

# Temporary changes to the Cervical Screening Programme: information for healthcare professionals

**These FAQs relate to the temporary changes to the laboratory process as part of the Cervical Screening Programme (introduced March 2023).**



## Why are patients waiting so long for cervical screening results?

A reporting backlog has developed due to the lack of staffing capacity in Cellular Pathology.



## What are the contingency arrangements for cervical screening?

Co-testing will be introduced as a temporary measure on all cervical samples sent as part of the Cervical Screening Programme. This means samples will be tested in a two-step process as follows.

Step 1. Testing for high risk types of human papillomavirus (HPV), followed by

Step 2. Cytology investigation

Step 1 will be used to prioritise those samples that are HPV-positive for cytology. However, under these arrangements, even samples that are HPV-negative will undergo cytology in due course.



## Where can I signpost my patient to information specifically about human papillomavirus?

Further information on HPV can be found here:

<https://www.nidirect.gov.uk/conditions/human-papillomavirus-hpv>



## How do the contingency arrangements reduce clinical risk?

These temporary measures will help manage the clinical risk associated with the current backlog, by identifying patients who are at higher risk of cell abnormalities. If a sample tests negative for HPV, the chances of a patient developing cervical cancer are very low. Samples which test positive for HPV will be prioritised for cytology.



## Is co-testing a safe way to check samples?

Co-testing samples by carrying out both HPV testing and cytology screening is an effective and safe screening method. It is a common approach in some countries including the USA.



## Why are both HPV and cytology testing being undertaken on all samples?

HPV infection is the cause of nearly all cases of cervical cancer, so testing for HPV is a very safe and effective form of screening. In the future, the Northern Ireland Cervical Screening Programme will be introducing Primary HPV testing (see below), which is already used in the rest of the UK. However, women in the current system gave their consent to screening on the basis that cytology investigations would be carried out. For this reason, it is important to fulfil that expectation under these temporary arrangements by investigating samples using both the HPV test and cytology.



## Will anything change in the clinical procedure for taking the cervical sample?

No. There will be no change in how the cervical sample is taken.



## When will I get the results for my patient?

Results will be available to view in the normal manner when both parts of the laboratory investigations are complete (ie the HPV test **and** cytology). This can take on average up to 12 weeks for samples that are HPV-negative. We are working to ensure that samples that are HPV-positive are prioritised and reported sooner than this.



## Is there any impact on screening intervals?

Under the temporary arrangements, there will be no change to the screening intervals. However, those women whose cervical sample tests positive for HPV, but is cytology negative, will be invited to make an appointment for screening again in 12 months' time. If these women continue to test positive for HPV on three consecutive screening appointments and are still cytology negative, they will then be referred for colposcopy.



## How can I provide assurance to my patients if I don't know their result?

When patients are attending for screening it is important to be open in regards to the anticipated times to receive reports back. Patients should be reassured that the contingency measures being put in place are designed to ensure those more likely to have any abnormal findings will be identified first and prioritised for reporting by the laboratory.



## What should I tell my patient at their cervical screening test?

We continue to encourage you to advise women that their result may take longer than usual when they attend for their screening test.



## Is there any impact on how a patient receives an invite for screening?

No. There are no changes to how a patient receives an invite for screening.



## Can women who have had the HPV vaccine still test positive for HPV in their cervical screening sample?

The HPV vaccine is effective at protecting against some types of HPV, reducing cervical cell changes (abnormal cells), and reducing some cancers including cervical cancer. However, it is still possible that screening samples can test positive for HPV in those who have been vaccinated, since the vaccine does not protect against all types of HPV.



## How long will the contingency measures last?

The contingency measures will be in place until the Cervical Screening Programme moves to Primary HPV testing.



## How do the temporary co-testing arrangements in Northern Ireland differ from Primary HPV testing?

The temporary arrangements in Northern Ireland are not the same as Primary HPV testing. The main difference is that, under the temporary arrangements, all samples will undergo both HPV testing and cytology. In Primary HPV testing, samples will only undergo cytology if they first test positive for HPV.



## Will Primary HPV testing be introduced to the Cervical Screening Programme in Northern Ireland?

The Public Health Agency is currently leading on an implementation process for the introduction of Primary HPV testing to the Cervical Screening Programme in Northern Ireland. This requires significant preparations to be made across all elements of the screening pathway before it can be introduced safely. A definitive date for introducing Primary HPV testing as part of the Cervical Screening Programme in Northern Ireland has not yet been set.



## Website resources

- PHA webpage on cervical screening:  
<https://www.publichealth.hscni.net/directorate-public-health/service-development-and-screening/cervical-cancer-screening>
- nidirect article on cervical screening:  
<https://www.nidirect.gov.uk/articles/cervical-screening>
- Online FAQs for patients:  
<https://www.publichealth.hscni.net/publications/temporary-changes-cervical-screening-programme-frequently-asked-questions>
- New HPV page on nidirect:  
<https://www.nidirect.gov.uk/conditions/human-papillomavirus-hpv>



## Interpretation of results

HPV result	Cytology result	Action
Negative	Negative	Routine recall
Positive	Negative	Recall in 12 months.  If these women continue to test positive for HPV on three consecutive screening appointments and are still cytology negative, they will then be referred for colposcopy.
Positive	Positive	Colposcopy referral
Negative	Borderline or mild dyskaryosis	Routine recall
Negative	Moderate dyskaryosis Severe dyskaryosis Severe dyskaryosis ? invasive Glandular dyskaryosis (endocervical)	Colposcopy referral

Additional information provided by Jo's Cervical Cancer Trust.