THE CERVIX
- The cervix is the lower part of the uterus.
- The uterus is shaped like an upside-down pear; the wide part is called the ‘body’ and the narrow part the ‘cervix’.
- Inside the body of the uterus there are soft columnar cells which have a good blood supply. The cervix has tough, squamous cells, which do not have such a good blood supply: otherwise, it would bleed during sexual intercourse.
- Around the cervical canal, there is a junction point, where the soft columnar cells stop and the tough squamous cells begin. This is known as the transformation zone.
- The soft columnar cells gradually adapt and change into squamous cells. However, it is these ‘changing’ cells, which have the potential to become cancer cells.
- Usually any cancerous changes occur slowly. This may take years if it happens at all.

RISK FACTORS FOR CERVICAL CANCER
- Human papilloma virus (HPV).
- Intercourse at an early age.
- Women with many sexual partners, or whose partners have had many partners, are more at risk.
- Note: it is important to remember that although these factors can increase the chances of catching the virus, many women who have only had one sexual partner have HPV, and may go on to develop dyskaryosis or cervical cancer.
- Long-term use of the pill (more than 10 years) may increase the risk, although further research is needed.
- Women who smoke are about twice as likely to develop the disease as non-smokers.
- Women with a late first pregnancy have a lower risk than those with an early first pregnancy. The risk rises with the number of pregnancies.
- Women in lower socioeconomic groups are at higher risk than those in higher socioeconomic groups.
- Almost half of the 3,500 new cases of cervical cancer each year in the UK occur in women who have never had a smear test. However, only 15 per cent have not had a smear test in the last five years. The biggest risk factor, therefore, is non-attendance.

MORTALITY RATES
- In 1997, 1,222 women died from cervical cancer in England and Wales, a death rate of 41 per million. The death rate increases with age: around 95 per cent of deaths occur in women aged over 35 years (CancerBACUP, 2002).
- Deaths from cervical cancer have fallen by more than 40 per cent from 7.0 deaths per 100,000 in 1979 to 4.1 per 100,000 in 1995.
- Cervical cancer is the twelfth most common cause of cancer deaths in women in the UK.

CERVICAL SCREENING: SMEAR TESTS
- The smear test is a test to detect early changes in cervical cells (dyskaryosis). This is known as cervical screening.
- A sample of cells from the cervix is ‘smearred’ onto a slide and sent to a laboratory for examination under a microscope.

THE NHS SCREENING PROGRAMME
- The programme aims to reduce the number of women who develop invasive cervical cancer (incidence) and the number of women who die from it (mortality).
- All women aged between 20 and 64 are eligible for a free cervical smear test every three to five years.
- Health authorities invite women who are registered with a GP using a computerised call-recall system.

DEVELOPMENTS IN SCREENING
- HPV testing.
- Trial of management of borderline and other low-grade, abnormal smears (TOMBOLA).
- Liquid-based cytology.
- Review of National Institute for Clinical Excellence (NICE) guidelines.

WEBSITES
- CancerBACUP: www.cancerbacup.org.uk
- NHS Cancer Screening Programme: www.cancerscreening.nhs.uk
- National Institute for Clinical Excellence (NICE): www.nice.org.uk
- Cancer Research UK: www.cancerresearchuk.org

The information given serves as a general reference. Nurses should consult their individual trust policies on clinical procedures.