compass
Future directions
in cervical screening

VCS

Cancer Council NSW

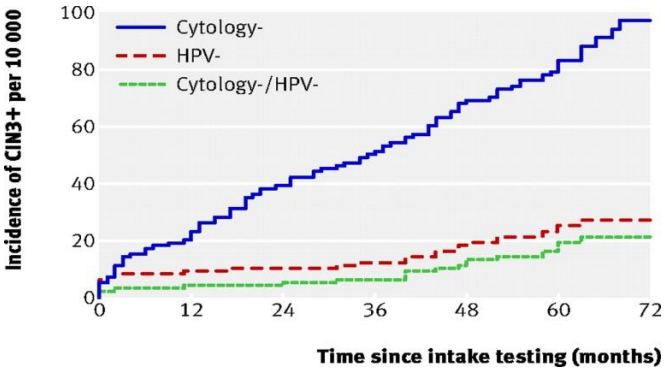
COMPASS TRIAL

A Randomised Controlled Trial of Primary HPV Screening

BACKGROUND

Primary HPV DNA testing has been reviewed and endorsed as a primary cervical screening method by the International Agency for Research on Cancer. A number of large scale randomised controlled trials of primary HPV DNA screening have found that HPV screening is more sensitive in detecting precancerous lesions than cytology-based screening and that it can safely be conducted at a longer interval (see fig 1). However to date there have been no specific trials that support primary HPV DNA testing for cervical screening in the Australian context.

Fig 1 **Kaplan-Meier plots of cumulative incidence rate for CIN3+ for women according to baseline test results in first 72 months of follow-up, excluding Denmark and Tübingen. Dillner J et al, 2008**



Compass is a randomised controlled trial which aims to compare 2.5 yearly cytology-based cervical screening with 5-yearly primary HPV screening in Australian women aged 25-69 years. Researchers at VCS Inc. and UNSW Australia are about to commence a trial of 121,000 women with initial randomisation at 1:2. Eligible participants are women, aged 25-69 years, attending for routine screening at participating practices in Victoria.

Health practitioners will seek consent from eligible women to participate in Compass during a regular cervical screening consultation. At the beginning of the consultation practitioners will provide women with a study information sheet and ask them to sign a consent form. Only a liquid-based cytology (LBC) sample will be taken. This will be returned to VCS Pathology where randomisation will occur and samples will be analysed.

The recommended screening interval for women with negative (normal) results will be 2.5 years in the image-read cytology screening arm, and 5 years in the primary HPV testing arm. The laboratory reports, issued to practitioners, will specify the recommended management.

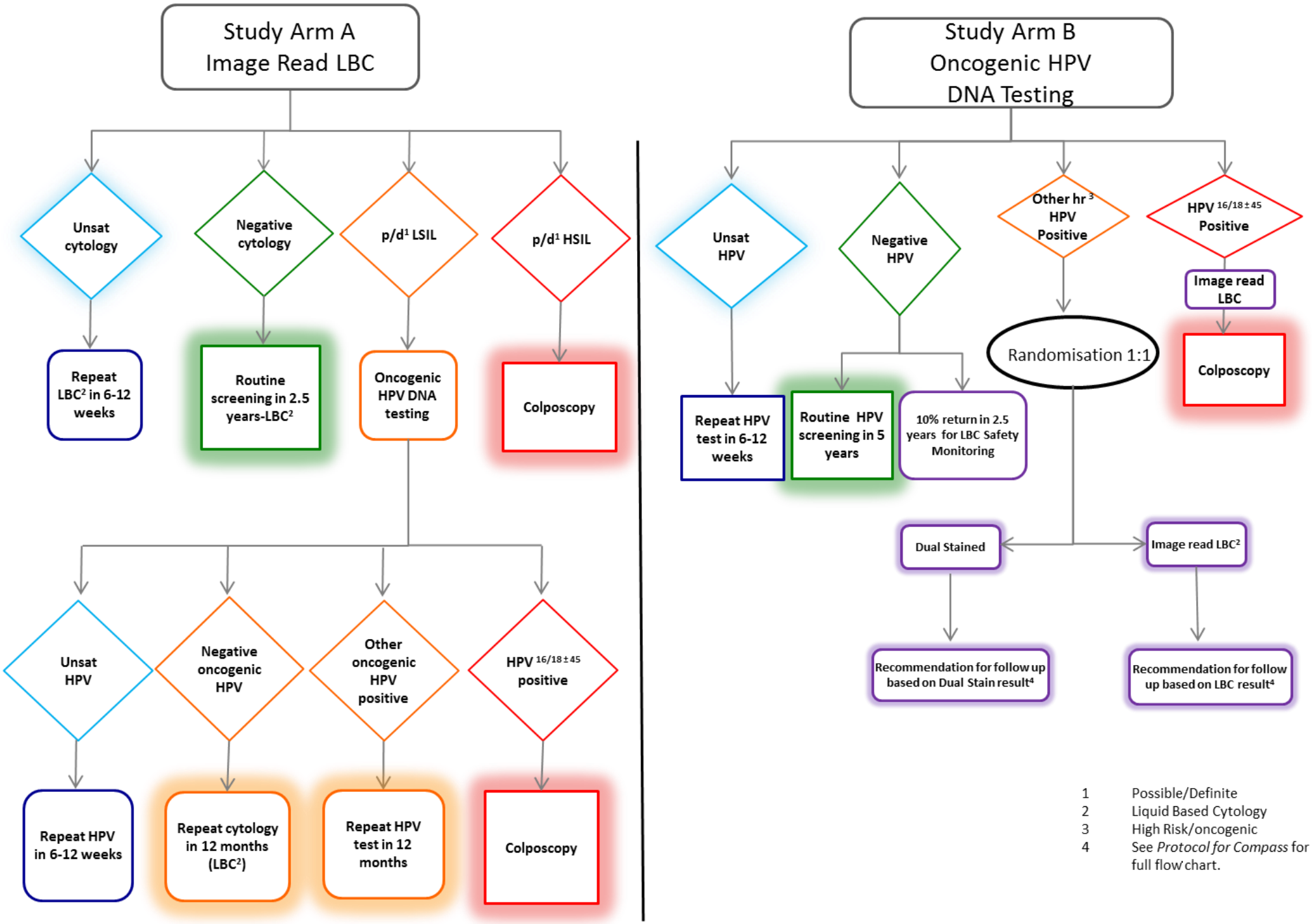
General Practitioners recruiting women for Compass will be eligible to take part in an Active Learning Module and earn QI&CPD program points.

For more information please contact one of the VCS Pathology Liaison Physicians on 03 9250 0300

Selected references:

- Dillner et al 2008, Long term predictive values of cytology and human papillomavirus testing in cervical cancer screening: joint European cohort Study, BMJ doi:10.1136/bmj.a1754
- Kitchener et al 2011, A comparison of HPV DNA testing and liquid based cytology over three rounds of primary cervical screening: Extended follow up in the ARTISTIC trial, European Journal of Cancer doi:10.1016/j.ejca.2011.01.008
- Mayrand et al 2006, Randomised controlled trial of human papillomavirus testing versus Pap cytology in the primary screening for cervical cancer precursors: Design, methods and preliminary accrual results of the Canadian cervical cancer screening trial (CCCaST), International Journal of Cancer: 119, 615-623
- Rijkaart et al 2012, Human papillomavirus testing for the detection of high-grade cervical intraepithelial neoplasia and cancer: final results of the POBSCAM randomised controlled trial, Lancet Oncology: 13:78-88

COMPASS TRIAL FLOW CHART (SIMPLIFIED[4])



1 Possible/Definite
2 Liquid Based Cytology
3 High Risk/oncogenic
4 See *Protocol for Compass* for full flow chart.