

## Update On Cervical Cancer Screening

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The Papanicolaou (Pap) test is the evaluation of a sample (smear) of cervical cells to screen for cervical cancer. Annually in the U.S., 12,000 cases of new cervical cancer and 4000 cancer-related deaths occur. In the last 50 years, there has been a 75 percent reduction in cervical cancer incidence and deaths in developed countries. From 2000-2004, the average age of diagnosis of cervical cancer was 48 years of age. The major risk for developing cervical cancer is the human papilloma virus (HPV) and conditions which cause a lowered immune system (immunocompromised). Women exposed to diethylstilbesterol before birth, those with history of cervical cancer, and women with diminished immune system (i.e. HIV/AIDS) should have more aggressive screening for cervical cancer.

For healthy women with a normal immune system, the American College of Obstetrics and Gynecology has issued new guidelines for screening for cervical cancer with the Pap test:

A Pap test with reflex HPV testing every 3 years starting at age 21 until age 29

Starting at age 30 to 65, a Pap test with reflex HPV testing every 3 years

Alternatively, for ages 30 to 65, a Pap test plus HPV testing every 5 years if both tests are normal

Screening is unnecessary after age 65

Continue screening for women who have received the HPV vaccine

No pap test needed in women after complete hysterectomy

Since most cases of cervical cancer are caused by the HPV virus, screening for abnormal cells (Pap test) and for the HPV virus significantly increases the likelihood of detecting cancer cells. This along with the knowledge that cervical cancer occurs 20-25 years after exposure to HPV supports the five-years interval for women 30-65 years of age.

For women with an abnormal Pap test, the laboratory can automatically (reflex) test for HPV. In this situation, the recommendation is to repeat the Pap test every 6 months for 1 year with reflex HPV. Under all circumstances, if the HPV test comes back positive, referral to a gynecologist for further testing is appropriate. Otherwise, if repeat testing is normal, routine screening may resume

In the future, we may be able to identify certain markers expressed by abnormal cells which may be more predictive of the presence of cancer.

I recommend that all healthy women over age 21 continue to have a yearly pelvic exam in order to detect other female cancers and diseases. .

As these are general guidelines, they may not apply to every woman. However these recommendations do reflect an advance in the earlier detection of cervical cancer.

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source: Cleveland Clinic Journal of Medicine and Up To Date