

Cancer of the Vagina

You will be looked after by the gynaecology - oncology multidisciplinary team (MDT). The professionals who make up the MDT are experts in gynaecological cancer. They meet weekly to discuss your test results and recommend a treatment plan for you. This plan will be conveyed to you in clinic, unless alternative arrangements have been made, and a written letter of the discussion offered. Please do ask for this letter if for any reason it is not offered.

The Vagina

The vagina is a muscular tube that extends from the cervix (neck of the womb) to the vulva (folds of skin between a woman's legs). Blood during a woman's period passes out of the body through the vagina, and it is the passageway through which babies are normally born.

What causes cancer of the vagina?

Cancer of the vagina is rare. The exact cause is unknown. We know that some virus infections can produce changes in the vagina.

Symptoms

The most common symptoms of vaginal cancer are a blood-stained vaginal discharge, bleeding after intercourse and pain. Problems with passing urine can also occur and sometimes pain in the rectum (back passage).

Tests for diagnosis

Cervical smear: You may have this test to see if there are any abnormalities in cells of the cervix.

Biopsy: A small sample of tissue is taken from any abnormal looking areas inside the vagina and is examined by a histopathologist under the microscope.

Colposcopy: The vagina and cervix can be examined thoroughly using a colposcope (like a small microscope). A biopsy may be taken of any abnormal looking areas. This procedure is carried out in the out patient department. The biopsy is examined by histopathologists in the laboratory. They will look for abnormal cells under the microscope.

Examination under anaesthetic: This allows the doctor to examine you thoroughly without causing you any discomfort and again biopsies may be taken. You will need to be admitted to hospital for this test.

CT Scan: In this scan several small x-rays are taken of the area and fed into the computer. This builds up a detailed picture of the size and position of the cancer. Prior to the scan you will be asked to have a drink of contrast (a special liquid) to help produce good images of the bowel. The scan can take 15 – 30 minutes. You will receive specific information about the scan with your appointment letter.



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MRI scan: This test is similar to the CT scan but uses magnetism instead of x-rays to build up cross-sectional pictures of your body. You will be asked to complete a safety questionnaire to establish if you have any metal work anywhere in your body, for example a pacemaker or replacement joint. The scan machine is a tunnel but is open at both ends. If you experience feelings of anxiety or claustrophobia you may find the prospect of having this test worrying. If this concerns you, please speak to your specialist nurse or doctor for advice. You may be given an injection prior to the scan to ensure good pictures are obtained. You will be informed that the injection may cause temporary blurred vision; however the effects of this will have resolved before the end of your scan. The scan can take up to an hour to perform and is very noisy so you will be asked to wear headphones; you may wish to bring a CD with you which can be played into the headphones during the scan. You will receive specific information about the scan with your appointment letter.



Chest X-ray: This is performed to assess the condition of your lungs prior to undergoing an anaesthetic and operation.

Blood tests: We may ask you to have blood tests to check your red blood cell count and possibly your kidney and liver function as an indicator of your general health.

Treatment

Surgery: If surgery is the recommended treatment, part of the vagina will be removed along with some of the surrounding normal tissue.

It may be recommended to remove the cervix, womb, fallopian tubes, ovaries and lymph nodes. With surgery to the lymph glands there is a risk of developing lymphoedema, a condition which causes swelling to one or both legs.

Some women may need a larger operation which removes most of the vagina and rarely the bladder or part of the bowel.

Radiotherapy: This may be recommended instead of surgery if the cancer has spread beyond the upper third of the vagina. Chemotherapy is often also given to enhance the effectiveness of the radiotherapy.

Emotions and spirituality

It is not unusual to feel overwhelmed after being told of a cancer diagnosis. Many different emotions arise which can cause confusion and frequent mood changes. Reactions differ from one person to another – there is no right or wrong way to feel.

Treatment for vaginal cancer can affect a woman physically, emotionally and sexually. The gynaecology-oncology specialist nurse will support you, provide information and refer you to specialist services if needed.

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Spiritual needs are individual and dependent on personal and philosophical beliefs. The gynaecology – oncology team will respect your beliefs and will try to meet your needs through the services available at the hospital and Big C cancer information centre.

Further help

If you feel you would like further information and/or support please do not hesitate to contact: the Gynaecology Oncology Specialist Nurses on 01603 287742.

The Big C Family Cancer Information and Support Centre is based at the front of the hospital. Open Monday – Friday 09.30 – 16.30 Telephone: 01603 286116 www.thebigccancercentre.co.uk
Do call in, no appointment needed.

Pandora's Box is a local self help group for anyone affected by a gynaecology cancer.
Telephone: 07826 342204

Macmillan Cancer Support can supply helpful booklets free of charge. These are accessible by visiting Macmillan.org.uk or telephone: 0808 808 0000. These can also be accessed for you by your Gynaecology specialist nurse.

Videos about coming into hospital that are available on Youtube - <https://www.youtube.com/watch?v=2nW8khbB8gA>

