NORTH COAST FAMILY MEDICAL GROUP

FACTS ABOUT CERVICAL CANCER SCREENING

North Coast Family Medical Group recommends annual pap smears for women ages 21-65. Some women can be screened less frequently. Women should discuss their individual risk factors with their doctor or PA. Below is an overview of cervical cancer screening so that you may have an informed discussion.

CERVICAL CANCER SCREENING OVERVIEW — The Pap smear is a common test used to screen women for cervical precancer or cancer. The cervix is located at the lower end of the uterus. The surface of the cervix includes several layers of cells which are tested during a pap smear.

CERVICAL CANCER RISK FACTORS — The most important risk factor for cervical cancer is infection with the human papillomavirus (HPV). Other factors that increase the risk of cervical cancer include a history of multiple sexual partners, use of tobacco (eg, cigarettes), and a weakened immune system (eg, due to HIV infection or certain medications).

Human papillomavirus — Infection of the cervix with certain types of human papillomavirus (HPV) is the most significant risk factor for cervical abnormalities and cancer. Over 100 different types of HPV have been identified, however not all types infect the cervix or cause cancer. Researchers have labeled the HPV types as being high or low risk for causing cervical cancer. HPV types 6 and 11 can cause warts and are low-risk types because they rarely cause cervical cancer; types 16 and 18 are considered high-risk types because they may cause cervical cancer in some women.

HPV is spread by direct skin-to-skin contact, including sexual intercourse, oral sex, anal sex, or any other contact involving the genital area (eg, hand to genital contact). It is not possible to become infected with HPV by touching an object, such as a toilet seat.

Most people who are infected with HPV have no signs or symptoms. Most HPV infections are temporary and resolve within two years, especially in women under 21. When the virus persists (in 10 to 20 percent of cases), there is a higher likelihood of developing cervical cell abnormalities and cancer. However, it usually takes many years for HPV infection to cause cervical cancer.

A vaccine is now available to help prevent infection with four types of HPV (types 6, 11, 16, and 18). The vaccine was proven to be safe and effective in several large clinical trials. Women who have received the HPV vaccine should still follow the same cervical cancer screening guidelines as those who have not.

Sexual history — Cervical cancer is more common in women who have had more than one sexual partner or whose partners have more than one sexual partner.

Tobacco use — Smoking cigarettes increases the risk of cervical cancer and precancer by up to seven times that of women who do not smoke. Stopping smoking can decrease this risk.

Weakened immune system — Women with a weakened immune system have a significantly increased risk of cancers and precancers of the cervix.

CERVICAL CANCER SCREENING TESTS — There are several ways to screen for cervical cancer. The traditional screening test is called a Pap smear. However, other methods, including liquid based cytology and HPV testing, are also available.

Test options:.

Pap smear with liquid based cytology — Liquid-based tests are a method of examining cells from the cervix during a pelvic exam. North Coast Family Medical Group uses the SurePath test.

HPV testing — Human papillomavirus (HPV) is a sexually transmitted virus that is responsible for the majority of cases of cervical cancer. The procedure for HPV testing is identical to that of liquid based cytology testing. At North Coast Family Medical Group, if your pap is abnormal, it is automatically sent for HPV testing. HPV testing is not done routinely. However, if you choose to have less frequent pap smears, per the guidelines below, then we recommend you have direct HPV testing to be certain this is the right choice for you.

Who should have a screening test and when?

Women under 21—Women under 21 who are sexually active may choose to have cervical cancer screening. However, cervical cancer is extremely rare in this age group. Precancerous lesions on the cervix usually resolve on their own without treatment in these women. Excessive treatment of abnormal findings may affect the integrity of the cervix and compromise future fertility. If sexually active, women under 21 should seek medical counseling for contraception and prevention of sexually transmitted diseases. Most sexually transmitted diseases can now be tested through urine and blood.

Women between 21 and 30— The first cervical cancer screening test is recommended by age 21. For most women in this age group, the test is recommended once per year from 21-30.

Women between 30 and 65—After 30 years of age, women should continue with annual screening. However, screening can be decreased to every 2 to 3 years after 3 normal test results if there is no history of previous HPV infection or other risk factors for cervical cancer. If you opt for less frequent pap smears, we recommend direct HPV testing. An annual exam would still be recommended for breast cancer screening in addition to a pelvic exam to examine the vagina, uterus, ovaries and rectum. The “pap smear” is just the test that is performed during the pelvic exam. The rest of the exam is still recommended annually for most women.

Women over 65— Most experts feel that women who are at low risk for cervical cancer (eg, no past history of an abnormal test) can stop having cervical cancer screening tests by age 65.

After hysterectomy — Women who have had a hysterectomy (surgical removal of the uterus and cervix) should not undergo screening for cervical cancer, unless:

- The hysterectomy did not include removal of the cervix (eg, if the hysterectomy was "subtotal" or “supracervical”)
- The hysterectomy was performed because of cervical cancer or precancer
- The woman was exposed to diethylstilbesterol (DES) during her mother's pregnancy.

References:

www.aafp.org
www.acog.org
www.uptodate.com
www.ahrq.gov/clinic/uspstf/uspscerv.htm
www.cancer.org