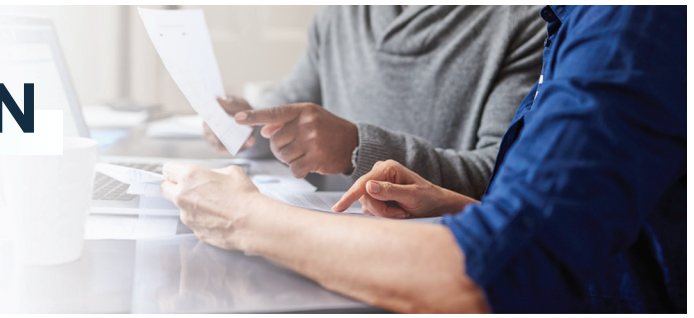


# POWER OF PREVENTION

## The Health and Economic Benefits of Preventing Chronic Diseases



## CERVICAL CANCER

Cervical cancer was once the leading cause of cancer death for US women. But in the past 40 years, the number of cases and deaths has gone down significantly. This decline is largely the result of many women getting regular Pap tests, which can find cervical precancer before it turns into cancer. However, women with lower incomes, less education, and less health insurance coverage get screened less often.<sup>1</sup>

### Cervical Cancer in the United States

- Nearly 13,000 new cases of cervical cancer were reported in 2018, and about 4,000 women died of it.<sup>2</sup>
- The rate of new cervical cancer cases has stabilized during the past 10 years.<sup>3</sup>
- The death rate is higher for non-Hispanic Black women than for women of other races and ethnicities.<sup>2</sup>





### Strategies That Work

CDC is working to prevent cancer, detect it early, improve the health of people with cancer, and reduce health care costs associated with cancer.

To help prevent cervical cancer or catch it early, the US Preventive Services Task Force recommends screening for cervical cancer every 3 years with a Pap test alone in women aged 21 to 29. Women aged 30 to 65 should be screened every 3 years with a Pap test alone, every 5 years with high-risk human papillomavirus (HPV) testing alone, or every 5 years with both tests (cotesting).<sup>7</sup>

### The Benefits of Using Proven Strategies

More cervical cancer screening would:

-  **SAVE lives.** Cervical cancer screening has helped reduce cervical cancer deaths since the 1960s.<sup>4</sup>
-  **INCREASE 5-year survival rates.** Over 90% of women diagnosed at an early stage of cervical cancer live for 5 years or more, compared to less than 17% of those diagnosed with late-stage cervical cancer.<sup>3</sup>
-  **REDUCE racial disparities.** The 5-year survival rate for cervical cancer is about 67% for White women and 58% for Black women, in part because White women are more likely to be diagnosed at an earlier stage.<sup>5</sup>
-  **SAVE money.** Screening can identify cervical cancer at an early stage, when it is much less expensive to treat.<sup>6</sup>



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Screening reduces diagnoses and deaths from cervical cancer.<sup>8</sup> [HPV vaccination](#) can reduce new cervical cancer cases, but more young people need to be vaccinated. In 2017, only about 49% of adolescents were up to date on the HPV vaccine.<sup>9</sup>

CDC's [National Breast and Cervical Cancer Early Detection Program](#) (NBCCEDP) helps low-income, uninsured, and underinsured women get access to timely breast and cervical cancer screening and diagnostic services. To improve access to treatment, Congress passed the [Breast and Cervical Cancer Prevention and Treatment Act](#), which allows states to use Medicaid to cover treatment for women diagnosed with cancer through the NBCCEDP.

The NBCCEDP supports all 50 states, the District of Columbia, 6 US territories, and 13 American Indian or Alaska Native tribes or tribal organizations.

**NBCCEDP strategies include:**

- Funding screening and diagnostic services for eligible women.
- Supporting population-based approaches that increase high-quality breast and cervical cancer screening.

**Since 1991, NBCCEDP-funded programs have:**

- Served more than 5.8 million women and provided more than 15.2 million breast and cervical cancer screening exams.
- Diagnosed over 4,938 cases of invasive cervical cancers and over 226,049 precancerous cervical lesions, of which 39% were high grade (more likely to progress to cancer).



**About 6% of US women aged 21–64 were eligible for NBCCEDP cervical cancer screening services during 2015–2017. The program was able to serve 6.8% of eligible women during this time.<sup>10</sup>**



**\$1.6 BILLION<sup>\*(a)</sup>**  
total annual medical cost  
of cervical cancer care<sup>11</sup>

**The High Cost of Cervical Cancer**

- The average annual medical cost of cervical cancer varies widely depending on the phase of treatment. For example, the average mean cost of care during the last year of life could be as high as \$118,000<sup>\*(a)</sup> for patients younger than 65 years and as high as \$79,000 for those older than 65.<sup>11</sup>
- On average, cancer survivors have annual losses in work productivity (due to missed work days and employment disability) that are more than \$1,000<sup>\*(b)</sup> higher compared to people without a cancer history.<sup>12</sup> Some cancer survivors are not able to return to work, while others report not being able to perform all tasks because of illness or distress.

\* Costs were measured in <sup>a</sup>2010 US dollars and <sup>b</sup>2011 US dollars. Older cost estimates are likely to be underestimates.