

Women's Health Care

UnitedHealthcare Community Plan does not provide medical treatment or medical advice. Please do not contact UnitedHealthcare Community Plan regarding medical questions. If you do have a medical question, contact your primary care provider. In the event of an emergency, go to the nearest emergency room.

Women's Health Topics:

At United Healthcare Community Plan, we encourage women to have preventive services. These preventive services have a special focus on breast and cervical cancer screenings.

We provide information to women about risk factors and standards for how often to be tested. We also send reminders to women who may not have been tested.

Some facts about breast cancer

- Breast cancer is the most common form of cancer in American women. The risk increases as a woman ages, if she has a family history of breast cancer, has never had children, or takes hormone replacement therapy. However, 80 percent of cases occur in women who have no risk factors.
- Getting a breast x-ray (mammogram) is the best way to find breast cancer early. This is a simple procedure that can reveal lumps up to three years before they can be felt.
- Surgery is the most common treatment for breast cancer. When cancer has been confined to the breast area, more than 95% of women who find and treat breast cancer early will be cancer-free after five years.
- The risk of breast cancer rises sharply after age 40.
- The risk of an American woman developing cancer over her lifetime is a little more than one in three.

Sources:

1. ACS <http://www.cancer.org/research/cancerfactsstatistics/cancerfactsfigures2015/>
2. CDC http://www.cdc.gov/cancer/breast/basic_info/risk_factors.html

Importance of Mammography

Screening Mammography

A mammogram is a breast X-ray. Mammograms are safe, quick, and cause minimal discomfort. The amount of radiation that the test exposes you to is similar to a dental X-ray. Although breast self-examinations are important, an X-ray can detect a lump too small to feel.

When should I have a Mammogram?

Discuss your risk factors and screening needs with your primary care provider.

UnitedHealthcare has adopted guidelines from the [U.S. Preventive Services Task Force](#):

It is suggested that mammography screenings for women aged 50 to 74 years should occur every other year. The decision to start these mammography screenings before the age of 50 years should be an individual one and take patient context into account. Please check with your primary care provider regarding mammograms beginning at age 40.

Sources:

1. [CDC - http://www.cdc.gov/cancer/breast/](http://www.cdc.gov/cancer/breast/)
2. U.S. Preventive Services Task Force (USPSTF) https://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/b_reast-cancer-screening1
3. CDC - https://www.cdc.gov/cancer/breast/basic_info/mammograms.html

The facts about cervical cancer

- All women are at risk for cervical cancer.
- Early detection and treatment increases the chance of survival.
- Pap tests can help in the early detection of cancer.

In the United States, the death rate from cervical cancer has declined greatly in the last 40 years. This is mainly because of the Pap test, which can find pre- cancerous cells early. It represents the best test for cervical cancer.

Screening Pap test

The Pap test is a simple, painless procedure. It can be done in a primary care provider's office or clinic. It only takes a few minutes.

When should I have a Pap test?

Discuss your risk factors and screening needs with your primary care provider.

UnitedHealthcare Community Plan has adopted the guidelines below from the [U.S. Preventive Services Task Force](#):

The USPSTF recommends screening for cervical cancer every 3 years with cervical cytology alone in women aged 21 to 29 years. For women aged 30 to 65 years, the USPSTF recommends screening every 3 years with cervical cytology alone, every 5 years with high-risk human papillomavirus (hrHPV) testing alone, or every 5 years with hrHPV testing in combination with cytology (cotesting).

Routine Pap tests are no longer recommended for women who have had a total hysterectomy for a benign disease or are over age 65 if they have had adequate recent screening with normal Pap smears and are not otherwise at high risk for cervical cancer.

Sources:

1. CDC - http://www.cdc.gov/cancer/cervical/basic_info/risk_factors.html
2. <https://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/cervical-cancer-screening>

High risk

Women at higher than average risk for cervical cancer should have more frequent testing. You are at high risk if you:

- Began sexual activity as a teenager, and/or had many partners. Have never had a Pap test or have not had one for many years. Currently have more than one sexual partner.
- Have a history of sexually transmitted disease(s).
- Have a history of abnormal Pap tests or a malignant/pre-malignant diagnosis.
- Are infected with the virus that causes genital warts (human papillomavirus or HPV). Use tobacco.
- Have HIV infection.

Sources:

1. CDC http://www.cdc.gov/cancer/cervical/basic_info/risk_factors.html
2. <https://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/cervical-cancer-screening>

What can a Pap test reveal?

A Pap test can show abnormalities that may lead to cervical cancer. These abnormalities can be treated before cancer develops. Most cancers of the cervix can be prevented. That is why it's important to have regular Pap tests.

Before your Pap test

You need to prepare for the Pap test. You should schedule your appointment so that the test is done about two weeks after the start of your period. It should not be done during active bleeding.

It is best not to douche before the test. That's because signs of abnormal cells or infections may be washed away. Refraining from having intercourse for 24-48 hours before your appointment also is recommended.

It is important to tell your primary care provider about any changes in your sexual history, medications (including over-the-counter medicine) or physical condition. That information can help with your Pap test.

Source:

1. CDC - http://www.cdc.gov/cancer/cervical/basic_info/screening.html

Chlamydia screening

Chlamydia is a curable sexually-transmitted disease. You can get it from all types of sexual contact. It can cause serious problems in men, women, and newborn babies of infected mothers.

Who is at risk?

- Anyone having unprotected sex
- Sexually active young people are at highest risk
- Men who have sex with other men are at risk also

Why is chlamydia called the silent epidemic?

- Majority of the infected have no symptoms.
- Untreated chlamydia can cause infertility, chronic pelvic pain, and pregnancy outside the uterus.
- Chlamydia can increase your risk for HIV, if you are exposed.
- Chlamydia can cause newborns to have eye infections and/or pneumonia.
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What are the symptoms of chlamydia?

- Abnormal vaginal or penile discharge (mucus or pus) or bleeding
- Painful urination
- Painful intercourse
- Symptoms usually appear one-to-three weeks after infection
- Symptoms may be mild or absent

Source: CDC - <http://www.cdc.gov/std/chlamydia/stdfact-chlamydia.html>

Who should be screened for chlamydia?

The USPSTF recommends screening for chlamydia and gonorrhea in sexually active women age 24 years and younger and in older women who are at increased risk for infection.. Talk to your primary care provider about your need to be tested. All sexually-active women of any age with the following risk factors for chlamydia should be tested:

- New or Multiple sexual partners
- History of sexually-transmitted diseases (STD)
- Not using condoms consistently and correctly
- Exchanging sex for money or drugs

How is chlamydia infection treated?

It is treated with certain oral antibiotics.

All sexual partners need to be tested and treated. Take all prescribed medicine even after symptoms get better.

Call your physician if symptoms do not disappear one-to-two weeks after finishing your medicine.

Source: <http://www.cdc.gov/std/chlamydia/treatment.html>

Remember to discuss your risk factors with your primary care provider.

We care about your health and encourage you to talk with your primary care provider if you have questions about your health or screening needs.

If you need help finding a primary care provider, please call the customer service number on your member ID card. TTY/TDD (for the hearing impaired) call 711.