Cervical cancer is currently the third gynecological cancer in terms of mortality and is responsible for around 13% of cancer cases in women. In Poland, over 3,000 new cases of cervical cancer are diagnosed each year and the peak of incidence occurs in women between 45 and 64 years of age. The incidence of cervical cancer is higher than the average for EU countries, despite the introduction of preventive examinations since 2004, which enable pap smear for women aged 25-59 once every 3 years. Despite the improvement of the diagnostic situation, cervical cancer remains a major health problem. Its development is preceded by the onset of cervical intraepithelial neoplasia (CIN). Due to unfavourable epidemiological data and lack of sufficient knowledge about carcinogenesis development indicate a need for detailed development of knowledge in this matter. Testin is a protein expressed in almost all normal human tissues. It is present in different cellular localizations: in the cytoplasm and along actin fibers being recruited to focal adhesions. Testin play significant role in cell motility and adhesion. In 2007 testin for a first time was described as a protein which can plan role in cancer cell mobility and invasion. The result of my pilot studies conducted on cases of preinvasive changes CIN I, CIN II, CIN III and cervical cancer showed decreased expression of testin in cervical cancer cells compared to normal tissue of the organ being examined. The decreased expression of testin in cancer cells compared to normal cervical tissue may indicate prognostic, diagnostic value of testin in the process of neoplasia. Lack of studies concerning the expression of testin in cervical cancer and promising results of my pilot studies suggest that this area of research is justifiable.The relationship between testin expression and clinicopathological data may serve as a tool for assessing the invasiveness potential of CIN changes, and evaluating the effectiveness of treatment in the future.