The screening of cervical cancer in France is opportunistic. There is no national registry but regional registries in 5 departments covering 15% of the population. Epidemiological data and estimate of cancer incidence and mortality are available from the Institut de Veille Sanitaire web site (www.invs.sante.fr). Cervical cancer incidence and mortality in France have largely decreased from 1985 to 2005. The age standardized rate of the incidence and the mortality are estimated to be 7.1 and 1.9, respectively. The screening population from 25 to 65 years old represents 16 millions of women and 6 millions of cervical smears per year are done. The coverage rate is around 60% of which 40% of women still get a smear annually and only 15% get a smear triannually. The smears are performed in 90% of cases by gynecologists and in 10% by general practitioners. The smears are read in private laboratories in 95% of the cases. There is no minimum size of a laboratory, no maximum number of smears per cytotechnician or pathologist, no official quality control on the reading of smears.

National guidelines on the management of a patient with an abnormal cervical smear and evaluation on liquid based cytology and HPV detection for primary screening have been provided by la Haute Autorité de Santé (www.has.fr). The Bethesda terminology was recommended for cytology report since 10 years and the HPV testing is recommended and reimbursed only after an ASC-US diagnosis. HPV primary screening is considered premature. The results of the second round of the randomized European studies and a cost efficacy analysis in the French context are requested.

Main conclusions: The cervical cancer incidence and mortality are low in France. It could be decreased by a better coverage of the population with an organised screening programme.