

Cervical Dysplasia: Complementary/Alternative Medicine

QUICK REVIEW

Cervical dysplasia reflects abnormal cell growth on the cervix and is usually a pre-cancerous condition.

- Severe surgical dysplasia (Class IV Pap smear) requires cone biopsy or a similar procedure.

Risk factors for cervical dysplasia include: early age at first intercourse; smoking; multiple sexual partners; exposure to viruses; low income; oral contraceptive use; and many nutritional factors.

Women who have low vitamin C levels are 6.7 times more likely to develop

cervical cancer than women with sufficient vitamin C levels.

The higher the intake of dietary sources of beta-carotene, the lower the rate of cervical dysplasia.

Many abnormal Pap smears reflect folic acid deficiency rather than true dysplasia.

In placebo-controlled studies, folic acid supplementation (10 mg per day) has resulted in improvement or normalization of Pap smears in patients with cervical dysplasia.

Selenium levels are significantly lower in patients with cervical dysplasia.

TREATMENT SUMMARY

For the treatment of a Class II or III Pap smear, the program outlined in this chapter can be used if there are regular repeat Pap smears (every one to three months). For Class IV or Class V Pap smears or unresponsive cases, please consult a physician immediately for proper medical treatment.

Diet

Consumption of animal products should be decreased, particularly animal fats. Follow the recommendations given in PREMENSTRUAL SYNDROME for reducing estrogen levels.

Nutritional Supplements

Folic acid: 10 mg per day for three months, then 2.5 mg per day until normalization of the Pap smear occurs
Vitamin B6: 25 mg three times per day

Vitamin B12: 1 mg per day
Beta-carotene: 25,000-50,000 IU per day

Vitamin C: 500-1,000 mg three times per day

Vitamin E: 200-400 IU per day
Selenium: 200-400 mcg per day