**Cervical Cancer Screening: Get the Facts**

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When cervical cancer is diagnosed at earlier stages, it’s easier to treat — which is why it’s so important to have regular screenings for the disease.

Yet the screening recommendations can be confusing. Who should be screened for cervical cancer? How often? What do the tests entail? Here are the basics.

## Pap Tests & HPV Tests

Modern cervical cancer screening involves two key elements:

* **Pap tests.** When you have a Pap test (or Pap smear), your doctor uses a small brush or cotton swab to gently collect cells from the surface of your cervix (the lower part of the uterus). The cells are sent to a lab for analysis. The test can spot cancerous cells as well as abnormal cells that might become cancerous. Since the Pap test started being used in the 1950s, deaths due to cervical cancer have gone down.
* **HPV tests.** Most cases of cervical cancer are related to human papillomavirus (HPV), a common infection spread through sexual contact. But not everyone with HPV develops cancer. In many women, HPV infections just go away on their own. And some strains of the virus are more strongly linked to cervical cancer than others. So HPV tests can help doctors assess cervical cancer risk — but these tests are only one piece of the puzzle.

## Cervical Screening Recommendations by Age

It used to be that doctors recommended a Pap test every year. Newer guidelines are more complicated.

For high-risk women, we still recommend screening every 1 to 3 years. Women are at higher risk of cervical cancer if they have immune system problems such as lupus or HIV, or if they take immunosuppressant medications (to control autoimmune diseases or after organ transplants, for example).

For women with low risk of cervical cancer, screening recommendations depend on age:

**Under 21:** We don’t recommend Pap tests or HPV test for women under 21. At this age, abnormal cells are more common, and most of them won’t become cancerous. In young women, HPV infections are also likely to resolve on their own. For these women, screening tests are more likely to give false positives, which could lead to unnecessary biopsies or treatments.

**Age 21-30:** Women in their 20s should be screened with a Pap test every 3 years. If the Pap test is abnormal, they should have an HPV test. If that test is positive, the patient and her doctor can discuss next steps, which might include more frequent monitoring or procedures to remove the abnormal cells.

**Age 31-65:** Recommendations for these women are all over the map. Some professional groups recommend a Pap test plus HPV test every 5 years. Some recommend an HPV test alone every 5 years. Others advise a Pap test every 3 years, with an HPV test only if the Pap test is abnormal. In other words, it’s confusing. The key takeaway: Screening is still important, whether you choose to do it every 3 years or every 5. Talk to your doctor about what schedule makes the most sense for you.

**Age 66 and up:** When women have a history of negative Pap tests and HPV tests, they can often stop having the tests after age 65. If they haven’t had adequate screening during their younger years, however, we still recommend a Pap test every 3 years until they’ve had 3 negative tests in a row.

## More Tips for Reproductive Health

Another important way for young women to protect themselves: Get the HPV vaccine. It’s recommended for boys and girls starting at 9 and can be given up to age 26. The vaccine is a safe and effective way to reduce young women’s risk of HPV — and cervical cancer.

Whatever screening method is best for you, remember: A Pap test isn’t the same as an annual exam. It’s always a good idea to see your doctor every year, even if you aren’t having the lab test. Your OB/GYN can help you prevent complications of cervical cancer and maintain good reproductive health overall.