

FAQs ABOUT HPV AND CERVICAL CANCER SCREENING

WHAT'S THE DIFFERENCE BETWEEN PAP AND HPV TESTS?

With a Pap test, a clinician uses a small brush to get a sample of cells from your cervix (the cervix is the opening to the uterus or womb). The cells are looked at very closely under a microscope to see if any abnormal changes are present. A Pap test is usually part of a pelvic exam, the healthcare provider looks at and feels the organs around your cervix to make sure their shape and size is normal.

Unlike Pap tests, which look only for precancerous cervical cell changes, an HPV test can detect “high-risk” types of the human papillomavirus (HPV). HPV tests can be done along with a Pap test (sometimes the same sample that’s taken with the Pap test is used). This can be enormously helpful to healthcare providers in determining which women are at greatest risk for cervical cancer, and the type of follow up care they need.



WHY IS CO-TESTING RECOMMENDED FOR WOMEN 30 AND OLDER?

In women 30 and over, screening using both an HPV test and a Pap test is the recommended approach. If both tests are negative (normal), a woman may safely have her next Pap and HPV test in five years depending on her past Pap test findings and other risk factors. For this reason, some women now may have an HPV test when they have their Pap test. It will still be important to continue having routine recommended preventative health exams.

WHAT IS A GENOTYPING TEST?

The Cervista™ HPV 16/18 checks specifically for HPV types 16 and/or 18, which together cause approximately 70% of cervical cancers. This test is approved for use (in combination with a Pap test and Cervista™ HR test) as primary cervical cancer screening with women age 30 and older) and to determine if HPV16/18 are present with ASC-US Pap results.

The ability to determine if a woman has HPV 16/18 specifically is a new wrinkle in cervical cancer screening; previously, such tests were confined to medical research studies. The potential advantage to genotyping may be in allowing women age 30 and older who are high-risk HPV positive—but negative for the more aggressive HPV 16/18 types—to avoid immediate referral to colposcopy in favor of repeating Pap and HPV tests in 12 months.

CAN AN HPV TEST TELL HOW LONG I MIGHT HAVE HAD THE VIRUS, OR IF I CAN GIVE IT TO A NEW PARTNER?

No. HPV tests are valuable in screening for cervical cancer, but can't tell you how long you may have had the virus or if you are able to transmit HPV to a new partner. The newer test can tell you which “high-risk” type you may have contracted. Fortunately, most HPV infections are cleared naturally by the body in a few months and are not dangerous. Regular screening is important, though, for those cases where HPV doesn't go away on its own.



www.nccc-online.org

© 2015 American Sexual Health Association
All rights reserved. Not for resale.

Reproduction permission granted except for purposes of resale.

WHY DO GUIDELINES RECOMMEND WOMEN WAIT UNTIL AGE 21 TO HAVE THEIR FIRST PAP TEST?

Experts traditionally called for Pap testing to begin within three years after first intercourse. Given that many girls become sexually active by the time they're in high school, many were beginning Pap tests as teenagers. Cervical cancer usually develops slowly, though, taking many years to develop in many cases. HPV, and cell changes related to the virus, usually clear naturally in young women in their teens and 20s. Since HPV is rarely a threat to their health, there is concern Pap testing women in this age range may lead to needless diagnostic procedures (such as biopsies) and treatment (such as LEEP) that can do harm to the cervix.

SHOULD I HAVE MY TEEN-AGE DAUGHTER TESTED FOR THE HPV VIRUS BEFORE SHE RECEIVES THE HPV VACCINE?

Vaccinating adolescents against HPV now is an excellent idea. However, HPV testing isn't helpful or recommended for preventing cervical diseases in girls this young, and knowing one's HPV status at any age is not necessary before receiving an HPV vaccine. Girls who have HPV and receive the vaccine are still likely to benefit by being protected against other HPV types to which they may not have been exposed.

Experts recommend that all females between the ages of 9 and 26 get an HPV vaccine. About half of all new infections are diagnosed in girls and young women between 15 and 24 years of age, so early vaccination is important. **Males are at risk for HPV and related diseases, too, so boys and young men are also recommended to be vaccinated.**

IF HPV IS THE KNOWN CAUSE OF CERVICAL CANCER SHOULDN'T ALL WOMEN SHOULD HAVE AN HPV TEST?

The key is for women to have regular screening for cervical cancer, regardless of whether a healthcare provider uses a Pap test alone or in combination with an HPV test. While regular Pap testing alone remains a viable means of screening a woman for cervical cancer, the Pap/HPV test combo is a tool that can be very helpful in figuring out which women are at greatest risk for the disease.

HPV testing for women over 30 makes sense because they are more likely to have HPV infections that don't resolve quickly (due to aging immune system), therefore increasing their risk for cervical cancer. Recently the cobas® test was approved for use with women age 25 and older for primary cervical cancer screening, followed by a Pap test for women with certain results. Don't worry about which option is the best one for you: the exact test or tests used is not as important as simply being screened regularly! Your healthcare provider will help you sort out which option is right for you.



LEARN MORE ABOUT HPV AND CERVICAL CANCER
WWW.NCCC-ONLINE.ORG