FAMILY HISTORY & CANCER



There are five main types of cancer that affect a woman's reproductive organs: cervical, ovarian, uterine, vaginal, and vulvar. As a group, they are referred to as gynecologic (GY-neh-kuh-LAH-jik) cancer.

This fact sheet about family history and cancer is part of the Centers for Disease Control and Prevention's (CDC) Inside Knowledge: Get the Facts About Gynecologic Cancer campaign. Knowing more about family or personal history of cancer may help women to know if they have an increased risk of developing gynecologic and other cancers.



What is family history of cancer?

Your family medical history is a record of diseases and conditions that run in your family, especially among close relatives. A family history of breast, ovarian, uterine, and colorectal cancers can increase a woman's risk for developing these cancers.

What can family history tell me about my risk?

Knowing your family history helps provide clues about your chances of getting cancer. You may share similar genes, habits, and environments that can affect your cancer risk. Telling your doctor your family history is important. It will also guide you and your doctor in deciding what tests you need, when to start, and how often to be tested.

Knowing your family history also helps you and your doctor decide if genetic counseling or testing may be right for you. While genetic counseling and testing are not recommended for all women, it is important for all women to know their family history.

How do I collect family history information?

- · At family gatherings, ask questions about your relatives' history of cancer.
- Look through family records to find information about relatives who have had cancer (such as family trees, birth and death certificates, photo albums, and obituaries posted online or clipped from the newspaper).

Which hereditary conditions increase your chances of getting cancer?

The most common hereditary conditions that increase your cancer risk are Hereditary Breast and Ovarian Cancer Syndrome and Lynch Syndrome.

 Women with Hereditary Breast and Ovarian Cancer (HBOC) **Syndrome** have an increased risk for breast, ovarian, and several other cancers. Having HBOC means you have mutations (changes) in your BRCA1 or BRCA2 genes. Family history information helps identify these women so they can be referred to genetic counseling to consider genetic testing.

 Women with Lynch Syndrome are at increased risk for uterine, colorectal, and ovarian cancers. Usually, people with Lynch Syndrome have a family history of these cancers.

What if cancer does not run in my family?

Women with no family history may still get cancer. You are considered to be at average risk of developing ovarian, uterine, colorectal, and breast cancers if you do not have a family history of these cancers. So you should get screened regularly for breast, cervical, and colorectal cancers. Knowing your family history will help you and your doctor make decisions about when and how often to get screened.

What kind of information do I need to collect?

Gather information about your:

- · Parents and grandparents
- · Sisters, brothers
- Children
- · Aunts, uncles, nieces, nephews

Information should include:

- · Who had cancer; what kind?
- · Age when diagnosed.
- Are they still living? If not, at what age did they die and what was their cause of death?

This is especially important if you have a first-degree relative (parent, sibling, or child) who was diagnosed before age 50 with ovarian, uterine, breast, or colorectal cancer.

It is also important to know if you have at least two or three other relatives (grandparents, aunts, uncles, nieces, nephews) on either your mother's or father's side who have had ovarian, uterine, breast, or colorectal cancer.

What should I do if cancer runs in my family?

Here are things to know:

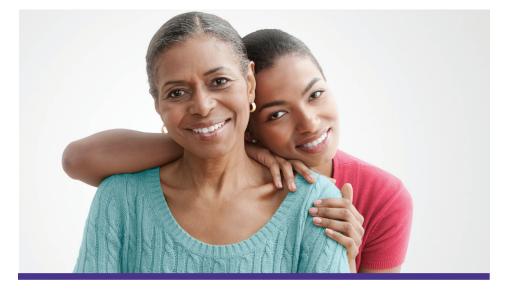
- Many women have a family history of cancer, but few carry a genetic mutation that increases their cancer risk.
- Knowing your family history and telling your doctor about it is the first step in helping you understand your chances of developing cancer.
- You may benefit from genetic counseling and testing to find out if you have a genetic mutation that affects your cancer risk.

What is genetic counseling?

If your family history suggests that you may carry a genetic mutation, your doctor can refer you to genetic counseling.

A genetic counselor will ask you about your family's health history and discuss whether genetic testing may be right for you.

There are many things to consider when you're thinking about genetic testing. Counseling helps to focus on what's right for you.



What is a genetic test?

A genetic test uses your saliva or blood to look at your DNA. This can show if there are mutations or changes in a single gene (or several genes) that may place you and your family at greater risk for developing a disease, such as cancer.

Are certain groups more likely to have genetic mutations?

Certain groups may be more likely to carry a genetic mutation that increases their risk of developing cancer, including people with:

- · Strong family histories of cancer.
- Family members diagnosed with ovarian, uterine, colorectal, or breast cancer at or before age 50.
- Ancestors from Eastern Europe or who are Ashkenazi Jewish.

What should I do if I have a genetic mutation?

Don't panic. Having a genetic mutation that increases your cancer risk does not mean you will get cancer. There are several things that you can do to lower or manage your cancer risk. Talk to your doctor about:

- Tests that may benefit you.
 You may need to be tested earlier and more often than average-risk women.
- Medication that could reduce your cancer risk.
- Risk-reducing surgery.
- Making healthy choices, like quitting smoking, not drinking alcoholic beverages, and maintaining a healthy weight through good nutrition and regular physical activity.

For additional resources visit cdc.gov/cancer/knowledge



www.cdc.gov/cancer/knowledge 800-CDC-INFO

