

A vertical watercolor illustration of a plant. The main stem is thin and brown, with several long, narrow, blue-green leaves. At the top, there is a cluster of green, round seed pods or fruits, each on a short stem. Below this, there are two smaller clusters of similar green seed pods. The background is white with some faint, scattered grey dots.

NHS cervical screening

Cervical screening – the facts

This leaflet tells you about cervical screening. It aims to help you choose whether or not to take part in the NHS Cervical Screening Programme.

What is cervical screening?

- Cervical screening is not a test for diagnosing cervical cancer. It is a test to check the health of the cervix, which is the lower part of the womb (often called the neck of the womb).
- For many women the test results show that everything is fine.
- But for around one in 20 women, the test shows changes in cells that can be caused by many things.
- Most of these changes will not lead to cervical cancer.
- Cervical screening is also introducing testing for the human papillomavirus (HPV). Certain types of HPV can cause abnormal changes in the cervix.

What is HPV?

The human papillomavirus (HPV) is a very common infection and most women get it at some time in their life. There are many types of HPV, and some types can cause abnormalities in the cervix. In some cases these abnormalities may, if left untreated, go on to develop into cervical cancer. Not all

abnormalities develop into cancer however, and in many cases HPV clears up by itself.

HPV is easily transmitted during intimate sexual contact between partners. This includes intimate contact between men and women, and between partners of the same sex. The virus shows no symptoms. This means you or a partner could have had the virus for many months or years from a previous relationship, without knowing it.

Why are women offered cervical screening?

Cervical cancer can often be prevented. The signs that it may develop can be spotted early on so it can be stopped before it even gets started.

Around 750 women die of cervical cancer in England each year. However many of those who develop it have not been screened regularly. Not going for cervical screening is one of the biggest risk factors for developing cervical cancer.

Should all women have the test?

We offer the test to all women aged between 25 and 64 but cervical cancer is more common if you:

- smoke;
- first had sex at an early age;
- have had several sexual partners or have had a sexual partner who has had several other partners; or

- take immunosuppressant drugs (for example, after an organ transplant).

If you have passed the menopause, you still need to be tested to check that your cervix is healthy. Ask your doctor for advice if you:

- have had a hysterectomy;
- are over 65;
- have never had sex with a man or woman; or
- you are not sure whether you still need to be tested.

What is the NHS Cervical Screening Programme?

The programme makes sure that if you are aged between 25 and 64, you will automatically receive an invitation. We will get your name from your doctor's list. This means it is important that your doctor always has your correct name and address.

After your first cervical screen, you will receive invitations every three years between the ages of 25 and 49. You will then be invited every five years between the ages of 50 and 64.

Who will carry out my test?

A doctor or nurse will carry out your test. If you would prefer to see a female member of staff, or would like someone with you, please ask when you make your appointment.

Will I have to undress?

We will ask you to undress from the waist down, but if you wear a full skirt you will not have to remove it.

What happens during the test?

The doctor or nurse will ask you to lie down on a couch. They will then gently put a small instrument, called a speculum, into your vagina to hold it open.

Then, they will wipe a small brush-like device over the cervix to pick up some cells.

They will put these cells into a small container of liquid, and send it away for the cells to be transferred onto a slide and examined under a microscope.

The test takes just a few minutes.

Does the test hurt?

You might experience some discomfort or pain – try to relax by taking slow, deep breaths as it may hurt more if you are tense. If it is painful, tell the doctor or nurse straightaway as they may be able to reduce your discomfort.



What about HPV testing?

We are starting to introduce HPV testing as part of the cervical screening programme. It will take a while for this to happen everywhere in England. HPV can cause abnormal changes in the cervix. If your screening result shows borderline cell changes or mild abnormalities (known as mild or low-grade dyskaryosis), an HPV test may be carried out on the sample of your cells taken during screening. This will help us decide if you need any further investigation, or if you can simply go back to routine screening in three or five years' time (depending on your age).

The nurse taking your cervical screening sample will be able to tell you whether HPV testing has started where you live.

When should I have my screening?

You should not be tested during your period so try to make sure you get an appointment before or after your period is due. The best time is in the middle of your cycle.

Can I have sex before the test?

If you use a spermicide, a barrier method of contraception, or a lubricant jelly, you should not use these for 24 hours before the test as the chemicals they contain may affect the test.

When do I get my results?

When you have the test, the doctor or nurse will tell you how, where and approximately

when you will get your results. Make sure you have received this information before you leave the surgery or clinic.

What about my HPV results?

If you have a screening result showing borderline cell changes or mild abnormalities, then your screening sample may be tested for HPV. This won't happen for everyone yet, as HPV testing is only just being introduced in England. If your sample is tested for HPV, then you will get this result at the same time as your screening result.

How reliable is cervical screening?

Early detection and treatment can prevent around 75% of cancers developing but, like other screening tests, it is not perfect.

It may not always detect early cell changes that may lead to cancer. Abnormal cells on your slide may not be recognised because:

- sometimes they do not look much different from normal cells;
- there may be very few abnormal cells on the slide; or
- the person reading your slide may miss the abnormality (this happens occasionally, no matter how experienced the reader is).

About one in 20 tests have to be taken again because:

- you may have an infection which needs treating before a clear slide can be made;

- the cervical cells on your slide may have been hidden by blood or mucus;
- there may not have been enough cervical cells on your slide to give an accurate assessment;
- your sample may not have been properly prepared; or
- the slide may have been broken.

Screening isn't used to investigate cervical symptoms. If you have any unusual symptoms, such as bleeding after sex or between periods, you should see your doctor as soon as possible.

What does it mean if I am called back for another screening test?

This usually means that your sample did not show up clearly, so we need to take another one. This is called an 'inadequate result'.

On the other hand, screening may have found some small changes in the cells of the cervix. If abnormal changes (known as dyskaryosis) are detected, you will have what is called an 'abnormal result'. If you have borderline or mild changes found at screening, you may be asked to come back again after six months for a repeat test. This is routine for any woman with borderline or mild changes if their screening sample hasn't been tested for HPV. Your results letter will let you know if you need to come back for another screening test.

For more information about an abnormal screening result, you can read our leaflet 'what your abnormal result means', available at www.cancerscreening.nhs.uk/cervical/publications/abnormal-result-means.html

Can anything be done about abnormal changes?

Yes. Your doctor or nurse will explain what needs to be done. They may simply ask you to come back for more cervical screening tests, because the abnormal cells may return to normal by themselves.

However, they may ask you to go to hospital for a closer examination which is called 'colposcopy'.

For more information about colposcopy, you can read our cancer screening programme leaflet 'The colposcopy examination'.

Treatment, if it is needed, is a minor procedure and is usually done in an outpatient clinic. This means you will not have to stay overnight.

Can cervical screening prevent cancer?

Yes. Regular cervical screening is the best way to detect changes to the cervix before cancer develops. Early detection and treatment can prevent cancer developing in around 75% of cases. Screening can also find cervical cancer early on, when treatment is more likely to be effective.

What happens to my screening sample once it has been looked at?

The laboratory that looks at your sample will keep it for at least 10 years. They can then compare your latest result with the ones you have had before. This is to make sure that you get any treatment you may need. They may review all screening records, including your sample, as part of our aim to offer a quality service and to help increase the expertise of specialist staff. This means that staff who work elsewhere in the health service will need to see your records.

When a review shows that you should have been cared for differently, we will contact you. We will offer you information about the review of your case if you want to know it.

For more details about the records we keep, you can contact NHS Direct on 0845 4647.

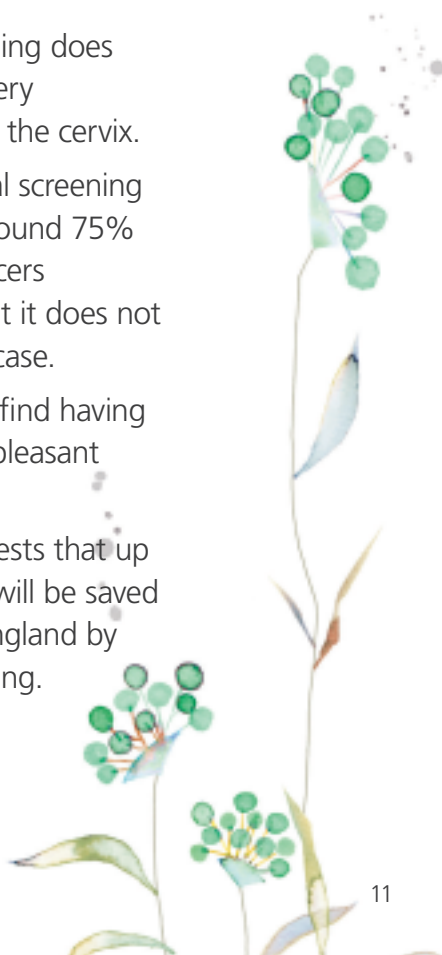
Summary

To help you decide whether or not to come for cervical screening, the main benefits and difficulties of cervical screening are explained below.

- Cervical screening reduces the risk of developing cervical cancer.
- Due to cervical screening, cervical cancer is now an uncommon disease in this country.
- Cervical cancer rates have halved since the 1980s, largely due to most women

regularly having cervical screening.

- In around one in 20 tests, the cells cannot be seen properly under the microscope and the test must be taken again.
- The test can show minor abnormalities in cervical cells which would have cleared up on their own, and women would never have known about them if they had not been for screening. It is not yet clear which minor abnormalities will develop into cancer and which will not. Many women worry when a minor abnormality is found.
- Cervical screening does not pick up every abnormality of the cervix.
- Regular cervical screening can prevent around 75% of cervical cancers developing, but it does not prevent every case.
- Some women find having the test an unpleasant experience.
- Research suggests that up to 4,500 lives will be saved each year in England by cervical screening.





More information and support

If you have any questions about the service, you can:

- Ask your GP
- Contact a local health clinic
- Visit our website at www.cancerscreening.nhs.uk; or
- Call NHS Direct on 0845 46 47, or visit www.nhs.uk

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