

Pap Test and HPV Cheat Sheet

What is a pap test? During a pelvic exam, a healthcare provider collects a sample of cervical cells with a brush. A pathologist then examines the cells to determine if they are regular or irregular in their appearance. This is a screening test for both HPV and cervical cancer.

When should I get my first pap test and how often thereafter? Although different medical groups vary slightly with their recommendations, in general:

- **INITIATION:** About or within 3 years after initial vaginal intercourse OR the age of 21.
- **SUBSEQUENT:** Every 1-3 years
- **AGE 30 AND OLDER:** Every 2-3 years if 3 previous yearly pap tests are normal or if prior pap test and HPV test normal.

What is HPV? The human papillomaviruses (HPV) are a group of more than 100 related viruses. The papillomaviruses may cause warts, or papillomas, which are noncancerous growths. Some types of HPV are oncogenic (high risk strains), meaning associated with certain types of cancer. Cervical cancer is one such HPV related disease. HPV may also play a role in cancers of the anus, vulva and mouth/throat.

How does a person get HPV? Genital HPV infections are very common and are sexually transmitted. More than 30 types of HPV can be passed from one person to another through skin-to-skin contact in the genital area. HPV can be spread even if there is no intercourse.

How long does someone have HPV? Most HPV infections go away without any treatment over the course of a few years. Your body's immune system fights off the infection and the HPV goes away on its own. However, HPV infection can sometimes persist for many years. Persistent infection may cause cervical cancer, although some infections persist without progression to cancer.

If I have HPV, what are the symptoms? Most cervical HPV infections are without symptoms. However if abnormal cells are seen on a pap test this may be an indication of a cervical HPV infection.

Can I be tested for HPV? Certain changes seen on a pap test are suggestive of an HPV infection (see back). An HPV test can be performed using the same cells from a pap test. HPV testing is currently only recommended for certain "borderline" pap results (ASC-US) or for women 30 and older to determine appropriate follow-up interval for pap tests.

What are genital warts and how are they related? Genital warts (condylomata acuminata) are abnormal growths involving the genital or anal regions. Most are caused by HPV-6 and HPV-11 strains. These are different strains than those which cause cervical cancer. Warts may appear from several weeks to several years after having sexual contact with someone who is infected with HPV.

If I have HPV, does that mean I have or could develop cervical cancer? A positive HPV test result does NOT mean that a woman has or will develop cervical cancer. The test only indicates that a high risk HPV strain is present and you should be followed closely to make sure the infection resolves. Persistent HPV infection can lead to cervical cancer in a small percentage of women who do not have appropriate follow-up or treatment. Smoking decreases your chances of clearing HPV.

How can I prevent an HPV infection? The best way to avoid an HPV infection is by avoiding skin-to-skin contact in the genital area. Condoms can lower the chance of contracting HPV, as well as HIV, herpes, gonorrhea and Chlamydia. Limiting the number of sexual partners you have can drastically lower your chance of getting HPV. The HPV vaccine is extremely effective in preventing 4 types of HPV.

How can HPV be treated? Usually HPV does not need to be treated, but in the small percentage of women with persistent, progressive HPV treatment is available. There is a small increased risk of preterm labor and low birth-weight babies for women who have had a surgical procedure removing HPV. Thus, in most young women, still considering childbirth in the future, a conservative approach allowing the infection to clear on its own is recommended.

If HPV goes away, can I get it again? Yes, even if you have cleared one strain of HPV you can contract another strain.

Should my male partner be tested for HPV? The HPV test is not currently used for men.

Is the HPV vaccine right for me? The HPV vaccine is effective against 4 types of HPV, strains 6, 11, 16 and 18. Strains 6 and 11 are associated with >90% of genital warts, and 16 and 18 are associated with >70% of all cervical cancer. It is nearly 100% effective in providing immunity to these 4 strains. Since it does not protect against all types of HPV, women still need routine pap testing.

Pap Test Results

Normal- Cervical cells are normal in appearance without evidence of HPV. See front for timing of follow-up.

ASC-US (Atypical Squamous Cells of Undetermined Significance) - the cells do not appear completely normal. Sometimes these changes can be due to an HPV infection.

- Age 20 years and younger-minimal changes assumed due to HPV and with a >90% chance of clearing on its own in the next 2-3 years. Repeat pap in one year. If still mildly abnormal, repeat pap in another year. If still abnormal at two years, a colposcopy (see below) is recommended.
- Age 21 and greater – further HPV testing performed. If high risk HPV found, colposcopy (see below) is recommended. If high risk HPV not detected, repeat Pap smear in one year.

ASC-H-(Atypical Squamous Cells cannot exclude a High Grade Squamous Intraepithelial Lesion) - Cervical cells appear different in size and shape compared with normal cells. A colposcopy (see below) is recommended.

AGC (Atypical Glandular Cells) - Glandular cells which produce mucus are located in the opening in the center of the cervix as well as in the uterine lining. With an AGC pap, the glandular cells are abnormal. A colposcopy (see below) and HPV testing are recommended.

LSIL (Low grade Squamous Intraepithelial Lesion) - Early (low grade) changes are seen in the size and shape of the cervical squamous cells. LSIL results are caused by an HPV infection and are very common in young women. Most LSIL lesions will resolve without intervention within months to several years.

- Age 20 and younger- minimal changes assumed due to HPV and with a >90% chance of clearing on its own in the next 2-3 years. Repeat pap in one year. If still mildly abnormal, repeat pap in another year. If still abnormal at two years, a colposcopy (see below) is recommended.
- Age 21 and greater – still low grade, mild abnormalities, however a colposcopy (see below) is recommended to confirm changes are only mild.

HSIL (High-grade Squamous Intraepithelial Lesion)-Cervical cells appear very different in size and shape compared with normal cells. HSIL are more serious changes due to HPV infection. Many HSIL lesions will resolve within several years in young women. However, if HSIL changes do not resolve and are left untreated, they could eventually lead to cervical cancer. HSIL requires colposcopy (see below) with biopsy in patients of all ages.

What is a colposcopy? A colposcopy is a procedure during which a magnifying instrument (colposcope) is used to further examine the vagina and cervix. A patient is placed in a similar position as for a pap test. Various solutions, including saline, dilute vinegar and iodine can be applied to the cervix, in an attempt to look for abnormal areas (evidence of HPV infection). If medically indicated a biopsy can be performed.



Student Health Center