I heard I don’t need a Pap smear every year. Really?

A. It’s true. Pap tests are no longer recommended as part of every woman’s annual visit, based on recommendations by the U.S. Preventive Services Task Force, the American Congress of Obstetricians & Gynecologists and the American Cancer Society.

Cervical cancer screening should begin at age 21. Women ages 21–29 should have a Pap test every 3 years. After age 30, women should have a Pap test and a DNA test for Human Papilloma Virus (HPV) test every 5 years. Depending on their medical history, some women may need to have a different (or more frequent) screening schedule. And a woman who has been vaccinated against HPV should still follow the screening recommendations for her age group.

Why the change? The new recommendations are based on studies that showed yearly Pap testing is not necessary to prevent a significant number of cancers. In the past, many women with abnormal pap tests incurred the expense (and anxiety) of unnecessary advanced testing.

HPV infection is very common, found in up to 80% of people. Most infections will clear up, without treatment, in 1-2 years. Young, healthy, non-smoking women’s immune systems are particularly good at clearing HPV-similar to the way viral cold symptoms resolve.

But couldn’t waiting be dangerous and lead to cervical cancer? Not for the vast majority of young women. HPV takes years to develop into cancer. Most cases occur in women who didn’t follow up after an abnormal Pap test, never had a test, or who have gone long periods between tests.

What if you do have an “abnormal” Pap test? Best advice: stay calm. “Abnormal” doesn’t mean cancer. It indicates a need for further testing to find out what is happening on the cervix. Mild cervical dysplasia is almost always caused by HPV and will often get better without any treatment at all. Of course, medical follow-up is important for any abnormal Pap.