



HPV CERVICAL SCREENING NEWSLETTER

April 2021

Stop in the name of the screening

We are currently processing high volumes of screening tests, with around 7,000 samples per week being received from primary care. Whilst we have increased our testing capacity, we ask **that you do not put on additional screening clinics at this time.** You can help us help your patients by maintaining normal screening levels.



In order to match the volume of sample-taking in the community to capacity across the screening pathway, we ask all sample-takers to maintain their regular screening clinics only at this time. Additional screening clinics increase turnaround times and put pressure on laboratory consumables, which are in demand worldwide during COVID-19. Additional clinics will delay results being returned to participants and delay necessary follow-up care at colposcopy. Please be advised that patients can now expect their result letters **6 to 8 weeks** after their test is taken. Thank you for continuing to work with us to ensure your patients get the care they require in a timely manner.

Thank you for all your hard work and commitment in returning screening to normal levels.

Around 40,000 (month expected volume was 24,000) people presented for cervical screening in March. This is an extraordinary response at a time when we know our community clinics have so many other demands on their time. The figures are the highest reported since October 2018. Dr. Nóirín Russell, Clinical Director of CervicalCheck said: "It's reassuring that women still have confidence and believe that cervical screening is worthwhile." "Women have chosen to really clearly make screening a priority for themselves," Participants took to social media to share and encourage each other to attend for cervical screening tests, and posting lists of clinics offering screening tests during Level 5 COVID-19 restrictions.

Speculum delays

The broad sized Comfispec Speculum is temporarily out of stock at Williams Medical Supplies. An alternative brand of speculum, Pelispec, is being supplied instead for the next 4 to 6 weeks while the supplies are being restored.

Please Note: This issue affects the board sized speculum only - all other sizes in the Comfispec range are in stock with no issue.

Williams Medical SuppliesTel:01 5133 222E mail:sales@williamsmedical.ieFax:01 485 1132Website:www.WilliamsMedical.ieIf you experience any issues with orders being filled, please contactCervicalCheck at admin@cervicalcheck.ie



Update on colposcopy

Please be assured colposcopy clinics are continuing to work at capacity to see women referred for treatment in 2021.

During the three-month pause in screening in primary care, arising from COVID-19 restrictions, colposcopy units continued to work through and reduce waiting lists as hospital resources allowed. When screening resumed, most colposcopy waiting lists had been cleared.

COVID-19 has affected capacity in colposcopy units. All of the procedures put in place to protect patients and staff from COVID-19; including COVID-19 triage, increased decontamination after each patient, and extended time between appointments to ensure social distancing in waiting rooms, have impacted on the numbers of women seen per clinic.

Expected waiting times for further investigation will vary appointments for those women whose sample is categorised as; urgent - to be seen in 2, 4, weeks for high grade changes and 8 weeks for low grade. Your patient's appointment date will depend on their sample category.

Making a colposcopy referral

If a person needs to attend colposcopy, we will recommend the colposcopy service that you should refer them to.

There are 15 colposcopy clinics in Ireland that CervicalCheck use. All are in hospital out-patient departments.

When completing the Colposcopy Referral Form, please use the updated version (Revision 11). Please note that referrals sent with an old referral form will be rejected and returned to your practice.

You must attach a copy of the screening result with the referral form. Referral forms should be fully completed and include the following where relevant;

- If pregnant
- Any serious medical conditions including immunosuppression

If you have any questions you can contact the Freephone information line on 1800 45 45 55 or email colpcoordinator@cervicalcheck.ie

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Coombe Colposcopy Service	Tel: 01 4085		la Colposcopy Service	Tel: 01 8176841	
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Patient Deta	ails		Referring General Pra	ctitioner Details	
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Please attach copy of the Cervical Screening Te	st report with this ref	erral.			
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			Past Surgical History:		
Previous Colposcopy: Yes No Where:			Medications:		
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Did you know that it is best practice to take a screening sample **before** removing a coil or taking a swab?

Colposcop<mark>y Referral Form</mark> (Revision <mark>11)</mark>

Expired vials

Expired vials continue to be submitted to our labs, where they cannot be processed. In March 2021, over 275 expired vials were returned to practices. This means the sample was

sent in an out-of-date vial and the test could not be processed. As a result, the participant must have a repeat screening test after the minimum three-month waiting period.

Sampletakers undertaking cervical screening must ensure that the sample vials used do not expire before reaching the laboratory or before being processed. **Please note that practices will have vials with an expiry date of 13 June 2021. Please use these first.**

Remember:

- To dispose of out-of-date sample vials. Any sample taken in out-of-date vials cannot be processed. This is because the laboratory cannot guarantee results from an expired vial.
- To dispatch screening test samples at least once a week. The vial must be within 2 weeks of expiry date when received by the laboratory.
- No payment is made for screening tests that are in expired vials.
- Check and rotate your stock. Test kits that are received first should be used first (FIFO First In First Out). Newly received test kits should be stocked behind older supplies, so the older stock is used first.

LGBT+ study results

418 people completed the survey which ran for six weeks between February 08 and March 12 2021. Of the 418 respondents, 88.9% stated that their nationality was Irish with a range of other nationalities from across the world making up the balance. In terms of identity, 59% identified as lesbian, 27% as bisexual and the remaining 14% identified as non-binary, trans, pansexual, queer, other. The majority of people who responded to the survey were aged 25-35 (48%) followed by age 36-45 (24%).

Identity

Over 66.5% (two thirds) attend screening every time they are invited. The national average for our target population is 80%. Over 10% had their test more than five years ago, over 10% were never invited and over 6% were invited but did not attend. This 26% represents 106 people.

Did you know the commonest cause of intermenstrual bleeding in a young woman is an STI, most usually chlamydia?



LINC Advocating for Lesbian and Bisexual Women in Ireland



Barriers

When asked about the barriers for attending screening the following were identified as the top four barriers:

- Assumption that I am heterosexual (42.5%)
- Being asked heterosexual questions (41.5%) •
- Fear of the test procedure (39.3%) •
- Embarrassment (27.6%) •



What are the barriers for you in attending

What would encourage respondents to attend screening? The top five priorities are:

- LGBT Friendly Practice (59.5%)
- Being able to book an appointment online (58.7%)
- Being sent a reminder by text (47.6%)
- Specialist LGBT+ Clinic (42.9%)
- More flexible GP surgery opening hours (41.8%)

Over 85% will definitely or probably attend their next cervical screening test, and over 90% would recommend screening to a friend/relative.



Will you attend for your next cervical screening test?

Move to healthpromotion.ie

You will soon be able to order your CervicalCheck materials from our new distributor healthpromotion.ie

HealthPromotion.ie

Keep an eye on our website for updates on the go-live date, how to register and how to order resources for your surgery or clinic.

Frequently asked questions

If you have completed our e-learning module on HPV cervical screening and have further questions, you might want to read our FAQ document which is available on NSS Resources <u>here</u>.

What happens if you have HPV and then clear it before you are tested?

HPV is a common viral infection usually spread by skin to skin contact during sexual activity. Any person who has ever engaged in sexual activity is likely to have been exposed to HPV. There are over 100 different types of HPV. Most do not cause changes to the cells of the cervix. Some HPV types (particularly types 16 and 18) can cause cell changes in the cervix (neck of the womb). A person can develop symptoms years after they have had skin-to-skin genital contact with someone who has the virus. This makes it hard to know when they first came in contact with the virus.

When HPV is acquired the body starts to react by developing an immune response, as it does with any infection. With HPV infection this process takes two years or more. The test used only tests for current infections.

However, if someone acquires HPV and their body cannot fully eliminate it, it has the potential to change cells in the cervix which can progress to cancer. However, this process only continues while HPV is still present. If a person does develop some abnormal cells, this is because the HPV will still be present. If that same person clears the HPV infection, in most people the cervical cells return to normal. It is rare for precancerous cells to persist or progress in the absence of HPV.

It should be remembered that the presence of HPV does not automatically mean there are abnormal cells. There are other risk factors for the development of precancer e.g. smoking, starting sexual intercourse at a very young age, and having a compromised immune system.

Please be reassured that once the body clears the HPV infection their risk returns to normal.

What about the cancers HPV screening won't detect

Screening is the process of identifying healthy people who may have an increased chance of having a disease or condition, enabling effective treatment.

Cervical screening is a choice and women are offered information to help them decide if they wish to accept the offer of screening.

Cervical screening aims to prevent the most common form of cervical cancer – squamous cell cancer – and 99% of those cancers are caused by HPV. This means that if you don't have HPV detected in your sample, it is extremely unlikely you have any cell changes that need treatment.

We know that the cervical screening test simply cannot find some forms of cancer depending on the type of cancer or its location. Both cytology and HPV screening are directed at preventing squamous cell cancer. A significant number of cervical cancers are glandular cancers, and while over 85% of them are also caused by HPV, around 15% aren't. These cancers were difficult to detect with cytology (smear test) and are also difficult to detect with HPV. However, more of these cancers will be picked up with HPV screening than with cytology.

Contact us

CervicalCheck

Primary Care Coordinator

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