



# Cervical Screening: A Comprehensive Review

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## **Abstract**

at the early detection and prevention of cervical cancer. This comprehensive abstract delves into the significance,

screening and the frequency of screenings. Some countries recommend starting at age 21, while others suggest 25, and the interval between tests varies. Striking a balance between early detection and minimizing unnecessary procedures is crucial [8].

### **False positives and negatives**

Cervical screening is not foolproof, with the potential for both false positives and false negatives. False positives can lead to unnecessary interventions, while false negatives may delay cancer diagnosis [9]. Striking the right balance between sensitivity and specificity is challenging.

### **Ethical issues**

Cervical screening raises ethical questions about informed consent, privacy, and the role of healthcare providers in communicating results and making recommendations. Striking a balance between public health goals and individual autonomy is an ongoing challenge.

### **Recent Advances**

#### **HPV vaccination**

The development of vaccines against high-risk HPV strains has been a significant advance in cervical cancer prevention. Widespread vaccination can reduce the overall burden of cervical cancer, complementing screening efforts.

#### **Molecular testing**

Molecular testing, such as HPV genotyping (t A)26(dvra)cls8.9(incer0.s19(t)-4.5(l)12(t7)]034 W -1.575 -1.2 T(e p)1201.158(eraes)5(t)-o)10,mexo