

# Taking a closer look at HPV testing

Screening for human papillomavirus (HPV), which causes nearly all cervical cancer, is usually done with a Pap smear test and an associated test for HPV. These standard tests can produce much uncertainty, however.

Consider two women, Jill and Lucy (both names fictitious), who were staying on top of their health care by scheduling an annual exam with their gynecologists. Jill stated that everything was going well, other than some back pain that she attributed to her workout routine. Lucy was also doing well, but indicated that she had been on birth control pills for more than five years, and had multiple (about three) sexual partners, many years ago before her marriage.



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Both received a Pap smear test. In conjunction with the standard test, their samples were also used for a human papillomavirus (HPV) test. Jill's Pap smear results were negative, but her HPV test returned positive. Lucy's results were negative for both. So what happens next?

The recommendations for positive HPV tests are: If the Pap is negative, wait a year and run more tests; if the Pap is positive, perform further evaluation, followed by treatment if necessary.

However, following these recommendations would have been the wrong course of action for both Jill and Lucy.

There are three questions all women should ask about using a Pap smear in conjunction with an HPV test:

• **"Has the Food and Drug Administration (FDA) approved the use of my Pap test for HPV testing?"** In January, Bob Ortega wrote in an Arizona Republic article, "The largest national labs have for a decade routinely used test kits that contain a preservative, BD SurePath, that is approved for Pap tests but not HPV testing." The FDA issued a warning in June 2012, but unfortunately, the warning notices were only sent to the laboratories that process the tests, not to the gynecologists performing the tests. Ortega continued, "Gynecologists in 11 practices across the country interviewed by The Republic, along with two national gynecological associations, said they were unaware of the bulletin five months after it was

issued." It is imperative that we make sure our tests are FDA-approved, however this may not be enough.

• **"How confident should I be in these results?"** Fortunately, there are HPV tests run in conjunction with Pap tests that are FDA-approved. However, their results can be inaccurate. According to a Mayo Clinic investigation, one such HPV test reports false negatives 15-30 percent of the time. This might lead a patient to believe that nothing is wrong when there may be a problem. So how can you tell? For starters, we need to know more about the tests and their results.

• **"What do the HPV results indicate?"** According to the Centers for Disease Control and Prevention, "A positive HPV test means you do have an HPV type that has been linked to cervical cancer. This does NOT mean you have cervical cancer now. But it could be a warning ... It is possible that your cell changes will never turn into cancer. They may go back to normal on their own." So, even if you use an FDA-approved HPV test, and even if the results are not among the 15-30 percent false negatives, you are still left with a level of uncertainty.

All of this uncertainty can lead to more stress and more problems. But there are alternatives to relying on Pap tests in the diagnosis of HPV. There has been a surge in genetic research, and as a result, we are starting to see medicine become more personalized. Such research has associated the hTERT gene with cervical cancer.

A Science Daily article published in March indicates that DNA-based testing for the presence of the hTERT gene is more accurate than the Pap test. Positive test results provide early indications of cancer.

Several recent studies have concluded that hTERT amplification testing is "a promising diagnostic marker for routine cervical cancer screening to improve the screening accuracy." These DNA-based tests take away much of the uncertainty, the waiting, and the further testing that occur with Pap tests.

That translates into improved health care for everyone, including people like Jill and Lucy:

• For Jill – her Pap was negative, but her HPV was positive (consistent with her back pain). The accepted course of action would be to wait a year and test

again. Instead, her negative hTERT test confirmed that she had the HPV virus, but not the cancer gene. Her doctor should retest to make sure the virus clears her body (this could take up to two years). This test alleviates a lot of worry, and may even eliminate the need for a biopsy and colposcopy.

• For Lucy – both of her Pap tests were negative. Although she was not worried, after seeing Ortega's article, she obtained a DNA-based test kit and took it with her to the gynecologist. Lucy was shocked when her test revealed a positive hTERT gene, which indicated the presence of cancer (her history of multiple sexual partners and the use of birth control pills for more than five years put her at higher risk). Unfortunately, her Pap test was one of the false negatives. Thankfully, her cancer was caught at an early stage using the DNA-based test.

Today's women should expect nothing but the best from our great health-care system, but that means we must be informed participants. You don't have to settle for certain treatments – you just need to know what's available. You don't need to have all the answers – you just need to know how to find them. You don't need to be a health-care professional – you just need to be the leader of your health-care team.

*Jacqueline Shore RN, OCN is owner of RN Patient Advocates of AZ, offering education, advocacy and guidance through the health-care system. If you would like to obtain a cervical DNA kit to take with you to your next well woman appointment, please contact Jackie at 602-465-2733, or online at Jackie@patientadvocatesaz.com.*

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