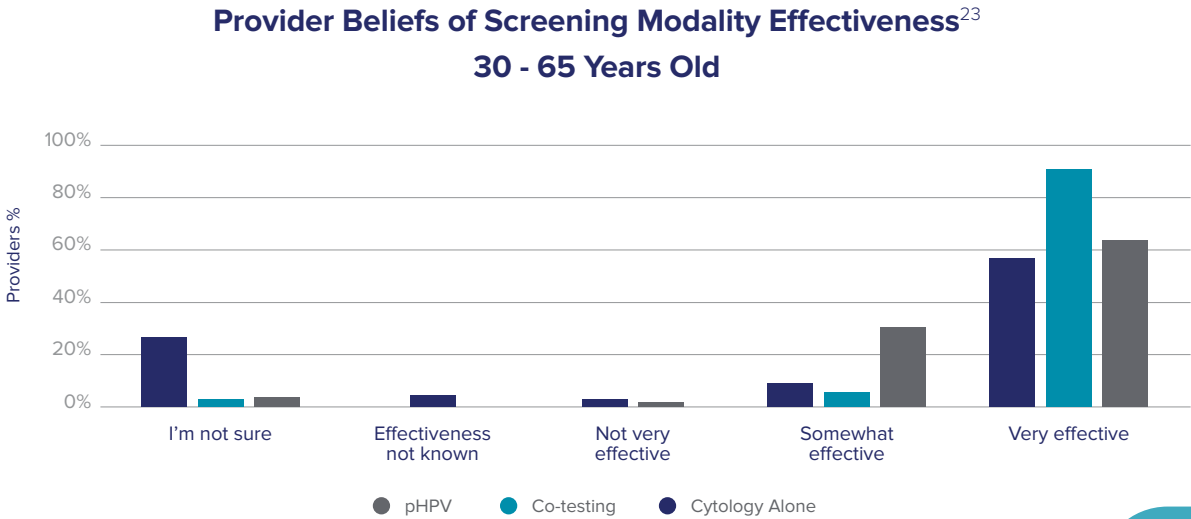
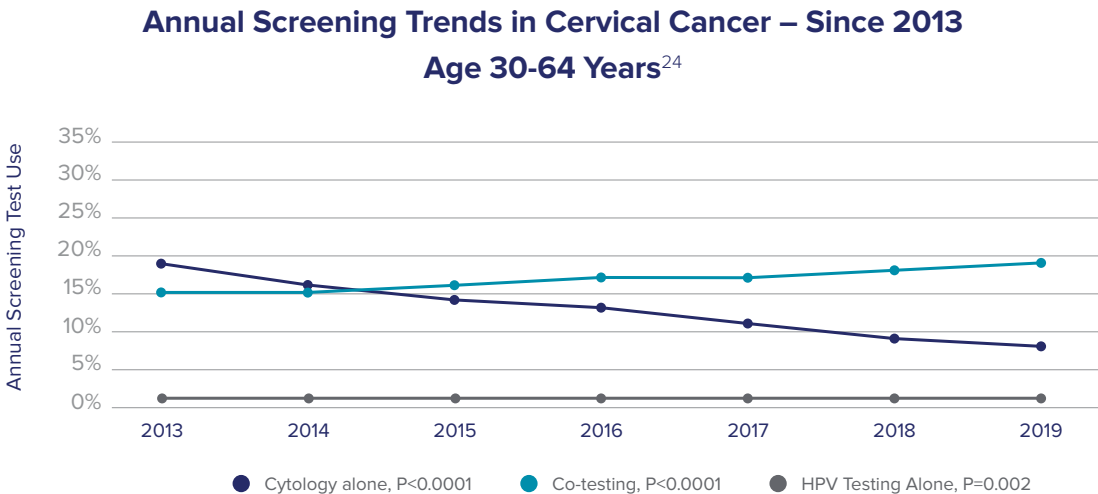


Effectiveness is Key



“Fewer providers believed in the effectiveness of pHPV [Primary HPV] to reduce cervical cancer mortality and were less likely to recommend pHPV [Primary HPV] in the correct age group and screening interval compared with cytology-based screening modalities”

- Kruse, 2023²³



“HPV Primary adoption remains low at 1.4% per USPSTF 2024 evidence review.”²⁵

Additional Studies Show:

Co-testing increased from **5.6%** in 2008 to **84.3%** in 2019 in women aged **30-64 years**²⁶

Guidelines Maintain Access to All Screening Modalities²⁷

Cervical cancer screening guidelines continue to evolve with a shared goal: expanding access and ensuring all eligible women have the opportunity to be screened.

Screening with Pap-alone beginning at age 21 and co-testing or primary HPV* screening beginning at age 30, with screening generally ending at age 65 with a history of adequate prior screening.[‡]

Preventive cervical cancer screening remains broadly accessible, with recommended screening modalities covered under the Affordable Care Act (ACA).

Co-testing as a Recommended Screening Modality Is Covered by the Affordable Care Act

For patients, this may mean:²⁸



No co-pay



No deductible



No out-of-pocket cost

Patients should consult their healthcare plans to verify coverage.

Learn why every woman is worth two tests at hologicwomenshealth.com/cervicalhealth

Method + Technology Together *Define Performance*

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HOLOGIC

COMPREHENSIVE
Screening
FOR COMPREHENSIVE
CARE.

1 in 5 women with cervical cancer were missed by HPV-Alone* screening.¹

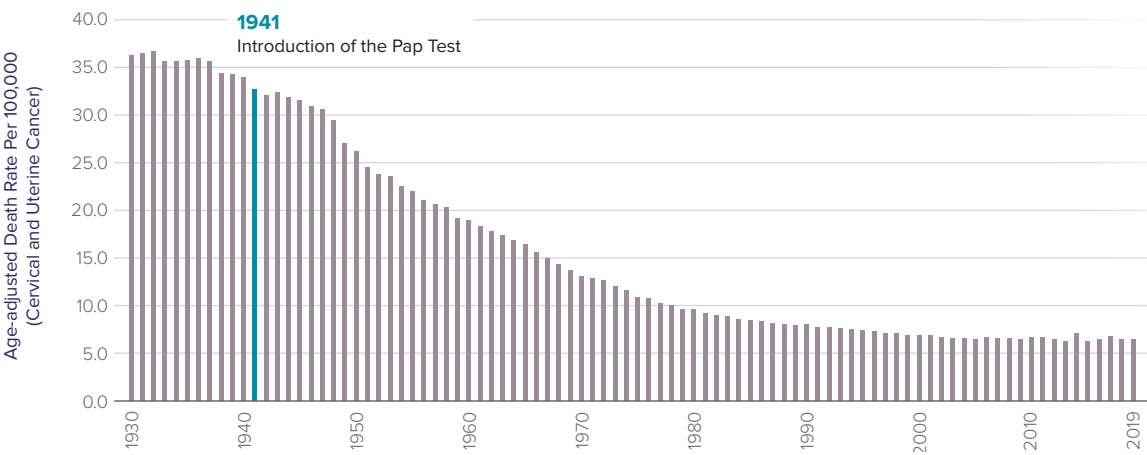
*A positive HPV screening result may lead to further evaluation with cytology and/or colposcopy.



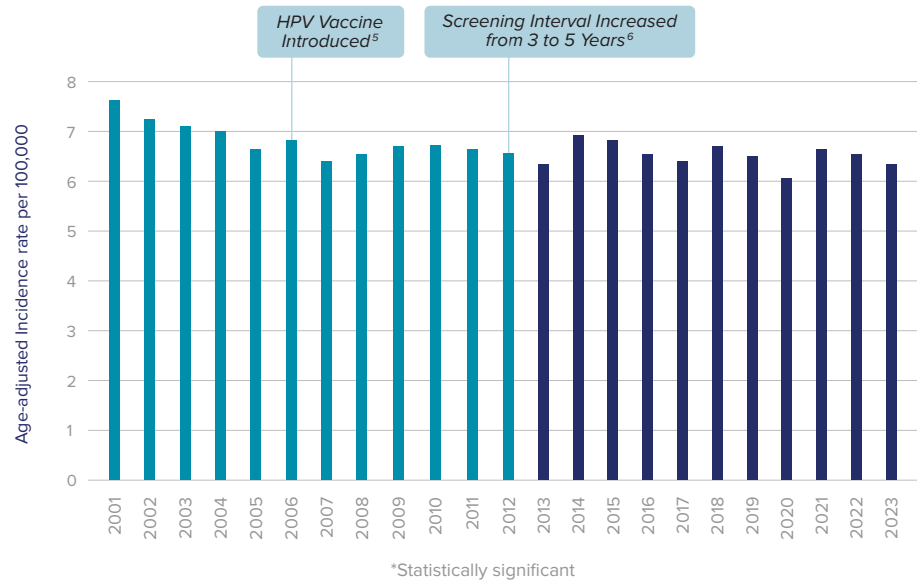
Know the Facts

The Pap Test Has Been the Most Successful Cancer Screening Program in History²

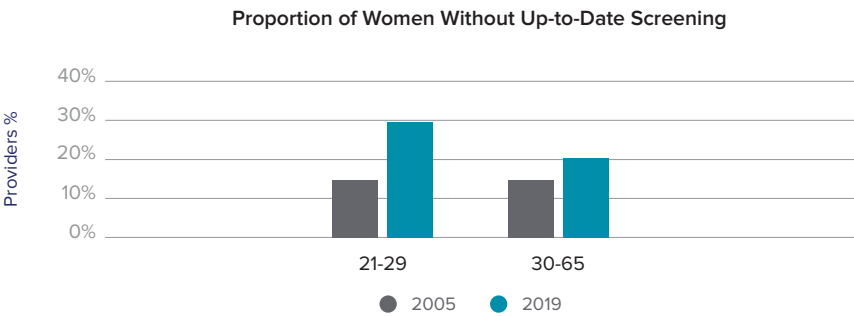
The rate of cervical cancer, which was a leading cause of cancer death among women, has fallen by more than 70 percent since the Pap test was introduced over 80 years ago.³ Previously, cervical cancer was the leading cause of cancer death in women, but now it is the fifteenth most frequent.



Incidence of Cervical Cancer in the US Has Plateaued Since 2010⁴



Cervical Screening Rates Are Suboptimal and Continue to Decline^{8,9}



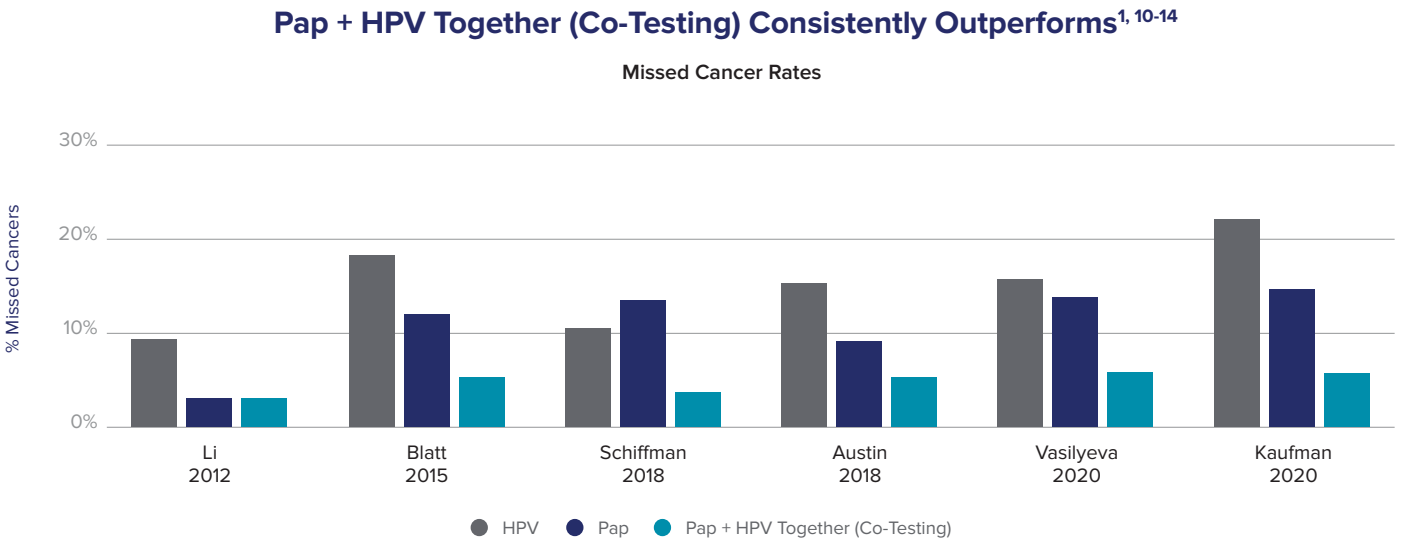
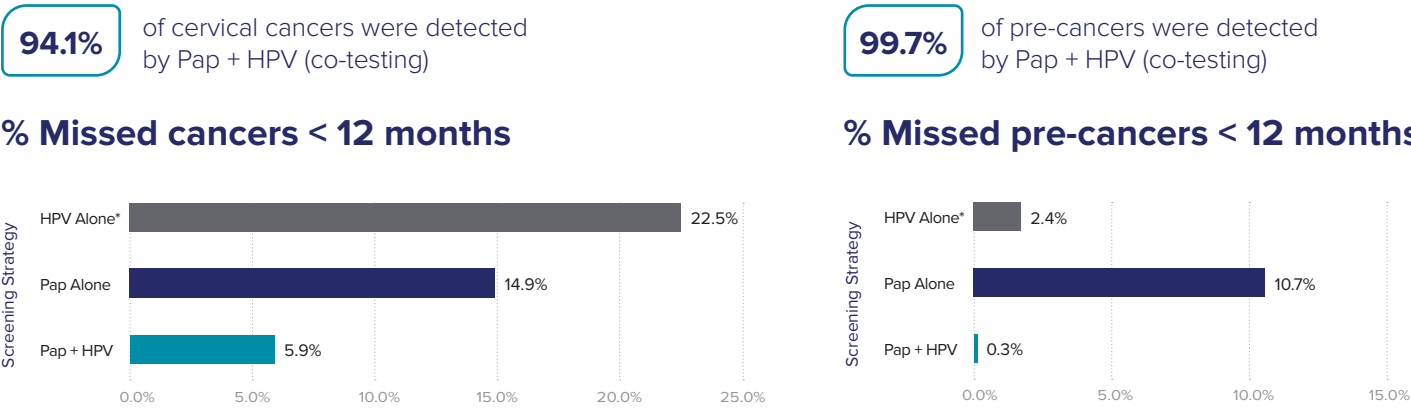
“A new & alarming observation was the increasing percentage of women being screened at too long an interval.”
- Castle et al. 2021⁸

“When your patient finally comes in, why settle for less than the most comprehensive test?”
“Cervical cancer screening rates were lower during the pandemic than before it, and still haven’t rebounded, which unfortunately is a continuation of a declining pattern for the past 20 years.”
- ACS⁷

Choose Pap + HPV

Recent Publications Representative of US Clinical Practice Showed Pap + HPV (Co-testing) Misses the Fewest Cancers/Precursors to Cancer

Kaufman et al, 2020¹



1 in 5

cervical cancers were missed with HPV Alone^{*11,13}

Screening with Pap + HPV (Co-testing) identified

70%

of the cancers missed by HPV-Alone^{*1}

95%

of cervical cancers were detected with Pap + HPV (Co-testing)^{11,13}

Don’t Sacrifice

Several Clinical Studies Confirm Screening with HPV-Alone* Missed Cervical Cancer Proportion of HPV Negative Cancer Cases^{1,11,13,15-19}

31% MISSED

Katki et al 2011

14% MISSED

Zhao et al 2013

17% MISSED

Zhao et al 2014

17% MISSED

Zhao et al 2012

19% MISSED

Gage et al 2014

19% MISSED

Blatt et al 2015

24% MISSED

Austin et al 2018

28% MISSED

Kaufman et al 2020

This chart is a representation of clinical data from multiple published sources. The clinical studies represented within these sources were conducted using different study designs with various assays.

“Liquid based cytology (LBC) enhanced co-testing detection of cervical cancer ... to a greater extent than previously reported with conventional Pap smear and HPV co-testing.”
- Austin RM, et al.¹³

Cervical Cancer Screening Collection Methods and Results

ACOG, ASCCP and ACS are aligned that clinician-collected is preferred²⁰⁻²³

	Collection Method		Results
Pap-Alone	✓	Clinician-Collected Cervical Specimen	✗ HPV Test Result ✓ Cytology Result
Pap+HPV (Co-testing)	✓	Clinician-Collected Cervical Specimen	✓ HPV Test Result ✓ Cytology Result
HPV-Alone*	✓	Clinician-Collected Cervical Specimen	✓ HPV Test Result ✗ Cytology Result
HPV-Alone*	✓	Patient-Collected Vaginal Specimen	✓ HPV Test Result ✗ Cytology Result