



THE TRINIDAD & TOBAGO CANCER SOCIETY

Cervical Cancer

Early Detection & Treatment Guidelines

What is the cervix?

The cervix is the lower part of the uterus (womb) that connects the body of the uterus to the vagina or birth canal.

What is cervical cancer?

Cervical cancer occurs when abnormal cells in the cervix grow uncontrollably. It often develops slowly over time, starting with precancerous changes.

What causes cervical cancer?

The primary cause of cervical cancer is persistent infection with high-risk types of human papillomavirus (HPV), a virus transmitted through sexual contact. While many HPV infections resolve on their own, some can lead to cervical cancer. Risk factors include smoking, having multiple full-term pregnancies, long-term use of oral contraceptives, and a weakened immune system.

What are the symptoms of cervical cancer?

Early-stage cervical cancer often presents no symptoms. As the disease progresses, symptoms may include:

- Abnormal vaginal bleeding, such as bleeding between periods, after intercourse, or post-menopause.
- Unusual vaginal discharge, possibly with a foul odor.
- Pelvic pain or pain during intercourse.

How is cervical cancer prevented?

Preventative measures include:

- **HPV Vaccination:** The vaccine protects against the most common cancer-causing HPV types and is recommended for preteens (boys and girls) aged 9–14 but can be given up to age 45 (consult with your healthcare provider).
- **Regular Screening:** Routine screening can detect precancerous changes.
- **Safe Sexual Practices:** Using condoms and limiting the number of sexual partners can reduce HPV transmission.
- **Avoiding Tobacco Use:** Eliminating smoking decreases the risk of cervical and other cancers.

When should women begin screening for cervical cancer?

Screening recommendations have evolved based on recent guidelines:

- **Women aged 21-29:** Once sexually active, It's recommended to have a Pap smear every three years.
- **Women aged 30-65:** Preferred screening is high-risk HPV testing every five years. Alternatively, a Pap smear every three years or co-testing (Pap smear combined with HPV testing) every five years is acceptable.
- **Women over 65:** Those with a history of regular screenings with normal results may choose to stop screening. However, women with a history of cervical precancer should continue regular screenings.

- Post-Hysterectomy: Women who have had a total hysterectomy (removal of the uterus and cervix) for reasons not related to cervical cancer or precancer and have no history of cervical cancer or precancer may discontinue screening.

It's essential to consult with a healthcare provider to determine the appropriate screening schedule based on individual health history and risk factors.

How is a pap test done?

During a Pap Test:

- A speculum is inserted into the vagina to visualize the cervix.
- A small sample of cells is gently scraped from the cervix using a spatula or brush.
- The sample is sent to a laboratory to detect any abnormal cells.

Guidelines for ensuring accurate pap test results to enhance the accuracy of your pap test:

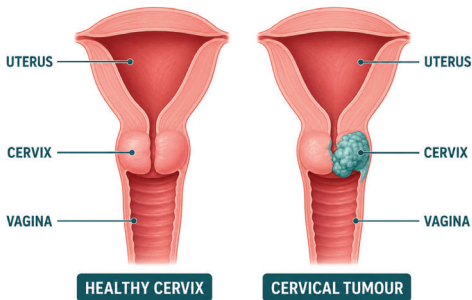
- Schedule the test when you're not menstruating.
- Avoid douching, sexual intercourse, and using tampons, vaginal creams, or medications for 48 hours before the test.

Abnormal pap smears:

What should you do?

An abnormal Pap test does not instead necessarily indicate cancer but signifies changes in cervical cells that require further evaluation. Follow-up may include:

- Repeat Pap Tests: To monitor any changes over time as determined and discussed with your doctor or health care provider.
- HPV Testing: To check for the presence of high-risk HPV types.
- Colposcopy: A procedure using a special microscope to examine the cervix more closely.
- Biopsy: Removing a small sample of cervical tissue for laboratory analysis.



Early detection and treatment of precancerous changes can prevent the development of cervical cancer.



BECOME A MEMBER 800 TTCS (8827)

#69 Dundonald Street, Port of Spain, Trinidad, W.I.
868.226.1221 | bookings@cancer.tt | www.cancertt.com

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