

CERVICAL SCREENING: Supporting your patients to make the choice



VCS Pathology

	Clinician-collected cervical sample	Self-collected vaginal sample																			
Is it accurate?	Both methods have equivalent sensitivity for the detection of HPV and CIN2+/AIS ^{1,2}																				
Identifies HPV infection?	Yes	Yes																			
Is liquid-based cytology (LBC) and co-testing possible?	Yes	No																			
Indicated for <ul style="list-style-type: none"> Those who are eligible and due or overdue for cervical screening, including during pregnancy Other points in the pathway where only an HPV test is required. 	Yes	Yes																			
<ul style="list-style-type: none"> Patients who have postcoital or intermenstrual bleeding, post-menopausal bleeding, or unexplained persistent unusual vaginal discharge³ Those undergoing Test of Cure surveillance or have been treated for adenocarcinoma-in-situ Patients who have had a total hysterectomy with history of high-grade squamous intraepithelial lesion Patients who were exposed to diethylstilbesterol in utero. 	Yes	No																			
Management of participants in whom HPV is not detected >90%	Return in 5 years	Return in 5 years																			
Management of participants in whom HPV (not 16/18) is detected ~6%	Reflex LBC performed on original sample, no need to return for a further sample to be taken	Return for clinician-collected cervical sample for LBC. The incidence of HPV (not 16/18) is highly age dependent. NCSR data ⁴																			
		<table border="1"> <tbody> <tr> <td>25-29 years</td> <td>17%</td> <td>50-54 years</td> <td>4%</td> </tr> <tr> <td>30-34 years</td> <td>10%</td> <td>55-59 years</td> <td>3%</td> </tr> <tr> <td>35-39 years</td> <td>6%</td> <td>60-64 years</td> <td>3%</td> </tr> <tr> <td>40-44 years</td> <td>5%</td> <td>65-69 years</td> <td>3%</td> </tr> <tr> <td>45-49 years</td> <td>4%</td> <td></td> <td></td> </tr> </tbody> </table>	25-29 years	17%	50-54 years	4%	30-34 years	10%	55-59 years	3%	35-39 years	6%	60-64 years	3%	40-44 years	5%	65-69 years	3%	45-49 years	4%	
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		Patients aged 70 to 74 with HPV (not 16/18) detected are referred to colposcopy.																			
Management of participants in whom HPV (16/18) is detected ~2%	Refer for colposcopy	Refer for colposcopy																			
Management of Unsatisfactory HPV test	Repeat in 6 weeks	Repeat at earliest convenience																			

1 Arbyn et al, Detecting cervical precancer and reaching underscreened women by using HPV testing on self samples: updated meta-analyses BMJ 2018; 363 :k4823

2 Saville et al, Analytical performance of HPV assays on vaginal self-collected vs practitioner-collected cervical samples: the SCoPE study, Journal of Clinical Virology (2020), doi: <https://doi.org/10.1016/j.jcv.2020.104375>

3 Co-testing is not required for breakthrough or irregular bleeding due to hormonal contraception or a sexually transmitted infection, heavy menstrual bleeding, or contact bleeding at time of obtaining a routine cervical screening test sample

4 Smith et al, BMJ 2022;376:e068582 Available at: <https://www.bmj.com/content/376/bmj-2021-068582>

