

# Improving Your Odds for Cervical Health



**J**anuary is Cervical Health Awareness month, a time to get out the word about steps women can take to prevent and detect cervical cancer.

The good news? Cervical cancer is largely preventable and, if detected early, curable. The key to prevention is vaccination, and the key to early detection comes down to two tests.

Cervical cancer forms in the cervix, the lower, narrow part of the uterus that connects with the vagina. It is caused by the human papillomavirus virus (HPV) (<http://www.fda.gov/ForConsumers/ByAudience/ForWomen/ucm118530.htm>). For 2016, the National Cancer Institute estimated that 12,990 women in the United States would be diagnosed with cervical cancer, with 4,120 women dying from the disease.

## Pap and HPV Testing

The two tests to detect cervical cancer are the Pap test (or Pap smear) and the HPV test. According to Shyam Kalavar, a cytologist (an expert in the microscopic examination of cells) at the U.S. Food and Drug Administration, the Pap smear looks at cells from the cervix for abnormalities that may become cervical cancer if not treated appropriately.

When a Pap smear shows abnormalities, further testing or follow-up is needed. Follow-up testing may include another Pap smear, an HPV test to check for the presence of the types of HPV most likely to cause cancer, and/or a biopsy of the cervix. There are more than 100 different kinds of HPV, and not all of them cause health problems.

“If cervical cancer is found early, it’s easier to treat,”

*“Women, including those who have been vaccinated, should continue to get Pap tests because they are essential to detect cervical cancer and precancerous changes.”*

Kalavar says. Because this form of cancer often causes no pain, a woman can have cervical cancer and not know it, making the importance of testing that much greater.

The Pap smear is not 100 percent accurate, and cervical cancer may be missed in a small number of cases. But it usually takes years, if not decades, for abnormal cells to develop into cervical cancer. Regular Pap smears—as recommended in the 2012 guidelines from the American Cancer Society, the American Society for Colposcopy and Cervical Pathology, and the American Society for Clinical Pathology (<https://www.cdc.gov/cancer/cervical/pdf/guidelines.pdf>)—should identify changes in time for treatment.

Women can also be tested for the presence of high-risk types of HPV, a process known as “Pap and HPV co-testing.” Co-testing is less likely to miss an abnormality than Pap testing alone. Additionally, HPV testing is now approved as a first-line primary screening test for cervical cancer. Women may want to talk to their health care professionals about this option.

### **Protecting Health Through Vaccination**

FDA has approved Gardasil 9, a vaccine that prevents cervical cancer. “Gardasil 9 works like other vaccines that prevent diseases caused by viruses and bacteria. They prompt the immune system to protect against disease,” says Marion Gruber, Ph.D., director of FDA’s Office of Vaccines Research and Review.

Gardasil 9 covers nine HPV types and has the potential to prevent about 90 percent of cervical, vulvar, vaginal and anal cancers, as well as preventing genital

warts. Gardasil 9 is approved for use in females and males ages 9 through 26.

The full potential for benefit is obtained by people who are vaccinated before becoming infected with the HPV types covered by the vaccine. Gardasil 9 will not protect against diseases caused by the types of HPV that are not covered by the vaccine, Gruber says. She adds that Gardasil 9 is not a treatment (rather than prevention) for HPV disease or cervical cancer.

“Women, including those who have been vaccinated, should continue to get Pap tests because they are essential to detect cervical cancer and precancerous changes,” Gruber notes. 

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