



<http://www.womenshealth.gov>

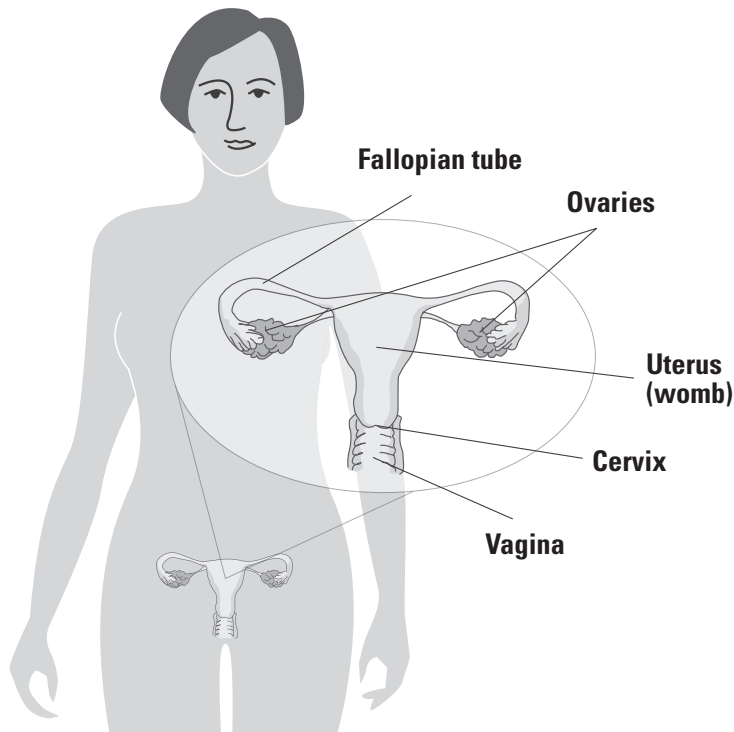
1-800-994-9662

TDD: 1-888-220-5446

Pap Test

Q: What is a Pap test?

A: The Pap test, also called a Pap smear, checks for changes in the cells of your cervix. The cervix is the lower part of the uterus (womb) that opens into the vagina (birth canal). The Pap test can tell if you have an infection, abnormal (unhealthy) cervical cells, or cervical cancer.



Q: Why do I need a Pap test?

A: A Pap test can save your life. It can find the earliest signs of cervical cancer. If caught early, the chance of curing cervical cancer is very high. Pap tests also can find infections and abnormal cervi-

cal cells that can turn into cancer cells. Treatment can prevent most cases of cervical cancer from developing.

Getting regular Pap tests is the best thing you can do to prevent cervical cancer. In fact, regular Pap tests have led to a major decline in the number of cervical cancer cases and deaths.

Q: Do all women need Pap tests?

A: It is important for all women to have Pap tests, along with pelvic exams, as part of their routine health care. You need a Pap test if you are 21 years or older.

Women who have gone through menopause (when a woman's periods stop) still need regular Pap tests. Women ages 65 and older can talk to their doctor about stopping after at least 3 normal Pap tests and no abnormal results in the last 10 years.

Q: How often do I need to get a Pap test?

A: It depends on your age and health history. Talk with your doctor about what is best for you. Most women can follow these guidelines:

- Starting at age 21, have a Pap test every 2 years.
- If you are 30 years old and older and have had 3 normal Pap tests for 3 years in a row, talk to your doctor about spacing out Pap tests to every 3 years.
- If you are over 65 years old, ask your doctor if you can stop having Pap tests.



<http://www.womenshealth.gov>

1-800-994-9662

TDD: 1-888-220-5446

Ask your doctor about more frequent testing if:

- You have a weakened immune system because of organ transplant, chemotherapy, or steroid use
- Your mother was exposed to diethylstilbestrol (DES) while pregnant
- You are HIV-positive

Women who are living with HIV, the virus that causes AIDS, are at a higher risk of cervical cancer and other cervical diseases. The U.S. Centers for Disease Control and Prevention recommends that all HIV-positive women get an initial Pap test, and get re-tested 6 months later. If both Pap tests are normal, then these women can get yearly Pap tests in the future.

Q: Who does not need regular Pap tests?

A: The only women who do not need regular Pap tests are:

- Women over age 65 who have had 3 normal Pap tests in a row and no abnormal test results in the last 10 years, and have been told by their doctors that they don't need to be tested anymore.
- Women who do not have a cervix and are at low risk for cervical cancer. These women should speak to their doctor before stopping regular Pap tests.

Q: I had a hysterectomy. Do I still need Pap tests?

A: It depends on the type of hysterectomy (surgery to remove the uterus) you had and your health history. Women who have had a hysterectomy should talk with their doctor about whether they need routine Pap tests.

Usually during a hysterectomy, the cervix is removed with the uterus. This is called a total hysterectomy. Women who have had a total hysterectomy for reasons other than cancer may not need regular Pap tests. Women who have had a total hysterectomy because of abnormal cells or cancer should be tested yearly for vaginal cancer until they have three normal test results. Women who have had only their uterus removed but still have a cervix need regular Pap tests. Even women who have had hysterectomies should see their doctors yearly for pelvic exams.

Q: How can I reduce my chances of getting cervical cancer?

A: Aside from getting Pap tests, the best way to avoid cervical cancer is by steering clear of the human papillomavirus (HPV). HPV is a major cause of cervical cancer. HPV infection is also one of the most common sexually transmitted infections (STI). So, a woman boosts her chances of getting cervical cancer if she:

- Starts having sex before age 18
- Has many sex partners
- Has sex partners who have other sex partners
- Has or has had a STI



<http://www.womenshealth.gov>

1-800-994-9662

TDD: 1-888-220-5446

Q: What do abnormal Pap test results mean?

A: It is scary to hear that your Pap test results are “abnormal.” But abnormal Pap test results usually do *not* mean you have cancer. Most often there is a small problem with the cervix.

Some abnormal cells will turn into cancer. But most of the time, these unhealthy cells will go away on their own. By treating these unhealthy cells, almost all cases of cervical cancer can be prevented. If you have abnormal results, to talk with your doctor about what they mean.

Q: My Pap test was “abnormal,” what happens now?

A: There are many reasons for “abnormal” Pap test results. If results of the Pap test are unclear or show a small change in the cells of the cervix, your doctor will probably repeat the Pap test.

If the test finds more serious changes in the cells of the cervix, the doctor will suggest more powerful tests. Results of these tests will help your doctor decide on the best treatment. These include:

- **Colposcopy:** The doctor uses a tool called a colposcope to see the cells of the vagina and cervix in detail.
- **Endocervical curettage:** The doctor takes a sample of cells from the endocervical canal with a small spoon-shaped tool called a curette.
- **Biopsy:** The doctor removes a small sample of cervical tissue. The sample is sent to a lab to be studied under a microscope.

The FDA recently approved the LUMA Cervical Imaging System. The doctor uses this device right after a colposcopy. This system can help doctors

see areas on the cervix that are likely to contain precancerous cells. The doctor uses this device right after a colposcopy. This system shines a light on the cervix and looks at how different areas of the cervix respond to this light. It gives a score to tiny areas of the cervix. It then makes a color map that helps the doctor decide where to further test the tissue with a biopsy. The colors and patterns on the map help the doctor tell between healthy tissue and tissue that might be diseased.

Q: My Pap test result was a “false positive.” What does this mean?

A: Pap tests are not always 100 percent correct. False positive and false negative results can happen. This can be upsetting and confusing. A false positive Pap test is when a woman is told she has abnormal cervical cells, but the cells are really normal. If your doctor says your Pap results were a false positive, there is no problem.

A false negative Pap test is when a woman is told her cells are normal, but in fact, there is a problem with the cervical cells that was missed. False negatives delay the discovery and treatment of unhealthy cells of the cervix. But, having regular Pap tests boosts your chances of finding any problems. If abnormal cells are missed at one time, they will probably be found on your next Pap test.

Q: I don’t have health insurance, how can I get a free or low-cost Pap test?

A: Programs funded by the National Breast and Cervical Cancer Early Detection Program (NBCCEDP) offer free or low-cost Pap tests to women in

