

Katie Johnson: Good morning and welcome to Apple a Day, Lake Region Healthcare's Health and Wellness program where we feature news and information you can use to live a healthier life. I'm Katie Johnson, your host, and my guest today is Dr. Brett Larson. He is an OB/Gyn provider at Lake Region Healthcare and is joining us today as we recognize the awareness month of cervical health awareness. Good morning, Dr. Larson.

Dr. BrettLarson: Good morning.

Katie Johnson: Well, this is a chance to raise some awareness about how women can protect themselves from diseases that affect the cervix, which can be a difficult conversation to have, even with your doctor, so we just kind of want to open this conversation up and address some of the common issues around the topic today, but before we do that, let's just give our listeners a little bit of background about who you are and what your role is at Lake Region Healthcare, Dr. Larson.

Dr. BrettLarson: My name is Dr. Brett Larson. I am an OB/Gyn which means that I take care of female health problems. I see patients in the clinic. I perform surgeries in the operating room and I do deliveries.

Katie Johnson: And you are part of a team of OB/Gyn providers here at Lake Region Healthcare.

Dr. BrettLarson: That's correct.

Katie Johnson: Great. Now, when we talk about cervical health risks, there's really one major factor when it comes to our cervical health, and that surprised me. Can you talk a little bit about HPV and the role it plays in cervical health risks, particularly for cervical cancer?

Dr. BrettLarson: HPV is also called human papilloma virus. It is the virus that is responsible for causing nearly all, if not all cases of cervical cancer. HPV is also responsible for causing genital warts.

Katie Johnson: So would that be the main symptom that would first be noticeable to a woman?

Dr. BrettLarson: Yeah, very often abnormalities that you might see from HPV say on a Pap smear or something, they're largely asymptomatic, so patients don't have a lot of symptoms from that. But warts would be one indication that you may have contracted HPV.

Katie Johnson: What does prevention when we talk about this then? If it's transmitted sexually, I'm assuming that that's where a lot of the prevention lies.

Dr. BrettLarson: It is. The main prevention would be abstinence from sexual intercourse unless you're in a committed relationship. It does appear, however, that condoms may be somewhat effective in helping to prevent HPV. Recently within the last

decade, we've also come across a vaccine that will help prevent contracting the HPV virus.

Katie Johnson: And a few other that I've heard about and am curious to get your perspective on include smoking and stress.

Dr. BrettLarson: Yeah, it appears that actual contracting the virus, that's done through sexual contact. But whether or not that virus is then able to cause abnormalities of the cervix probably has to do with your immune status. Patients who have a better immune system are better able to fight the virus.

Katie Johnson: Let's talk a little bit more specifically about the tactics you started to mention in terms of prevention. How does the use of condoms help our cervical health?

Dr. BrettLarson: It is a barrier contraception. The way that it works is actually putting a barrier, not allowing you to contract the virus.

Katie Johnson: And then you mentioned that a healthy immune system contributing to fighting harmful cells in the cervical region. Can you talk a little bit more about that, and then in general about how do we build up our immune system? What are some of the keys to do that to help us in that fight?

Dr. BrettLarson: One of the main risk factors for developing abnormalities of the cervical cells ... and this is after you've been exposed to the HPV virus ... is smoking. Smoking, it appears that it dampens your immune system and makes it harder for your body to be able to fight the virus. Other reasonable things would be just general health practices, making sure you're eating a healthy diet full of fruits and vegetables and you are getting plenty of rest and staying well hydrated and all those things that we harp on on a daily basis.

Katie Johnson: It's always so fascinating to me, I guess, that no matter what the health topic is that we're talking about, it always comes back to some of those basics that we just can't deny the impact of fruits and vegetables, a good rest, of that well-rounded component. We're in the middle of the health challenge here. That's really why we talk about the importance of all those different things contributing to so many aspects of our health.

Dr. BrettLarson: Absolutely.

Katie Johnson: Before we wrap up, a little bit on diagnosis and treatment perhaps. You mentioned Pap tests. Maybe a little bit on how often and when women should have those and what they might experience in terms of results.

Dr. BrettLarson: Yes, the current recommendation for Pap testing is that it begin at about age 21, and this is in patients who are of normal health. Other patients who maybe those infected with HIV or who are on immunosuppressing drugs if they have had a transplant or something like that, they differ from this recommendation,

but for the general population, the recommendation is to start testing at age 21, and that is regardless of when you have your first sexual encounter. The recommendation if the initial Pap test is normal is that from age 21 to about 30, that you receive Pap tests at least every three years.

Following that, we can add on a test for HPV. If that and your Pap smear are both normal, then you probably only need Pap testing about every five years after the age of 30. And then it appears at about age 65, the risk of cervical cancer dramatically reduces, and so at that point, you probably don't need Pap testing after that age, as long as they've been normal before that.

Katie Johnson: And if they're not normal, how common is it for it not to be normal and what are all the different possibilities of what that could mean?

Dr. BrettLarson: If the Pap smear is not normal, then there are a number of different ways that we can diagnose the abnormalities of the cervix. The main way that we do that is through what's called a colposcopy, which is where we use a microscope to look at the cells of the cervix with some stains and things that help the abnormal cells to stick out, and then we get a biopsy of that area if it looks abnormal, and that allows us to look a little bit more closely at what's going on and determine if we need to do a procedure called a LEEP, which is where we remove the abnormal cells before they become cancerous.

Katie Johnson: Great information. I want to circle back, though, to one thing before we wrap up. You mentioned the HPV vaccination, and I think we'd be remiss not to talk just a little bit more about that. Who should get the HPV vaccination and when?

Dr. BrettLarson: The FDA recently approved the use of the Gardasil vaccination up until the age of 45. Now, the idea is that we want to give the vaccination well before someone becomes sexually active, well before they become exposed to the virus. And so the initial age at which we target the HPV vaccine is about age nine.

Katie Johnson: Mm-hmm (affirmative). And I've heard some doctors say it's one of the greatest breakthroughs in modern medicine.

Dr. BrettLarson: It really appears to be.

Katie Johnson: The idea that a vaccine can actually prevent cancer is really hope for our future. Thank you, Dr. Larson, OB/Gyn at Lake Region Healthcare, for sharing your insights with us as we talk about cervical health awareness during January, Cervical Health Awareness Month.

Dr. BrettLarson: Thank you, Katie.

Katie Johnson: Dr. Brett Larson and Katie Johnson on Apple a Day reminding there is so much to do here. Stay healthy for it. Have a great day.