

Cervical screening: it's best to take the test

Updated guidance



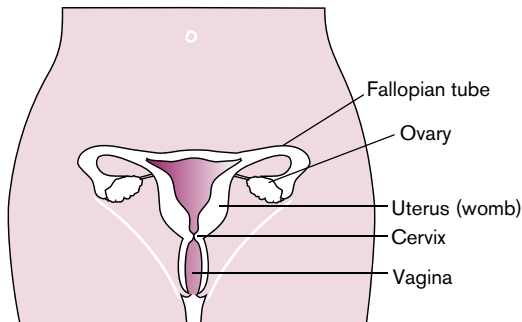
**Cervical
Screening**

This leaflet gives information about cervical screening in Northern Ireland. It will help you to understand why it is important to be screened.



What is cervical screening?

Cervical screening aims to prevent cervical cancer from developing. It's a test to check the health of the cervix, which is the lower part of the womb. It's often called a 'smear test' and involves taking a small sample of cells from the surface of the cervix.



What does the test look for?

Screening looks for abnormal changes in these cells. For most women, the test does not show any changes; however, for 1 in every 10 women it detects abnormal changes.



Why call me for screening?

You can look and feel perfectly healthy but still have changes in your cervix. Most changes will not lead to cancer, but some can develop into cancer over time if they're not treated.



What causes these changes?

Most changes are caused by the human papillomavirus (HPV). There are over 100 types of HPV. Most types are harmless but some 'high risk' types are known to cause cancer. HPV is a very common infection and most women get it at some time in their life. There are no symptoms and it usually clears up without the need for treatment. However, in some women the virus persists. This can damage the cells of the cervix and may need treatment.



How do people get HPV?

HPV is easily spread by skin-to-skin contact during sexual activity. Condoms will not completely protect you from HPV infection. As there are no symptoms, it is possible to have the infection for many years without knowing about it.



How common is cervical cancer?

Each year about 80 women in Northern Ireland are diagnosed with cervical cancer.

In Northern Ireland, 20–30 women die each year from cervical cancer.

Early detection and treatment can prevent 7 out of 10 cases of this cancer.



Who is offered screening?

In Northern Ireland, screening is offered to all women aged 25–64. This is the age group where screening is of most benefit. You will be automatically invited every three years if aged 25–49, and every five years if aged 50–64. If you haven't received your invitation, or if you have any cause for concern, you should talk to your GP.



Where do I go for screening?

Screening can be done by a doctor or nurse at your GP practice or family planning clinic. If you prefer a female to carry out the test, ask for this when you make your appointment. It's best not to have the test during your period.



I've never had sex – do I need to be screened?

Your risk of developing cervical cancer is very low as there's less risk of you having HPV. However, the virus can sometimes be passed on through sexual activity other than full intercourse. If you're unsure whether you need the test, you can talk to your doctor or nurse, or visit our website www.cancerscreening.hscni.net for more information.



What if I haven't had sex for a long time?

Changes in your cervix can take many years to develop. It is important that you are regularly screened if you've ever been sexually active.



I'm lesbian/bisexual – do I need to be screened?

Yes. As with other sexually transmitted infections, HPV spreads by intimate skin-to-skin contact. Lesbian and bisexual women can get infected with the virus and develop cervical cancer. More information is available on our website.



I've had the HPV vaccine – do I still need to be screened?

Yes. The vaccine, which is now routinely offered to girls aged 12–13 years (Year 9), protects against only two of the 'high risk' types of HPV. It doesn't protect against HPV infections you may have picked up before immunisation, or those caused by the other 'high risk' types of HPV.



What if I'm pregnant?

Screening can still be carried out when you're pregnant. If you're invited for screening and you're pregnant, ask your doctor or nurse for advice.



I'm past the menopause – do I still need to be screened?

Yes. Women in all age groups can get cervical cancer. Some women may find the test more uncomfortable after the menopause, but ask your doctor or nurse for advice on ways to reduce this.



How is the test carried out?

You will be asked to undress from the waist down and to lie on your back on a couch with your legs drawn up and your knees apart. Your lower body will be covered with a sheet. (You may prefer to wear a loose skirt that can be kept on during the test.)

An instrument called a speculum will be inserted by the doctor or nurse into your vagina to hold it open. A small soft brush will then be wiped over the cervix to pick up a sample of cells.

Screening will only take about 10 minutes. The test should not be painful but some women may find it uncomfortable. This sample is sent to a laboratory to be examined under a microscope.

You may experience some spotting afterwards but this is normal.



Is there anything I should do before screening?

Do not use lubricating or spermicidal jelly for the 24 hours before you are screened. This can make it difficult to get a clear result and the test may need to be repeated.



When and how do I get my result?

Your result should be available within four weeks. The person taking your test will tell you how and where to get your result. Make sure you have been given this information before you leave the GP practice or clinic.



What will the result tell me?

There are three possible results:

- A **normal** result showing no abnormal changes in the cells.
- An **inadequate** result arising from too few cells in the sample. This is not unusual and occurs in about 3 in every 100 tests. You will be asked to return for a repeat test in three months.
- An **abnormal** result showing abnormal changes in the cells. This is very common but doesn't mean you have cervical cancer.

If your abnormal result shows mild or borderline changes, your sample will also be tested for HPV. You will not need to submit another sample.

- If HPV is found, you will be referred for a more detailed examination of the cervix called a colposcopy.
- If HPV is not found, your risk of significant cervical disease is very low and you will not need any further follow-up at this time. You will be invited for routine screening again in three or five years' time.

If your abnormal result shows moderate or severe changes, you will need a colposcopy to assess whether or not further treatment is required.



How are abnormal changes treated?

Treatment involves removing the abnormal cells from the cervix. This is a minor procedure usually done under a local anaesthetic in an outpatient clinic.



How reliable is cervical screening?

Cervical screening prevents around 7 out of 10 cervical cancers. However, like any screening programme it is not a guarantee that you will not develop cancer. An abnormality may develop and turn into cancer before your next test is due. There is also a small chance that the test misses an abnormality.



How can I reduce my risk of developing cervical cancer?

The best way to reduce your risk of cervical cancer is to be screened regularly. You can help prevent the spread of HPV by practicing safer sex and there's also a link between cervical cancer and smoking.



What if I notice anything unusual before I'm due screening again?

You should report any symptoms such as unusual discharge or bleeding to your doctor as soon as possible. This includes bleeding after sex, between periods or after the menopause. Do not wait until your next screening appointment is due.



Where did you obtain my contact details?

Your details were obtained from your GP. It is important that your GP always has your correct name and address to make sure you receive your invitation for cervical screening.



What happens to my sample and information?

The laboratory will make a slide from your sample and keep this for 10 years. This is so we can compare your results and make sure you get any treatment you need.

The Northern Ireland cervical screening programme regularly reviews screening records to monitor and improve the quality of the programme and the expertise of specialist staff. Staff working for the programme may see and review your records. Any information relating to you will remain strictly confidential.

If you need any further information on how your records are kept and used, you can contact the Quality Assurance Reference Centre on 028 9031 1611 (see website below).

www.cancerscreening.hscni.net



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