

U.S. Preventive Services Task Force Recommends Screening Most Adult Women for Cervical Cancer

Task Force finds women ages 21 to 65 benefit from regular screening

WASHINGTON, D.C. – September 12, 2017 – The U.S. Preventive Services Task Force (Task Force) today posted a draft recommendation statement and draft evidence review on screening for cervical cancer. The Task Force recommends that primary care clinicians screen for cervical cancer in women ages 21 to 29 every three years with cervical cytology, more commonly known as the Pap test. For women ages 30 to 65, the Task Force recommends either screening with cervical cytology alone every three years or screening with high-risk Human Papilloma Virus (hrHPV) testing alone every five years. **This is an A recommendation.**

The Task Force recommends against screening women younger than 21, women older than age 65 years who have been adequately screened previously, and women at any age who do not have a cervix. **These are D recommendations.**

These recommendations apply to women, regardless of sexual history, who have a cervix and show no signs or symptoms of cervical cancer. These recommendations do not apply to women who are already at high risk for the disease, including those who have been diagnosed with a high-grade precancerous cervical lesion or have a weakened immune system (such as women who are HIV-positive).

Grades in this recommendation:

A: Recommended.

D: Not Recommended.

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“Cervical cancer is highly curable when found and treated early,” says Task Force member Carol Mangione, M.D., M.S.P.H. “Most cases of cervical cancer occur in women who have not been regularly screened or treated. Therefore, making sure all women are adequately screened and treated is critical to reducing deaths from cervical cancer.”

“The Task Force looked at the evidence on the effectiveness of different screening tests and intervals based on age, and found that after age 30, the Pap test and hrHPV tests are both effective for cervical cancer screening,” says Task Force member Maureen G. Phipps, M.D., M.P.H. “Women ages 30 to 65, therefore, have a choice between the Pap test every three years or hrHPV test every five years.”

The Task Force's draft recommendation statement and draft evidence review have been posted for public comment on the Task Force Web site at www.uspreventiveservicestaskforce.org. Comments can be submitted from September 12 through October 9, 2017 at www.uspreventiveservicestaskforce.org/tfcomment.htm.

The Task Force is an independent, volunteer panel of national experts in prevention and evidence based medicine that works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

Dr. Mangione is the Chief of the Division of General Internal Medicine and Health Services Research and the Barbara A. Levey, MD, and Gerald S. Levey, MD, endowed chair in medicine at the David Geffen School of Medicine at the University of California, Los Angeles (UCLA). She is also professor of public health at the UCLA Fielding School of Public Health and the director of the UCLA/Drew Resource Center for Minority Aging Research/Center for Health Improvement of Minority Elderly.

Dr. Phipps is the department chair and Chace-Joukowsky professor of obstetrics and gynecology and assistant dean for teaching and research in women's health at the Warren Alpert Medical School of Brown University. In addition, she is the chief of obstetrics and gynecology at Women & Infants Hospital of Rhode Island and the executive chief of obstetrics and gynecology at Care New England.

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