Cancer risk reduction

• Practice healthy exercise habits
• Avoid using tobacco products, including smoking
• Limit exposure to second hand smoke
• Limit alcohol consumption
• Use sunscreen
• Avoid tanning beds
• Examine your skin regularly and recognize changes in moles
• Use protective barriers during all types of sexual interactions
• Know your personal and family cancer history
• Ask if genetic counseling is appropriate for you
• Ask your primary care provider if the HPV vaccination is appropriate for you
• Be aware of changes to your body such as:
  - Differences in bowel movements and urination
  - New or unexplained pain
  - Sudden changes in appetite, unplanned weight loss or gain
  - Unusual swelling
  - Other irregularities

USPSTF guidelines

The United States Preventative Services Task Force (USPSTF) is a group of medical professionals who come together to decide on general screening recommendations for Americans. At the Swedish Cancer Institute, we seek to provide the highest level of care to our patients. Therefore, after thorough review by our expert physicians, our recommendations for cancer screening always meet, but often go above and beyond, the recommendations of the USPSTF.

Shared decision making

As with any medical decision, it is always important to speak to your doctor to determine which screenings are right for you.

Screening opportunities

The Swedish Cancer Institute offers screening services. If you have questions, concerns or would like to schedule a screenings appointment, please call 1-855-XCANCER (1-855-922-6237).

Resources

• To connect with us about a screening appointment, please call 1-855-XCANCER (1-855-922-6237).
• To learn more about genetic counseling or schedule an appointment with the Hereditary Cancer Clinic, please call 206-215-4377.
• If you believe or are unsure about your risk of breast or ovarian cancer, please call the High-Risk Breast and Ovarian Cancer Clinic about a risk assessment and plan at 206-215-6400.
• To learn more about the Lung Cancer Screening Program and smoking cessation, please call 206-386-6800.
• For more wellness information, visit us online or stop by the Cancer Education Center located at the Swedish Cancer Institute.
**Cancer risk factors**
If you check one or more of the following statements, you may be at an increased risk of cancer. Please speak with your doctor about your best screening options.

- **Anal:**
  - If you engage in anal sex
  - If you are HIV-positive, immune-suppressed
  - If you are HPV-positive or have an HPV-positive partner

- **Breast and ovarian:**
  - If you have any had any recent changes in your breasts (lumps, discharge, skin changes)
  - If you have had a biopsy showing abnormal results
  - If you have had radiation therapy to the chest before the age of 30
  - If you have had breast or ovarian cancer
  - If you have a family history of breast or ovarian cancer
  - If you are of Ashkenazi Jewish heritage
  - If you have a mutation in BRCA genes

- **Cervical:**
  - If you have used an oral birth control for more than three years
  - If you had sex at a young age
  - If you have had multiple sexual partners
  - If you or a partner is HPV-positive
  - If you are a smoker

- **Colon:**
  - If you have a family history of colon cancer

- **Liver:**
  - If you have any form of cirrhosis
  - If you have hepatitis B or C

- **Lung:**
  - If you are between the age of 55-77
  - If you currently smoke or have quit smoking in the last 15 years
  - If you have have smoked at least 1 pack of cigarettes per day for 30 years or 2 packs per day for 15 years

- **Mouth and throat:**
  - If you use tobacco and/or alcohol
  - If you or a partner is HPV positive

- **Prostate:**
  - If you have a family history of prostate cancer
  - If you are of African-American heritage

- **Skin:**
  - If you have a history of sunburns, especially early in life

- **Inherited genetic risk:**
  - If you have a known inherited genetic risk such as:
    - BRCA 1
    - BRCA 2
    - Lynch Syndrome

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**General cancer screening guidelines**
Screening in medicine specifically refers to testing a population showing no symptoms or signs of disease. It does not refer to testing patients being evaluated for symptoms.

### Breast cancer
- Yearly screening mammogram for women age 40 and older
- Yearly clinical breast exam
- Patients who are at high risk should speak with their doctor about more intensive screening recommendations or a referral to the High-Risk Breast and Ovarian Cancer Clinic.

### Cervical cancer
- Age 21-29: Pap smear every 3 years
- Age 30-65: Pap smear every 3 years or, for patients who want to lengthen the screening interval, pap smear and HPV test every 5 years
- Age 65+: Screenings may not be needed if you’ve had normal test results for the past 10 years; please speak with your doctor.

### Colon cancer
- Age 50-75: Colonoscopy every 10 years
- Age 50-75: Stool based testing every year. An example of a stool-based test is the fecal immunochemical test (FIT).
- Age 76+: Speak with your doctor about repeat screenings

### Prostate cancer
- Age 55+: Discuss screening options with your primary care provider about the potential benefits versus risks of screening for prostate cancer.