The Lebanese Society of Obstetrics and Gynecology
Women's health promotion series

Pap Smear, Mammogram & BMD

Important tests for women's health, when you should have them and what to know.

Pap Smear

What is it?

A pap test is a test of a sample of cell taken from a woman's cervix. The test is used to look for changes in the cells of the cervix that show cervical cancer or conditions that may develop into cancer. A pap smear can also detect changes in your cervical cells that suggest cancer may develop in the future. Detecting these cells early with a pap smear is your first step in halting the possible development of cervical cancer.

*In the early stages of cervical cancer, there are usually no symptoms. The only way to detect changes is by having a pap smear.

Who should have the test?

Pap screening should begin at age 21. Routine screening is recommended for women ages 21-29 every two years. For women 30 years or older who have had 3 consecutive normal test results, testing can be reduced to every three years.

How is it done?

A doctor uses a device called a speculum to widen the opening of the vagina so that the cervix can be examined. A plastic spatula and small brush are used to collect cells from the cervix. The cells are placed into a solution and sent to the lab for testing.

*The test is not painful, but the pelvic exam may be uncomfortable

Normal Results:

There are no abnormal cells present.

Abnormal Results:

Abnormal test results are grouped into categories:

-ASCUS or AGUS (atypical cells of uncertain significance): These changes may be due to HPV infection, but may also mean there are precancerous changes

-LSIL (low-grade dysplasia) or HSIL (high-grade dysplasia): this means precancerous changes are likely to be present. The risk of cervical cancer is greater with HSIL.

-Carcinoma in situ (CIS): This usually means the abnormal changes will likely become cancer.

-Atypical squamous cells (ASC-H): This means abnormal changes have been found and may be HSIL

-Atypical glandular cells (AGC): Cell changes are seen that suggest pre-cancer of the upper part of the cervical canal or inside the uterus

Before the test:

Avoid the following for 24 hours;
-Douching
-Having intercourse
-Taking a bath
-Using tampons

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Mammogram

What is it?
Mammography is a specific type of imaging that uses a low-does x-ray system to examine breasts. A mammogram is used to aid in the early detection and diagnosis of breast cancer.

*Mammography plays a central part in the early detection of breast cancers because it can show changes in the breast up to two years before a patient or physician can feel them

*Early detection of breast cancer with screening mammography means that treatment can be started earlier in the course of the disease.

Who should have the test?
Women should begin breast cancer screening at age 40 and have repeat mammograms every 1-2 years.

*Women with a mother or sister who had breast cancer should get yearly mammograms earlier than the age at which their youngest family member was diagnosed

How is it done?
One breast at a time is rested on a flat surface that contains the x-ray plate. A device called a compressor will be pressed firmly against the breast to flatten the breast tissue. The pictures are taken from several angles.

*The pictures aren't painful, but may be uncomfortable when they flatten the breast.

Normal Results:
Breast tissue that shows no signs of a mass or calcification is considered normal

Abnormal Results:
-A well outlined, regular, clear spot (more likely to be non-cancerous like a cyst)

-Masses or lumps

-Dense areas in the breast that can be cancer or hide cancer

-Calcifications, which are caused by tiny deposits of calcium in breast tissue (most are usually not a sign of cancer)

Who is more at risk for breast cancer?
-Personal history of breast cancer
-Family history of breast cancer
-Genetic alterations (inherited changes in BRCA1 and BRCA2)
-Breast density
-Certain breast changes found on biopsy
-Reproductive/menstrual history
-Long-term use of menopausal hormone therapy
-Radiation therapy
-Alcohol
-Diethylstillbestrol
-Body Weight
-Physical activity level

Before the test:
Do not wear deodorant, talcum powder under your arms or on your breasts on the day of the exam. Obtain prior mammograms and make them available to the radiologist at the time of the exam. Remove all jewelry from neck and chest area.

BMD

What is it?
A bone mineral density (BMD) test measures how much calcium and other types of minerals are present in a section of your bone. The test is used to predict your risk of bone fractures in the future and detect osteoporosis. Bone fracture risk is highest in people with osteoporosis.

Who should have the test?
All women over age 65.
Women under age 65 with risk factors such as;
-Bone fracture caused by normal activities
-Chronic rheumatoid arthritis, chronic kidney disease, eating disorders
-Early menopause
-History of hormone treatment for prostate or breast cancer
-Significant loss of height
-Smoking
-Strong family history of osteoporosis
-Taking corticosteroid medications every day for more than 3 months
-3 or more drinks of alcohol/day on most days

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How is it done?

A duel-energy x-ray absorptiometry (DEXA) scan uses low dose x-rays to measure bone density. A central DEXA measures your lower spine and hip, a peripheral DEXA measures wrist, fingers, leg or heel.

*The BMD test is not painful

Normal Results:

The results of your test are reported as a "T-score" and "Z-score"

The T-score compares your bone density with that of healthy young women. The Z-score compares your bone density with that of other people your age, gender and race.

In either score, a negative number means you have thinner bones than the standard.

*A T-score is within normal range if it is -1.0 or above.

Abnormal Results:

A T-score between -1.0 and -2.5 indicates the beginning of bone loss (osteopenia).

A T-score below -2.5 indicates osteoporosis.

Before the test:

Remove any jewelry before the test, inform your doctor if you may be pregnant.

How to increase bone strength and reduce chances of fractures:

Combine calcium and vitamin D supplements with weight-bearing exercise, weight training and using medicines such as calcitonin, alendronate, risedronate, or ibandronate.

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