

Your Health



 Health Partners **Newsletter** January 2022



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Dry January

Get your YOU back

6.5 million people took on the biggest Dry January ever in 2021. It's the UK's one-month alcohol-free challenge. Get your fun back. Get your energy back. Get your calm back. Get your YOU back.

Dry January means going alcohol-free for the month of January and if you slip – you can start again the next day for another month. Going dry can bring some very obvious benefits - but the really good stuff is under the surface...

What happens when you stop drinking?

Those who did Dry January in the past noticed the following:

- 70% of people sleep better
- 86% of people save money
- 65% of people notice generally improved health.

Other benefits of stopping drinking for a month:

- Lowers blood pressure
- Reduces diabetes risk
- Lowers cholesterol
- Reduces levels of cancer-related proteins in the blood.

It also helps many people to think a little more about their drinking habits – six months after Dry January, 70% those who took part noticed they were still drinking healthily, i.e. within healthy limits.

What are the healthy limits?

To keep health risks from alcohol to a low level if you drink most weeks:

- Men and women are advised not to drink more than 14 units a week on a regular basis
- Spread your drinking over three or more days if you regularly drink as much as 14 units a week
- If you want to cut down, try to have several drink-free days each week
- Fourteen units is equivalent to six pints of average-strength beer or ten small glasses of low-strength wine.

Check out these links/sources:

Scotland: <https://www.nhsinform.scot/healthy-living/alcohol/low-risk-drinking-guidelines>

England: <https://www.nhs.uk/live-well/alcohol-support/calculating-alcohol-units/>

Wales: <https://phw.nhs.wales/topics/alcohol/>

Dry January: <https://alcoholchange.org.uk/get-involved/campaigns/dry-january/why-do-dry-january-1/why-do-dry-january>





What is Cervical Cancer?

Cervical cancer is a cancer in the cervix, the opening of the womb from the vagina. It is possible for anyone with a cervix (women, trans men, people who are non-binary who were assigned female at birth, and cis gender women) of any age to develop cervical cancer.

Traditionally the condition mainly affects those who are sexually active between the ages of 30 and 45 years; however, Cancer Research UK data demonstrates that the peak age of incidents has reduced to 25 to 29 years of age.

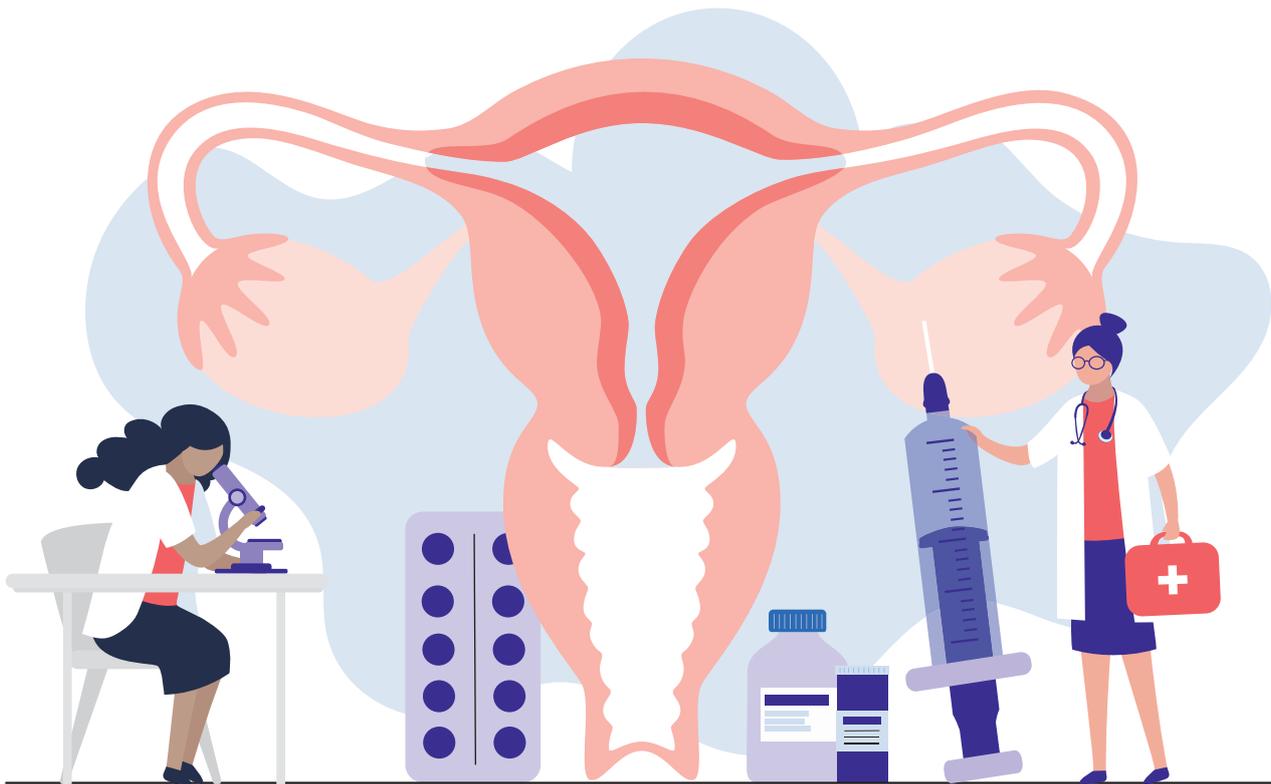
How common is cervical cancer?

- There are 3,200 new cervical cancer cases in the UK every year
- Cervical cancer accounts for 2% of all new cancer cases in females in the UK
- Incidence rates for cervical cancer in the UK are highest in females aged 30 to 34
- Over the last decade, cervical cancer incidence rates have remained stable in females in the UK.

What are the symptoms?

Cancer of the cervix often has no symptoms in its early stages and may only be detected after abnormal cervical screening (smear test).

Symptoms can be subtle and may be attributed to other benign gynaecological conditions - or there may be no symptoms.



When symptoms are present the most common ones are:

- Abnormal vaginal bleeding
- Vaginal bleeding between periods
- Vaginal bleeding after sex
- Vaginal bleeding after the menopause.

Other symptoms may include painful sexual intercourse and abnormal vaginal discharge.

Abnormal vaginal bleeding does not mean that you have cervical cancer, but you should see a GP as soon as possible to get it checked out.

If a GP thinks that you might have cervical cancer, you should be referred to see a specialist within two weeks.

What increases your risk of cervical cancer?

Human Papilloma Virus (HPV): almost all cases of cervical cancer are caused by HPV. This is a very common virus that can be passed on through any type of sexual contact with a man or a woman.

There are more than a hundred types of HPV, many of which are harmless. However, some types can cause abnormal changes to the cells of the cervix, which can eventually lead to cervical cancer.

There are two strains of HPV (HPV 16 and HPV 18), which are known to be responsible for most cases of cervical cancer.

They do not have any symptoms, so individuals will not realise that they have it. These infections are very common, and most people do not develop cervical cancer as a result.

Using condoms during sex offers some protection against HPV but it cannot always prevent infection. This is because the virus is also spread through skin-to-skin contact of the wider genital area.

The HPV vaccine is routinely offered to:

- England: all children aged 12 to 13 years (born after 1 September 2006)
- Scotland: every S1 pupil
- Wales: all 12 and 13 year olds (school year 8).

Other sexually transmitted infections:

- The risk of cervical cancer may be increased in individuals who have a sexually transmitted infection alongside HPV
- Individuals with both HPV and chlamydia might have a higher risk
- HIV or AIDS increases the risk.

Smoking: smoking increases the risk of cervical cancer and makes it harder to treat abnormal cells in the cervix.

Contraceptive pill: one in every ten cases of cervical cancer is linked to taking the contraceptive pill. Taking the pill for more than five years increases the risk of cervical cancer. The increased risk begins to drop as soon as you stop taking it. After ten years, the risk is the same as if you had never taken the pill.

The pill can also slightly increase the risk of breast cancer but it is important to know that taking the pill can help reduce the risk of womb and ovarian cancers.

How many children you have and when: women who have had children are at an increased risk of cervical cancer compared to those who have not.

Having your first baby before the age of 17 also gives a higher risk compared to those who have had their first baby after the age of 25. The reasons for this are unclear.

Family history: you have an increased risk of cervical cancer if your mother, sister or daughter has had cervical cancer.

Previous cancer: you have an increased risk of cervical cancer if you have had cancer of the vagina, vulva, kidney or urinary tract.



What is Cervical Cancer?

What is the best way to protect yourself from cervical cancer?

The best way to protect yourself is by attending for cervical screening (previously known as a “smear test”). Cervical screening checks the health of your cervix. It is not a test for cancer; it is a test to help prevent cancer.

The cervical screening programme is available for eligible individuals:

- England: between the ages of 25 to 49 every three years. Those aged 50 to 64 are offered screening every five years
- Scotland: every five years for those between 25 and 64 years of age. Anyone on non-routine screening – where screening results have shown changes that require further investigation/follow-up – will get an invitation up to 70 years of age

- Wales: generally, individuals aged 25-49 are invited every three years; individuals aged 50-64 are invited every five years.

During cervical screening, a small sample of cells is taken from the cervix and checked under a microscope for abnormalities. In some areas, the screening sample is first checked for human papilloma virus (HPV). An abnormal cervical screening test result does not mean you have cancer.

Most abnormal results are either due to signs of HPV, the presence of treatable precancerous cells or both, rather than cancer itself.

You should be sent a letter confirming when it is your time for your screening appointment. Contact your GP if you think that you may be overdue.

Find out more: <https://www.jostrust.org.uk/>





What is Love Your Liver

Love Your Liver is a national campaign devoted to liver health awareness, giving people the key steps needed to keep their liver healthy. 90% of liver disease cases can be prevented.

Why love your liver?

You only have one liver, so it is important to know how to look after it. Your liver is the largest organ inside your body and does hundreds of essential jobs, e.g.

- Fighting infection and disease
- Destroying poisons and drugs (including alcohol)
- Cleaning the blood
- Controlling cholesterol
- Processing food once it has been digested.

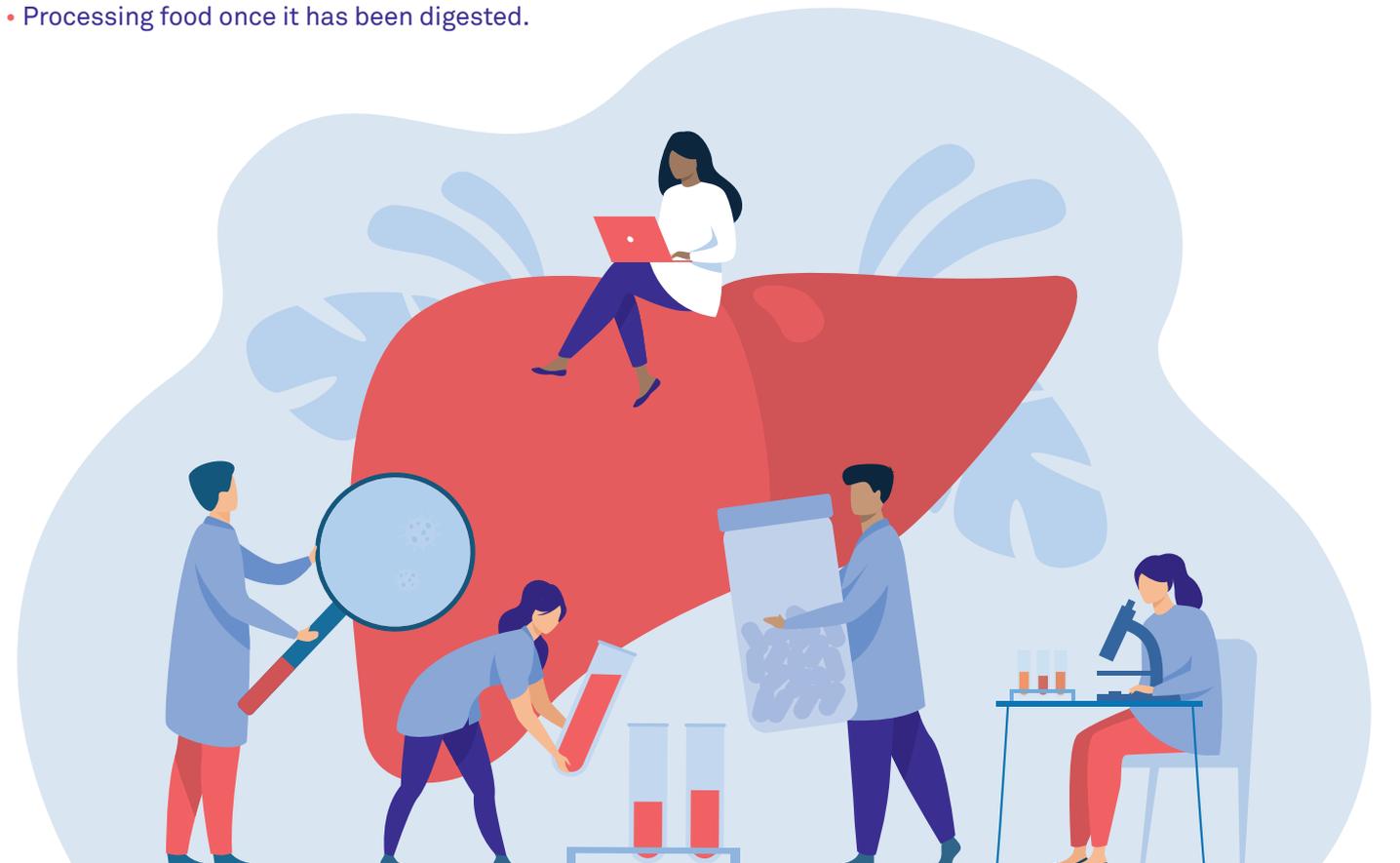
It works hard and can take a lot of abuse, but it is like an elastic band – it can only stretch so far before it breaks.

What can you do to love your liver?

Cut down on alcohol

If you drink over the recommended daily guidelines (see Dry January section), your liver will not be able to process the alcohol you consume quickly enough, which damages the cells in your liver. Try to:

- Drink no more than 14 units of alcohol per week
- Take three days off alcohol every week to give your liver a chance to repair itself
- Avoid alcohol if you are pregnant or trying to conceive.



Keep to a healthy weight

A healthy liver should contain little or no fat. But in some people fat builds up in the liver. This leads to a condition called non-alcohol related fatty liver disease (NAFLD). If fatty deposits build up over a long time they can damage the liver and stop it working properly. Reduce the risk of NAFLD by:

- Keeping to a healthy weight
- Eating a healthy balanced diet – get your five fruits and vegetables a day
- Getting more physically active.

Protect yourself from viral Hepatitis

Blood-borne viruses such as Hepatitis B and C can cause permanent liver damage and increase the risk of liver cancer. Hepatitis A and E are spread by faeces that carry the infection (usually through contaminated food or water). Avoid these viruses by:

- Getting vaccinated against Hepatitis A when travelling abroad (there is no vaccine for Hepatitis C or E). Hepatitis B vaccination is only recommended where there is a specific risk, e.g. long stay travel to Hepatitis B endemic areas or working in healthcare abroad, etc
- Never sharing personal items like toothbrushes, razors, nail scissors or tweezers
- Practising safer sex, e.g. using a condom
- Using only licensed tattoo and piercing parlours and making sure all equipment used has been sterilised
- Always using clean needles, syringes and other equipment if using drugs.

Take a look at this video – are you at risk of liver disease? <https://youtu.be/Evm-3BPRobA>

Sources

<https://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/cervical-cancer#heading-Zero>

<https://www.nhs.uk/conditions/vaccinations/hpv-human-papillomavirus-vaccine/>

<https://111.wales.nhs.uk/livewell/vaccinations/HPVvaccine/>

<https://www.nhsinform.scot/healthy-living/immunisation/vaccines/hpv-vaccine>

<https://www.nss.nhs.scot/specialist-healthcare/screening-programmes/cervical-screening/>

<https://phw.nhs.wales/services-and-teams/cervical-screening-wales/what-is-cervical-screening/#Who%20should%20have%20Cervical%20creening?>

<https://www.gov.uk/guidance/cervical-screening-programme-overview#target-population>

<https://britishlivertrust.org.uk/information-and-support/liver-health-2/love-your-liver/>

*includes women, trans men, people who are non-binary who were assigned female at birth, and cis gender women.