman who uses a vaginal moisturizer can also use a lubricant during intercourse if needed.
- **Vaginal estrogen (by prescription):** This type of treatment is generally prescribed for women close to or experiencing menopause. A vaginal cream containing very low levels of estrogen is applied (usually twice a week). Applying estrogen in the vagina limits the amount absorbed into the bloodstream thereby reducing the risk of side effects associated with hormones.

Taking estrogen orally can have the same effect but this option is generally prescribed when several symptoms associated with low estrogen are present, such as hot flashes, night sweats, mood swings, and more.

WARNING: Vaginal estrogen can damage condoms and diaphragms. Ask your healthcare professional for help in deciding what's right for you.

If vaginal dryness is attributed to stress, anxiety, or lack of desire, the best solution is to talk with your partner about what's bothering you. It may help to spend more time on foreplay and be more creative at this stage, which can increase desire and improve natural lubrication. If the problem persists, specialists such as sex therapists and psychologists can help you work towards a solution.

**DID YOU
KNOW?**

Women who are stressed, anxious, or depressed are more likely to suffer from vaginal dryness.

An active sex life helps treat vaginal dryness by keeping the vaginal tissue healthy.



Vaginal infections

Vaginal infections are the most common reason for adult women to see their health professional. There are various types, but here we will focus on vaginitis and vaginosis.

Vaginitis

Strictly speaking vaginitis refers to vaginal inflammation most often caused by an infection. There are various types of vaginitis as well as different recommendations and treatments. We are going to look specifically at vaginal yeast infections, usually caused by a candida fungus. This fungus is normally found in small amounts in the vaginal flora, but when certain factors encourage unusually high levels to be produced, the result is often vaginitis.

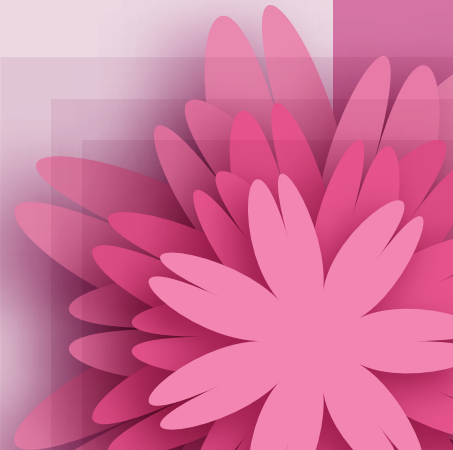
DID YOU KNOW?

Vaginitis is a common female health concern, with around three out of four women affected at some point in their life.

What are the main risk factors for a yeast infection?

Vaginitis can occur in a healthy woman with no predisposing factors. But the following conditions lead to hormonal changes that can cause this type of infection:

- **Pregnancy**
- **Taking the contraceptive pill**
- **Menstruation (some women develop vaginitis before each period)**
- **Taking certain medications, including some antibiotics, as they can disrupt the normal balance of vaginal flora**
- **Uncontrolled diabetes**
- **A weakened immune system due to disease (e.g., AIDS, cancer, etc.) or certain medications**
- **Clothing that retains heat and moisture, creating an environment favorable for candida to grow (e.g.: tight clothes, synthetic underwear, etc.)**
- **Excessive use of vaginal douches and certain vaginal products**



What are the signs and symptoms of a fungal infection?

In general, the following are the signs and symptoms of a vaginal yeast infection:

- **Vaginal itching**
- **Thick, whitish vaginal discharge (with the appearance of cottage cheese)**
- **Burning sensation when urinating**
- **Painful and/or red vulva**
- **Possible pain during sex**

Vaginal yeast infections are not defined as a sexually transmitted disease (STD) but they can be transmitted between sexual partners. In men, this type of infection is known as **balanitis** (inflammation of the glans). Symptoms can include pain in the glans, itching, and a burning sensation when urinating. In addition, men may experience localized redness and dry skin.

Do I need to see a health professional if I have these symptoms?

A woman who thinks she has a yeast infection for the **first time** should see a health professional for a diagnosis before trying an over-the-counter treatment. Some women think they have a fungal infection whereas they are actually suffering from vaginal dryness, a sexually transmitted infection, or a urinary infection. In these cases, it is obviously not appropriate to use a treatment for yeast infections.

Pregnant women, those suffering from **uncontrolled diabetes**, women with a **new sexual partner**, or those who have **recurrent fungal infections** should also consult a health professional before trying any remedy at all when they experience signs and symptoms similar to those of a vaginal yeast infection.

What are the treatments for a yeast infection?

Yeast infections often clear up with topical antifungal treatments sold in pharmacies. These treatments come in the form of creams or tablets inserted in the vagina at bedtime to keep the product in contact with the vaginal mucous membranes for as long as possible.

For vulvar itching, small amounts of cream can be applied locally in the morning and at night. The length of treatment varies by brand. Regardless of the remedy you choose or what your health professional recommends, **symptoms can last up to seven days after starting treatment.**

DID YOU KNOW?

Once started, antifungal treatments must be continued, even during your period.

Another alternative treatment is to take an antifungal pill orally. You can also apply cream to itchy areas if needed. Talk to your healthcare professional about it to find out if this treatment is right for you.

If the treatment is unsuccessful, feel free to speak to your healthcare professional.

NOTE: It is recommended that you only resume sexual activity after the symptoms have disappeared. Various antifungal medications can also reduce the effectiveness of latex condoms, so be careful.

How do you prevent a yeast infection?

To avoid the recurring, irritating symptoms of a yeast infection, try incorporating the following actions into your daily routine:

- **Thoroughly rinse the vaginal area after washing with soap.**
- **Wash and dry the vaginal area to minimize residual moisture.**
- **Avoid using vaginal douches because they can affect the balance of natural vaginal flora.**
- **Avoid using vaginal deodorants and scented products (foaming baths, bath bombs, panty liners) because they irritate the vagina.**

- As with basic hygiene, opt for cotton underwear over synthetic fibres to reduce moisture.
- Avoid very colourful underwear because the dye can be irritating.
- Always wipe from front to back after a bowel movement to avoid introducing bacteria into the vagina.

What is bacterial vaginosis?

Bacterial vaginosis is a bacterial (rather than fungal) imbalance of the bacteria in the vagina. It is characterized by greenish vaginal discharge that has a fishy smell. As with vaginitis, using a vaginal douche and scented bath products (foaming bath, bath bombs, etc.) may promote bacterial vaginosis. While bacterial vaginosis is not considered a sexually transmitted infection, engaging in sexual intercourse without a condom can cause or aggravate the condition because of the effect sperm has on bacteria in the vagina. The main treatment for bacterial vaginosis is to use an antibiotic prescribed by a doctor.



Women's cancers

Cancer is the primary cause of death in Canada. Fortunately, the survival rate after diagnosis has increased significantly over the past 40 years. Some cancers are more common in women, and in this section we will mainly discuss breast cancer and cervical cancer.

Breast cancer

Breast cancer is the most commonly diagnosed form of cancer in women. While most women diagnosed with breast cancer are over 50, around a third of the cancers diagnosed in woman age 20 to 49 are breast cancers, and it is the primary cause of cancer death for this age range. Unfortunately, breast cancer in young women is often aggressive and progresses quickly. However, the earlier it is detected, the better the chance of survival is.



A FEW STATISTICS

- One in nine women will develop breast cancer.
- One in 30 women will die from it.
- 400,000 mammograms are administered each year in Quebec.
- Around 6,000 women will be diagnosed with breast cancer this year and unfortunately 1,350 will die.
- 99% of breast cancers affect women; 1% affect men.

There are different types and stages of breast cancer, depending on the size of the tumour, where it is located, how quickly it grows, and whether or not it spreads outside the breast and attacks the lymph nodes.

Breast cancer is not the result of one single cause. Many modifiable and non-modifiable factors can increase your risk of breast cancer.

The most significant factors that increase the risk of some breast cancers are **being a woman and ageing**. In fact, anything that could potentially **increase the amount of estrogen** and the duration of exposure could increase your risk of breast cancer:

- **Early menstruation (before age 12)**
- **Late menopause (after age 55)**
- **A first full-term pregnancy after age 30**
- **Never having been pregnant**
- **Using oral contraceptives over a long period**
- **Using hormone replacement therapy to treat menopause symptoms over a long period**
- **Not breastfeeding**
- **And more**

Furthermore, while the majority of women who are diagnosed have no family history of breast cancer, if an immediate relative (mother, sister, or daughter) has had breast cancer, it doubles your chance of being diagnosed one day. A personal history of breast cancer also increases your risk of having it a second time later in life.



An estimated 5–10% of breast cancer cases are attributed to a genetic mutation, especially the BRCA gene. When they are functioning normally, these genes, which are naturally present in the body, protect and prevent cancerous cells from growing abnormally.

Unfortunately, some of these breast cancer risk factors are non-modifiable because they are genetic and we can't do anything to change them. However, other factors are related to your lifestyle and are modifiable:

- **Smoking and exposure to second hand smoke**
- **Lack of exercise**
- **Alcohol consumption**
- **Obesity**
- **High breast density**
- **And more**

It's important to remember that any woman can be diagnosed with breast cancer even if they don't have any of the risk factors.

That being said, you can reduce your risk of breast cancer by doing the following:

- **Maintaining a healthy weight**
- **Being physically active**
- **Eating healthy**
- **Drinking alcohol in moderation**
- **Not smoking and staying away from second hand smoke**
- **Following the recommendations for breast cancer screenings (mammograms, clinical exams, and breast self-exams)**

Tell your doctor about your family history of breast cancer. He or she can advise you on what tests to take and how often.

Screening

Screening is a way to detect breast cancer early on in its development when it's easiest to treat.

Although breast cancer in young women tends to be more aggressive and progress more rapidly, women under 50 are not usually targeted for breast cancer screening.

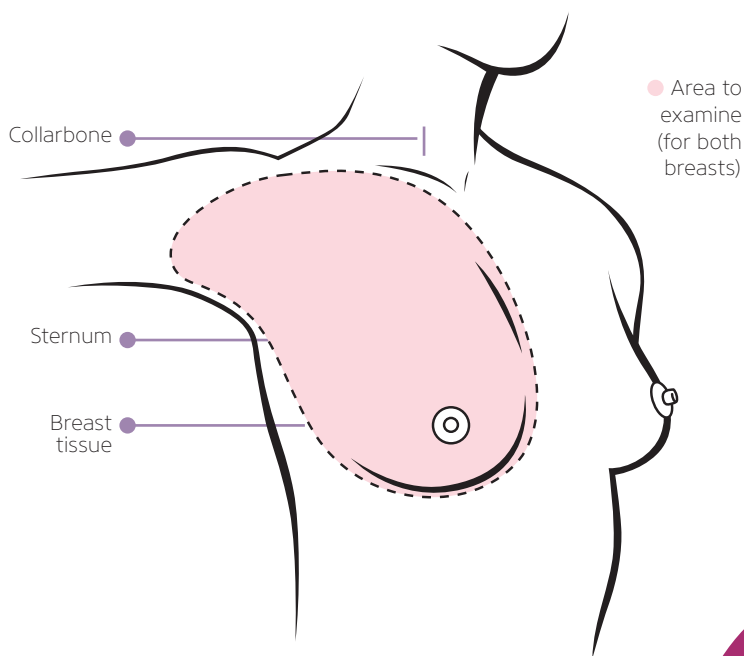
Do you know the three recommendations for keeping your breasts healthy?

- 1 BREAST SELF-EXAM**
- 2 CLINICAL EXAM**
- 3 MAMMOGRAM**

Tips on breast self-exams

It's important to become familiar with your own breast tissue by looking at and feeling it, no matter what your age. Cancer can take several years to show signs **and the earlier it is detected, the better the chance of survival**. Experts have long advised women to perform a monthly breast exam using a particular method. Research, however, has shown that this isn't necessary. **There is no right or wrong method for examining your breasts**. The idea is to know your own breast area—up to your collarbone, in the armpit area, and including the nipples—well enough to notice any changes. So get to know your breasts any way that works best for you.

Here is an illustration of the breast area. You need to examine this entire region when doing a self-exam to find any irregularities.

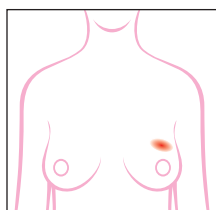


It's normal to feel small lumps beneath the skin surface of the breasts; most of the time these are milk-producing mammary glands. In addition, it may be normal for your breasts to feel tender and lumpy just before your menstrual period begins. Breast tissue also changes with age. Knowing what's normal for your breasts will help you pick up on any changes that should be brought to your doctor's attention.

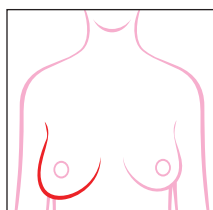
FICTION: Wearing a bra causes breast cancer.

FACT: There is no scientific evidence that wearing a bra (with or without an underwire) causes breast cancer.

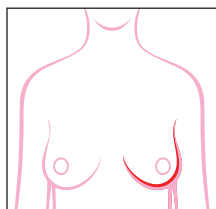
To help you know what to look for and what to pay attention to when giving yourself a breast exam, here are **10 signs and symptoms** that may be related to breast cancer:



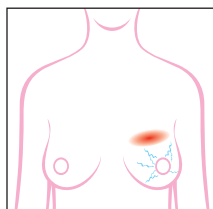
A distinct lump in the breast



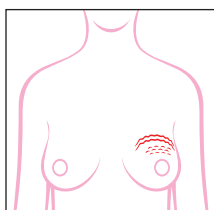
Thickening or other change in skin texture



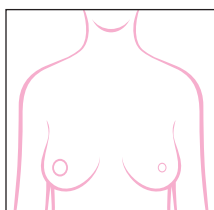
Unusual change in breast size and shape



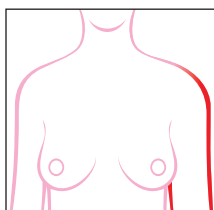
Unusual redness or new, more visible veins



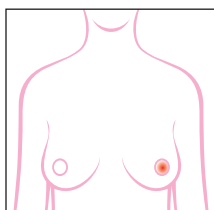
Flattening or indentation of the breast



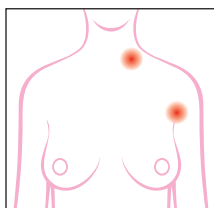
Inverted nipple



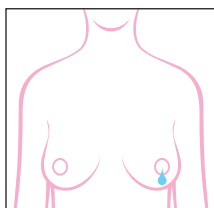
Unusual inflammation (swelling) in the arm



Changes in the skin on the nipple



Swollen lymph glands



Nipple discharge

If you notice a breast deformity, a change in colour or appearance, persistent eczema around your nipple, or if you have any doubts, see a healthcare professional.

PLEASE NOTE: These changes do not necessarily mean you have breast cancer, but they should be looked at and examined more thoroughly.

More about clinical exams

Clinical exams are physical breast exams conducted by a doctor. While the exam is not considered a form of screening, the Canadian Cancer Society recommends that all women over the age of 40 get a clinical breast exam every one to two years.

FICTION: Antiperspirants can cause breast cancer.

FACT: Several studies on the risk factors for breast cancer have shown that using antiperspirants does not increase the risk of breast cancer.

Screening mammograms: unpleasant but effective!

Mammograms are the only recognized early screening exams that are reliable and can significantly increase your chance of survival. Mammograms can reveal extremely small cancers that are too small for a doctor to detect physically. The purpose of a mammogram is to produce images of the internal structure of the breasts using low dosage X-rays to detect irregularities. Mammograms are X-rays of the breasts.

During a mammogram, the breasts are compressed between two plastic plates, which makes it possible to get clearer images with lower X-ray exposure levels. It's important to know that the risk of developing breast cancer as a result of such radiation is basically nonexistent.

Like any exam, mammograms are not infallible, so it's important to be aware of any changes in your breasts and consult a doctor if you notice any irregularities. But they also sometimes detect irregularities such as cysts, calcifications, and denser fibrous tissue that don't necessarily mean you have cancer. More tests may be required to determine the cause of such irregularities.

Screening mammograms are recommended every two years for all women between the ages of 50 and 69. When you turn 40 (or even before), it's a good idea to talk to your doctor about your personal risk of breast cancer. If you're at higher risk (because of a family history of the disease or certain genetic predispositions) you may have to undergo testing earlier and more often.

A PROVINCE-WIDE SCREENING PROGRAM

The Ministère de la Santé et des Services sociaux has been gradually implementing a breast cancer screening program throughout Quebec since 1998 in order to lower mortality rates due to the disease. The program is available to women 50 to 69 years of age. All Quebec women receive a letter inviting them to join the program when they turn 50. You can make an appointment with a designated screening center without having to see your doctor for a prescription.

As part of this program, your mammogram results will be mailed to you and your physician. A letter will also be sent every other year reminding you to schedule an exam.

If additional testing is necessary, you'll be notified quickly and your care turned over to a team of specialists. Caregivers are available to provide psychosocial support for those who require it.

Planning to have a mammogram soon?

Here's how to get ready for it.

MAKING AN APPOINTMENT:

It is recommended that you make your mammogram appointment ten days after you begin your period because your breasts are usually less sensitive during this period.

7 TO 14 DAYS BEFORE THE MAMMOGRAM:

To reduce discomfort, avoid food and drinks that contain caffeine such as coffee, tea, and chocolate because they make breasts more sensitive.

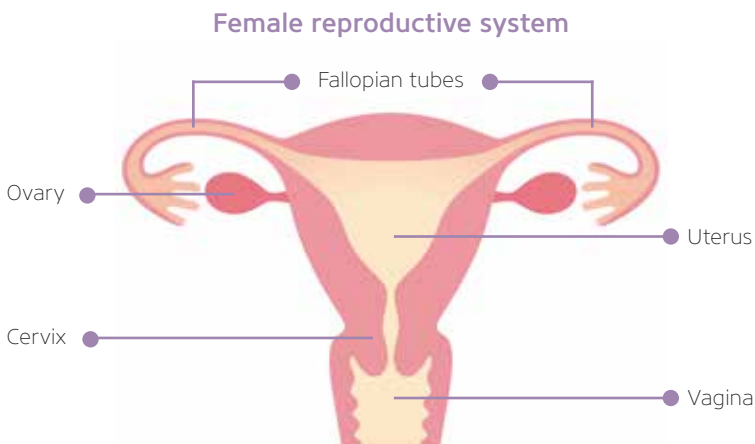
THE DAY OF THE MAMMOGRAM:

- Wear clothing you can take off easily.
- Don't use any deodorant, antiperspirant, powders, perfume, creams, or other products in the armpit and breast area. These products can cause false images that could be incorrectly interpreted as irregularities.
- Avoid wearing jewellery (necklaces, earrings, etc.) because they must be removed for the mammogram.

Thanks to various screening programs, greater availability to more effective treatments, research, education and awareness, mortality rates from breast cancer have significantly dropped since the 1980s. But the fight isn't over because the number of diagnosed cases has remained the same over the years.

Cervical cancer

The female reproductive system can be affected by ovarian cancer, uterine cancer, and cervical cancer, among others. The cervix is the gateway between the uterus and the vagina, through which the uterine lining is shed during menstruation and babies pass during birth. Cervical cancer is the second most common cancer for woman age 20 to 44, so we need to talk about it.



The main culprit: Human Papilloma Virus (HPV)

The Human Papilloma Virus is one of the most common sexually transmitted infections (STIs) and is **the main cause of cervical cancer**. Statistics show that most men and women who are sexually active will contract HPV. Most types of HPV are harmless and disappear on their own after a few months without any treatment. These types do not cause cancer.

Often a person with HPV has no symptoms and therefore no adverse effects on their health are detected. This explains why some types of HPV are **low risk** and usually present no symptoms apart from occasional anal or genital warts, while other types of HPV are considered **high risk**. These can evolve very slowly and eventually lead to precancerous lesions, cervical cancer, anal cancer, and other genital cancers. The high risk types of HPV cause around 70% of cervical cancers.

HPV can be contracted by anyone who is sexually active. You do not need to have penetrative sex for HPV to be transmitted. Skin-to-skin contact with the genital area of an infected person is enough to contract the virus. Putting your mouth on an infected partner's genitals is also a way to contract the virus.

Can you prevent the transmission of HPV?

No medical treatment can cure HPV, so preventing it is essential. As most people don't have any symptoms, it's easy to transmit the virus without even knowing it.

The only effective way to prevent the transmission of HPV is to abstain from any sexual activity with an infected person, including skin-to-skin contact with the genital area, oral sex, and sharing sex toys. However, these options are not always realistic, so it's important to follow these recommendations:

- **Using a condom is key** to protecting yourself from sexually transmitted and blood born infections, including HPV. However, remember that HPV can be found in areas that are not covered by a condom, such as the skin around the genitals and the anus.
- The risk of contracting HPV increases with the **number of sexual partners you have**. Limiting your number of sexual partners is a sensible option.

- Getting regular **screenings** is key to prevention. Just like with breast cancer, the earlier cervical cancer is detected, the better the chance of curing it. The Papanicolaou smear test, commonly called the **PAP test**, is the **only way to screen for cervical cancer**. It is a medical exam administered by your doctor that involves taking a sample of cells from the cervix to detect possible irregular lesions. It is recommended to get tested at least once every three years when you are sexually active. Discuss it with your doctor.
- Getting **vaccinated** against certain types of HPV is also an excellent way to prevent transmission. There are a number of vaccines available on the market to protect against different strains of the virus.

It's been
proven that early
screening for cervical
cancer reduces the
related number
of cases and
deaths.

Vaccines are most effective when they are administered before you become sexually active (this includes sexual intercourse, genital skin-to-skin contact, and oral sex).

Girls and women age 14–26 who are sexually active and have already had abnormal PAP test results (including cervical cancer) or who have already had genital warts are also good candidates for vaccination. The vaccine could protect them from HPV strains they have not yet been exposed to.

Vaccination has also been proven effective for woman aged 27–45. Depending on your age, your sexual life, and other factors, you should consider talking to your healthcare professional about whether you should be vaccinated against HPV.

DID YOU KNOW?

Quebec's vaccination program now includes the HPV vaccine. The vaccine is offered free to young girls and boys in Grade 4. Studies show that it is better to vaccinate young people age 9–13 before they become sexually active, to ensure the best protection.

The vaccine is also provided for free to girls age 9–17, to people age of 26 and under whose immune system is weakened or who are HIV positive, and men under the age of 26 who have sex with other men.

How can you tell if you have HPV?

Although HPV is **very contagious**, it doesn't cause health problems for most people who have it and disappears without treatment after a few months. However, some people contract a strain of HPV that causes genital warts. The warts can appear a few weeks or months after sexual contact with an infected person.

Some people contract a strain of high risk HPV and will have a higher risk of developing precancerous lesions. As previously mentioned, **the PAP test is the most effective method** of detecting abnormal or precancerous cells in the cervix, even if the woman has been vaccinated. Early detection of these cells improves the prognosis.

Sexually transmitted and blood borne infections (STBBI) are hard to detect and unfortunately most people don't know they are infected. There is no specific age when you can contract an STBBI and given their possible health effects, it's important to remember

- Don't trust appearances.
- Always wear a condom when having sex.
- Before deciding to stop using a condom, both partners should get screened for STBBIs.

Conclusion

Whether or not you are a woman, some problems are out of your control and others can be prevented, controlled, and even avoided by changing certain habits. Leading a healthy lifestyle is essential. To stay healthy longer, eat healthy, get regular exercise, limit your consumption of caffeine and alcohol, don't smoke and avoid second-hand smoke, get into a sleep routine that encourages restorative sleep, and make time to relax—these are just a few examples of healthy daily habits to adopt.





References and useful links

- Association of Obstetricians and Gynecologists of Quebec
www.gynecoquebec.com
- Canadian Cancer Society
www.cancer.ca
- Familiprix
www.familiprix.com
- Government of Canada:
healthycanadians.gc.ca/
- Government of Quebec:
<http://itss.gouv.qc.ca/>
- Quebec Breast Cancer Foundation
www.rubanrose.org
- Quebec Breast Cancer Screening Program
www.depistagesein.ca
- Society of Obstetricians and Gynaecologists of Canada (SOGC)
www.sogc.org

IN THIS **GUIDE**

Feminine hygiene

The *menstrual* cycle

Premenstrual syndrome

Menstrual pain

Headaches

Oral contraceptives

Vaginal dryness

Vaginal infections

Women's cancers

Only pharmacists are responsible for the professional activities of the pharmacy practice. They use various tools such as the PSST! (Plan to Stay in Shape Today) program.