Health Groups Issue Proposed Cervical Cancer Screening Guidelines

Recommendations Aim to Reduce Risk without Reducing Benefits of Screening

ATLANTA – October 19, 2011 –The American Cancer Society (ACS), the American Society for Colposcopy and Cervical Pathology (ASCCP), and the American Society for Clinical Pathology (ASCP) have proposed new guidelines for the prevention and early detection of cervical cancer. The proposed guidelines, which are now posted for public comment, generally advise that women reduce the number of tests they get over their lifetime to better ensure that they receive the benefits of testing while minimizing the risks. The proposed guidelines also include a preference for co-testing using the Pap test and HPV test for women age 30 and over.

After a public comment period that begins immediately and a multi-stakeholder symposium in November to discuss the proposed recommendations among a broad group of experts, the recommendations will be revised and incorporated into a final guideline from the American Cancer Society, anticipated in mid-2012.

The proposed guidelines were released on the same day that the U.S. Preventive Services Task Force (USPSTF) formally released its proposed guidelines update for cervical cancer screening. ACS, ASCCP and ASCP worked independently of the USPSTF to review existing evidence and develop these draft recommendations. The groups coordinated today's release with the USPSTF to enable stakeholders to consider both sets of recommendations concurrently with the goal of creating consistent guidance that will lead to less confusion for providers and the public.

The ACS-ASCCP-ASCP proposed guidelines would include some changes from the current ACS guidelines.

- They would recommend that all women start screening at age 21, and drop the recommendation that women under 21 begin screening three years after starting vaginal intercourse.
- They propose that for women 21 to 29, Pap tests (conventional or liquid-based) be done every three years, and recommends against annual Pap testing. Current guidelines call for a conventional Pap test every year, or a liquid-based Pap test every two years for this age group.
- For women 30 and over, the guidelines propose that Pap tests be done every three years, recommending against annual or more frequent Pap testing. Current guidelines say women 30 and over who have had three normal Pap tests in a row may be tested less often, every two to three years.
- The guidelines propose that Pap test plus HPV testing every 3-5 years be the preferred strategy
 for women aged 30 and older, and recommend against screening with any test or combination
 of tests more often than every three years. Current ACS guidelines call for testing no more
 frequently than every three years with a Pap test plus the HPV DNA test 'an option' for women
 over 30 who have normal immune systems and no abnormal Pap results.
- The proposed recommendations also say screening is not recommended for women 65 or older who have had three or more normal Pap tests in a row and no abnormal Pap test results in the last 10 years, or who had two or more negative HPV tests in the last 10 years. Current guidelines say women may choose to stop being tested at age 70 when they've had three or more normal Pap tests in a row and no abnormal Pap test results in the last 10 years.

"These draft recommendations are being presented for review by interested individuals and stakeholders, primarily clinicians and researchers, who are invited to provide feedback through a web-based open comment period," said Debbie Saslow, PhD, director of breast and gynecologic cancer for the American Cancer Society. "The six working groups that developed these recommendations will then consider the submitted comments, and make revisions to these

proposed recommendations based on that input and available evidence."

Other new recommendations included in the proposed guideline:

- Women who have a normal Pap result and a positive HPV test result should receive genotyping for HPV 16 and 18 or repeat both the Pap and HPV tests in one year. The proposed guideline recommends against immediate colposcopy.
- Women having a mildly abnormal Pap result (called ASC-US) and a negative HPV test result should be followed by either HPV testing plus Pap or HPV testing alone at intervals of three years or longer.
- At this time there is insufficient evidence to recommend for or against a comprehensive program for primary screening with HPV testing alone (with defined follow-up testing) in the US.
- Women who have been vaccinated against HPV should begin cervical cancer screening at the same age as unvaccinated women, i.e. at age 21.

The working groups who drafted the proposed guidelines will meet along with delegates from 25 organizations at a symposium in November 2011 to further discuss and finalize the recommendations, which will then be adapted into a final guideline from the American Cancer Society, anticipated in mid-2012.

The proposed recommendations can be reviewed at:

www.asccp.org/practice-management/molecular-screening-symposium

The proposed recommendations from the USPSTF can be viewed at:

http://www.uspreventiveservicestaskforce.org/tfcomment.htm