Pap Smear

A Pap smear is a sampling of cells from a woman's cervix. The cervix is the opening between the *vagina* (birth canal) and the *uterus* (the bottom part of the womb). The cells are scraped from the cervix during a pelvic exam. These cells are then looked at under a microscope to see if the cells are normal or to see if a cancer is developing or there are changes that suggest a cancer will develop. Cervical dysplasia is a condition in which a woman has abnormal changes in the top layer of cells of her cervix. These changes are an early sign that cervical cancer may develop. Pap smears also look for the human papilloma virus (HPV) because it has 4 types that are responsible for 70% of cervical cancer. Infections can also be found during a Pap smear such as bacteria, fungus, protozoa and viruses.

Cervical cancer is harder to treat and less likely to have a good outcome if left untreated. Catching the disease at an early stage leads to a better outcome. Since the Pap smear was introduced 60 years ago, deaths from cervical cancer have decreased by 70%. Every woman should keep up to date with Pap smears.

RISK FACTORS FOR CERVICAL CANCER INCLUDE:

- Becoming sexually active before age 18.
- Being the daughter of a woman who took diethylstilbestrol (DES) during pregnancy.
- Having a sexual partner who has or has had cancer of the penis.
- Having a sexual partner whose past partner had cervical cancer or cervical dysplasia (early cell changes which suggest a cancer may develop).
- Having a weakened immune system. An example would be HIV or other immunodeficiency disorder.
- Having had a sexually transmitted infection such as chlamydia, gonorrhea or HPV.
- Having had an abnormal Pap smear or cancer of the vagina or vulva.
- Having had more than one sexual partner.
- A history of cervical cancer in a woman's sister or mother.
- Not using condoms with new sexual partners.
- Smoking.

WHO SHOULD HAVE PAP SMEARS

- A PAP smear is done to screen for cervical cancer.
  - The first PAP smear should be done at age 21.
  - **Between ages 21 and 29**, **PAP smears are repeated every 2 years**.
  - Beginning at age 30, you are advised to have a PAP smear **every 3 years as long as your past 3 PAP smears have been normal.**
  - Some women have medical problems that increase the chance of getting cervical cancer. Talk to your caregiver about these problems. It is especially important to talk to your caregiver if a new problem develops soon after your last PAP smear. **In these cases, your caregiver may recommend more frequent screening and Pap smears.**
  - The above recommendations are the same for women who **have** or **have not** gotten the vaccine for HPV (Human Papillomavirus).
  - If you had a hysterectomy for a problem that was **not** a cancer or a condition that could lead to cancer, then you no longer need Pap smears.
  - If you are between ages 65 and 70, and you have had normal Pap smears going back 10 years, you no longer need Pap smears.
  - If you have had past treatment for cervical cancer or a condition that could lead to cancer, you need Pap smears and screening for cancer for at least 20 years after your treatment.
- Some women may need screenings more often if they are at high risk for cervical cancer.

PREPARATION FOR A PAP SMEAR

A Pap smear should be performed during the weeks before the start of menstruation. Women should not douche

or have sexual intercourse for 24 hours before the test. No vaginal creams, diaphragms, or tampons should be used for 24 hours before the test. To minimize discomfort, a woman should empty her bladder just before the exam.

TAKING THE PAP SMEAR

The caregiver will perform a pelvic exam. A metal or plastic instrument (*speculum*) is placed in the vagina. This is done before your caregiver does a bimanual exam of your internal female organs. This instrument allows your caregiver to see the inside of the vagina and look at the cervix. A small, sterile brush is used to take a sample of cells from the internal opening of the cervix. A small wooden spatula is used to scrape the outside of the cervix. Neither of these two methods to collect cells will cause you pain. These two scrapings are placed on a glass slide or in a small bottle filled with a special liquid. The cells are looked at later under a microscope in a lab. A specialist will look at these cells and determine if the cells are normal.

RESULTS OF YOUR PAP SMEAR

- A healthy Pap smear shows no abnormal cells or evidence of inflammation.
- The presence of abnormally growing cells on the surface of the cervix may be reported as an abnormal PAP smear. Different categories of findings are used to describe your Pap smear. Your caregiver will go over the importance of these findings with you. The caregiver will then determine what follow-up is needed or when you should have your next pap smear.
- If you have had two or more abnormal Pap smears:
  - You may be asked to have a colposcopy. This is a test in which the cervix is viewed with a special lighted microscope.
  - A cervical tissue sample (*biopsy*) may also be needed. This involves taking a small tissue sample from the cervix. The sample is looked at under a microscope to find the cause of the abnormal cells.

Make sure you find out the results of the Pap smear. If you have not received the results within two weeks, contact your caregiver's office for the results. Do not assume everything is normal if you have not heard from your caregiver or medical facility. It is important to follow up on all of your test results.

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