Guidance Note 7

HPV testing in Colposcopy

Women are being offered combined smear and HPV tests in CervicalCheck colposcopy clinics. Testing for high risk HPV infections should facilitate earlier discharge for women at low risk and better select women who should have treatment.

Scenario 1 – Women Post Treatment for CIN

Historically, women who were post treatment had more intensive screening with annual cytology for up to 10 years. The incorporation of testing for high risk HPV genotypes in addition to cytology has reduced the need for increased surveillance for women considered at low risk of recurrence.

Women are offered a combined smear and HPV test (in colposcopy) at 6 months post treatment.

After 6 months, if high risk HPV is detected or the smear test shows LSIL or more, these women will have a repeat colposcopy and treatment if required.

After 6 months, if high risk HPV is not detected and the cytology is either normal or ASCUS, the woman is discharged from the colposcopy clinic with a recommendation for a repeat smear in 12 months’ time. If this repeat smear in 12 months is reported as NAD or ASCUS/LSIL with HPV triage negative, the woman may return to routine recall. All other results will require re referral to colposcopy.

Scenario 2 – Women referred with persistent and/or HPV positive Low Grade Abnormalities

Historically women with persistent low grade abnormalities were managed with six monthly cytology and/or colposcopy. The incorporation of testing for high risk HPV genotypes in addition to cytology has allowed those women at low risk of CIN to return to routine recall while facilitating early referral to colposcopy for those women who are HPV positive.

Following the initial colposcopy (+/- biopsy), women with no CIN on colposcopy or biopsy (if biopsy taken) are discharged to routine recall in three years.

Women with CIN 1 who do not require treatment are offered a combined smear and HPV test after 12 months (in colposcopy). If high risk HPV is not detected and cytology is either normal, ASCUS or LSIL, the woman is discharged to routine recall in three years. If high risk HPV is detected, or the smear test shows HSIL or more, these women will have a repeat colposcopy and treatment if required.

Women with CIN who require treatment will be offered HPV testing post treatment as detailed in scenario 1.

References:

- European Guidelines for Quality Assurance in Cervical Screening
- NCSS CervicalCheck - Guidelines for Quality Assurance in Cervical Screening

Please Note – Do not take smear tests on women attending colposcopy, as this may affect their management within the programme.