



## **NEW PAP GUIDELINES CHANGE NOTHING FOR DES DAUGHTERS -YEARLY PAP/PELVIC EXAMS IMPORTANT**

DES Daughters remain the exception to the rule in new cervical cancer screening guidelines established by the American College of Obstetricians and Gynecologists (ACOG).

While the updated recommendations call for less frequent Pap tests for most women (every two to three years instead of annually), the report specifically spells out that:

**Women with certain risk factors may need more frequent screening, including those who have HIV, are immunosuppressed, were exposed to diethylstilbestrol (DES) *in utero*, and have been treated for cervical intraepithelial neoplasia (CIN) 2, CIN 3, or cervical cancer.**

DES Daughters need annual Pap/pelvic exams to check for clear cell adenocarcinoma of the cervix and vagina. The new ACOG guidelines do not change recommendations that ACOG has held for years for DES Daughters.

Some doctors may not be aware of it, however. So you can visit the ACOG web site to read and print the updated recommendations:

[http://www.acog.org/from\\_home/publications/press\\_releases/nr11-20-09.cfm](http://www.acog.org/from_home/publications/press_releases/nr11-20-09.cfm) When you bring them to your doctor, highlight the last sentence of paragraph four.

It is important to note that DES Daughters should continue with annual Pap/pelvic screenings even after a hysterectomy. While the cervix may have been removed in surgery, the vagina still needs to be examined annually for the aggressive DES-specific cancer.

There are no special gynecological screening recommendations for DES Granddaughters (children of DES Daughters and Sons). Unless research indicates otherwise, they do not appear to have the same cancer risk as DES

Daughters. That said, they should see their doctor if they experience unusual pain or bleeding.



## **DES DAUGHTERS SHOULD HAVE ANNUAL MAMMOGRAMS AFTER AGE 40**

The US Prevention Services Task Force (USPSTF) has issued new mammography recommendations. This government agency calls for starting mammograms at age 50 (not 40, as is the current guideline) and every two years thereafter for women with no elevated breast cancer risk.

**But research shows DES Daughters are at increased risk for the disease from age 40 on, so DES Action USA continues to recommend annual mammograms for DES Daughters beginning at age forty.**

Cumulative exposure to mammography radiation is a risk, though. Radiation, which is a known breast cancer causer, accumulates in women's bodies through the years, because it is not eliminated.

Dr. Jeffrey Tice, assistant professor of medicine at the University of California San Francisco was quoted in the 11/18/2009 SF Chronicle as saying, "Radiation causes one death for every 2,000 women screened annually starting at age 40, according to a study published in 2005 in the *British Journal of Cancer*. Another study shows that each mammogram increases the risk of breast cancer by two percent. Mammography also saves women's lives, so that's why it's a trade-off," Tice says.

For DES Daughters, the benefit of early detection seems to outweigh the radiation risk. Mammograms are the gold standard for breast cancer detection and there are no other risk-free diagnostic devices available at this time.

A major push is needed to develop new, safer, and effective breast screening tools to replace mammograms. It is appalling that has not happened yet.

In the meantime, it boils down to the familiar risk versus benefit equation. DES Action USA maintains its stance that DES Daughters should be vigilant in having annual mammograms starting at age 40, even knowing the radiation exposure risk. They should also learn to do monthly breast self exams and report unusual lumps to their doctors.