

# PROMOTING CERVICAL CANCER SCREENING DURING THE COVID-19 PANDEMIC



The American Cancer Society (ACS) recommends that people at average risk of cervical cancer start regular screening at age 25. Screening should take place every 5 years with an HPV test (called primary HPV testing), which looks for the virus that causes almost all cervical cancer. If this test is not available, screening may be done every 5 years with a cotest (an HPV test with a Pap test) or every 3 years with the Pap test alone, which looks for changes in cells in the cervix. For most people, screening should stop after age 65. [To learn more, access the ACS guidelines for cervical cancer screening.](#)

## WHY IS CERVICAL CANCER SCREENING IMPORTANT?



- Cervical cancer screening can save lives, but only if individuals get tested.
- Screening can find HPV (the virus that causes almost all cervical cancers) and cell changes called pre-cancers years before they become cancer.
- The removal of precancerous tissue that was detected by screening can prevent cancer from developing. Screening can also detect cervical cancer at an early stage, when treatment is usually less extensive and more successful.

## WHAT ARE THE IMPLICATIONS OF COVID-19 ON CERVICAL CANCER SCREENING?



- [An estimated 94% drop](#) in weekly cervical cancer screening appointments in March compared to appointments made from 2017 to 2019.
- [2,500 missed or delayed diagnoses](#) of cervical cancer from early March through early June.

## SCREENING FOR CERVICAL CANCER DURING COVID-19



- Despite the challenges we face during the pandemic, cervical cancer remains a public health priority, and we must provide the public with safe opportunities to prevent and detect cervical pre-cancer and cancer.
- Prioritize individuals in surveillance for a previous abnormal screening test result, those who were scheduled for follow-up exams, colposcopy, or excisional treatment.
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## SCREENING FOR CERVICAL CANCER DURING COVID-19, CONT.



- Prioritize screening of individuals who are overdue for a HPV test, Pap test, or cotest. Discourage screening too frequently.
- Individuals who are older than 65 who meet criteria for recommended cessation of screening should discontinue screening.
- Individuals without a cervix, including those who had a total hysterectomy, should not be screened.

## MESSAGING TO PROMOTE CERVICAL CANCER SCREENING



- There are several safe and effective tests to screen for cervical cancer, including primary HPV testing, cotesting, and Pap tests.
- Screening disparities are already evident and, without deliberate focus, are likely to increase as a result of the COVID-19 pandemic.
- People who are overdue for screening or who have had a recent positive screening test should be given priority for cervical cancer screening and follow-up visits/procedures.
- Failure to get back on track with cervical cancer screening will delay our ability to reach the goal of eliminating cervical cancer.

For more information and resources, visit [cancer.org](https://www.cancer.org)