

Cervical cancer screening program changes

What causes cervical cancer?

Over 99% of cervical cancer is caused by the human papilloma virus (HPV). HPV is a common sexually transmitted infection in men and women. Most people have HPV at some time in their lives. Most HPV infections clear up by themselves without causing any problems. Using condoms can prevent the transmission and spread of many sexually transmitted infections, but they provide limited protection against HPV as they don't cover all areas of the genital skin.

Why is the cervical cancer screening program changing?

In December 2017, the National Cervical Screening Program will change. New knowledge and technology means the cell changes that could lead to cervical cancer can be found sooner. The new test looks for the presence of the HPV virus rather than looking for changes in cells that can occur because of the virus. It is a more accurate test and can detect problems earlier.



What is changing?

Pap tests used up to 30 November 2017	Cervical Screening Test (CST) used after 1 December 2017
<ul style="list-style-type: none"> cells from the cervix are examined for physical changes that may indicate cancer test recommended every 2 years from 18-69 years of age 	<ul style="list-style-type: none"> cells from the cervix are tested for HPV infection that may lead to cancer in the future test recommended every 5 years from 25-74 years of age

How is the new Cervical Screening Test (CST) done?

Your experience having a CST is exactly the same as having a Pap test. You will still have an examination using a speculum (used to open the vagina) so that the cervix can be seen properly to take the sample of cells for HPV testing. The sample is collected using a special brush which is then placed in a container of liquid and sent away for testing.

What happens if I have a positive test?

If your CST is positive for any high-risk types of HPV (the types most likely to cause cervical cancer) the laboratory will automatically carry out a second test to look for changes in the cells of the cervix (liquid based cytology). This second test is also part of the CST. Your doctor or nurse will explain what you need to do next if you have a positive CST. Some people may need more frequent CST and others may need additional tests straight away.

If your CST is positive for HPV-16 or HPV-18 you will be referred for an examination called a colposcopy - a close examination of the cervix under magnification. If any cell changes are found, a sample of tissue (biopsy) can be taken from the cervix for further examination.

How will I know when I'm due for my test?

The new National Cervical Screening Register will send you a letter inviting you to have a CST. If you had a negative Pap test since December 2015, you will be invited 2 years after your last test for your first CST. If your CST is negative, your next test will be in 5 years' time.

If you are currently undergoing surveillance or treatment for a previous abnormal Pap test your doctor or nurse will explain what tests you need and when you should have them in the new screening program. If you have already had a Pap test and are under 25 years of age you will be advised by the National Cervical Screening Register when your first CST is due.

Is it safe for me to wait until 25 for my first test?

Yes. It's safe to have your first CST at the age of 25 years. This is because:

- Cervical cancer is very rare in young women
- Young women are protected by the HPV vaccine
 - The National HPV Vaccination Program is reducing the rates of HPV infection and cervical pre-cancers
 - Its effect will continue to increase as more young people are vaccinated
- HPV infection is common in young sexually active women and usually clears up by itself
- The cervical screening program has not shown a difference in the detection of cervical cancers for women under 25.

You should always see your doctor if you have any unusual pain or bleeding from the vagina, such as bleeding after sex, bleeding in between your periods or bleeding after menopause. This may be a sign of abnormal cells on the cervix. If you have had any sexual activity before 14 years of age, you can ask your doctor or nurse about having a CST before the age of 25.

Do I need to have the test if I've had the HPV vaccine?

Yes. If you've had the HPV vaccine it's still important to have your regular CST. The vaccine prevents most types of HPV infection but it does not prevent all types that can cause cervical cancer. Talk to your doctor or nurse if you missed out on the HPV vaccine at school as it may still be useful for you to have it.

Can I do the test myself?

In the new program a self-collected CST will be possible for some women – it still needs to be done in the clinic and cannot be done at home. To do the self-collected test, you insert a swab into your vagina and place it into a collection tube which is sent to the pathology laboratory for HPV testing. The self-collected test is less accurate than a CST by a trained doctor or nurse, so a clinician-collected sample is preferred.

There are several self-testing home-based kits being advertised in Australia which are not part of the National Cervical Screening Program and we do not recommend that you use these.

For more information

- **Family Planning NSW Talkline** – www.fpnsw.org.au/talkline or 1300 658 886
- **National Relay Service (for deaf people)** – 13 36 77
- **TIS National's immediate interpreting service** – 131 450
- Visit your nearest **Family Planning NSW clinic** – www.fpnsw.org.au/clinics
- Family Planning NSW **client factsheet on HPV vaccination** – <https://www.fpnsw.org.au/health-information/individuals/cervical-screening/hpv-vaccination>
- Family Planning NSW client resource **Everything you need to know about the changes to the National Cervical Screening Program** – <https://www.fpnsw.org.au/changes>