



Strang Cancer Prevention Institute

Dedicated to Promoting Cure by Early Detection and Research to Prevent Cancer since 1933

Prevention

Cervical Cancer Awareness Month January 2026

CERVICAL CANCER: INNOVATION IN PREVENTION AND EARLY DETECTION

Note to readers: Innovation is essential for cancer prevention. New analytic, diagnostic, and treatment methods, including precision medicine and artificial intelligence, continue to transform early detection and risk reduction. The Strang Cancer Prevention Institute, whose mission since 1933 has been to promote the cure of cancer through early detection and research, will continue to highlight important advances that improve patient outcomes and expand access to life-saving care.

Summary: Cervical cancer is one of the most preventable cancers, yet thousands of cases still occur each year in the United States, largely due to gaps in screening and vaccination. Nearly all cervical cancers are caused by persistent infection with high-risk human papillomavirus (HPV). In 2025, major screening guidelines were updated to include HPV self-sampling, marking a significant shift toward earlier and more equitable detection of cervical cancer. At the same time, new evidence supports simplified HPV vaccination strategies and confirms that vaccination programs are already preventing cervical cancer at a population level. Together, these innovations pave the path toward eliminating cervical cancer.

CERVICAL CANCER: RECENT INNOVATION IN DETECTION

HPV self-sampling expands access to cervical cancer screening

In 2025, updated cervical cancer screening guidelines formally endorsed self-collection of vaginal samples for HPV testing as an acceptable screening option.¹ This allows women to collect their own sample either at home or in a clinical setting, without the need for a pelvic exam. Multiple studies have shown that self-collected samples are nearly as accurate as clinician-collected samples for detecting high-risk HPV.

This change addresses major barriers to screening, including lack of access to care, discomfort with pelvic exams, time constraints, and cultural concerns. HPV testing detects infection before cancer develops, often years earlier than abnormal cells can be seen on a Pap test. By making screening easier and more acceptable, self-sampling has the potential to reach women who have never been screened or who are overdue, especially in underserved communities. This guideline update represents one of the most important cervical cancer detection advances in the decades since Strang introduced the PAP test in the 1940s.

CERVICAL CANCER: RECENT INNOVATION IN PREVENTION

Single-dose HPV vaccination shows strong and lasting protection

New clinical and population-level evidence confirms that a single dose of the HPV vaccine provides strong protection against high-risk HPV infection for at least five years.² This finding has important implications for prevention, particularly in settings where completing multi-dose vaccine schedules is difficult. Simplifying vaccination to a single dose could increase uptake, reduce costs, and accelerate global efforts to prevent cervical cancer before infection occurs.

Real-world evidence shows HPV vaccination is dramatically reducing cervical cancer

Population-level data from England show that HPV vaccination is already preventing cervical cancer on a large scale.³ Using national cancer registry data from more than 53 million women-years of observation, researchers found substantial and sustained reductions in both invasive cervical cancer and high-grade precancerous lesions among women offered HPV vaccination. The largest benefit was seen in those vaccinated at ages 12 to 13, who experienced approximately an 80 percent reduction in cervical disease compared with unvaccinated cohorts. These findings confirm that HPV vaccination not only reduces infection but also prevents cancer itself, reinforcing vaccination as the cornerstone of cervical cancer prevention even as screening strategies evolve.

Editor | Michael P. Osborne MD, MSurg, FRCS, FACS, President **Strang** Cancer Prevention Institute

Marketing | Newsletter Design | Merle K. Barash BFA, MA AEd, MA Psya, Officer Secretary **Strang** Board of Trustees

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1. American Cancer Society. Updated cervical cancer screening guidelines include HPV self collection. 2025.
2. Kreimer AR, Porras C, Liu D, et al. Noninferiority of one HPV vaccine dose to two doses. *N Engl J Med*. 2025;393(24):2421-2433. doi:10.1056/NEJMoa2506765.
3. Falcaro M, Castañón A, Ndlela B, et al. Association between HPV vaccination and cervical screening policy changes and cervical cancer incidence and grade-3 cervical intraepithelial neoplasia incidence in England, 2006–2020: a population-based trends analysis. *Lancet EClinicalMedicine*. 2025;49:101157. doi:10.1016/j.lanepe.2024.101157.



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IMPORTANT LINKS FROM THE STRANG WEB SITE

<https://www.strang.org/>

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<https://www.strang.org/mission>

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<https://www.strang.org/history>

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NCI (National Cancer Institute) CANCER CENTERS BY STATE

<https://www.strang.org/us-cancer-centers>

STRANG CANCER PREVENTION COOKBOOK

<https://www.strang.org/strang-cookbook>

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The Strang Cancer Prevention Cookbook

Roasted Eggplant Dip

Reduce Your Risk for Cancer by Eating a Healthy Diet!

8 Servings

1 medium eggplant (about 1 1/4 pounds) halved lengthwise
1 tablespoon olive oil
2 garlic cloves peeled
1 medium potato (about 6 ounces), baked or microwaved and peeled
1/2 cup 1% cottage cheese or 2 ounces lite silken tofu
2 tablespoons tahini (toasted sesame paste)
1 teaspoon lemon juice
1 teaspoon cayenne pepper
2 teaspoons toasted sesame oil
salt



Preheat the oven to 350 degrees F

Brush the flesh of the halved eggplant with 1 teaspoon of the olive oil. Place on a non stick baking pan, cut side down, and roast for 20 to 30 minutes. Remove from the oven and let cool. Scoop the pulp from the skin of the eggplant and place in the bowl of a food processor. Add the roasted garlic and potato and puree. Then add the cottage cheese, tahini, lemon juice, and cayenne and puree again until smooth. With the motor running, drizzle in the sesame oil and remaining 2 teaspoons olive oil. Season to taste with salt and transfer to an attractive serving bowl.

Calories 110, protein 4g, carbs 15g, fat 4g, cholesterol 1mg, dietary fiber 2g, saturated fat 1g

MAJOR SOURCES OF POTENTIAL CANCER FIGHTERS

Phytochemicals: allium compounds, plant polyphenols, (flavonoids, phenolic acids), phytic acids, plant sterols, terpenes (monoterpenes)

Laura Pensiero, R.D., **Strang** Nutrition Consultant
Chef, Dietitian, Restaurateur, Author
Owner Gigi Hudson Valley, Trattoria & Catering, Rhinebeck, New York

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January is Cervical Cancer Awareness Month



Strang Cancer Prevention Institute

641 Lexington Avenue 15th Floor
New York, NY 10022
Tel: (212) 501-2111 www.strang.org

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