



Australian Government

NATIONAL
CERVICAL SCREENING
PROGRAM

A joint Australian, State and Territory Government Program



A guide to understanding your
Cervical Screening Test results

Introduction



This booklet provides you with information to help you better understand your Cervical Screening Test results.

Your healthcare provider will discuss your results and the next steps with you.

It is important that if you experience symptoms at any time, such as abnormal vaginal bleeding, pain or discharge, you should see your healthcare provider immediately.



What does the Cervical Screening Test detect?

Cervical screening involves collecting a sample from your vagina or cervix which is then tested to see if you are at risk for developing cervical cancer. The risk for developing cervical cancer is related to a common infection, the human papillomavirus (HPV).

HPV is so common that most people have it at some point in their lives and never know it because there are usually no symptoms. Most HPV infections are naturally cleared by our immune systems within 1 or 2 years without causing problems. If the body does not clear HPV, it can cause abnormal cervical cell changes. Pre-cancerous abnormal cell changes can be treated. If left undetected and/or untreated, these changes can develop into cervical cancer.

It usually takes about 10 to 15 years for cervical cancer to develop after an HPV infection and not everyone who contracts HPV will develop cervical cancer.

What does my result mean?

Your healthcare provider will talk to you about your Cervical Screening Test results. Based on your results, your healthcare provider may recommend that you:

- return to screen in 5 years
- return for another sample collected by your healthcare provider
- repeat the test in 12 months
- repeat the Cervical Screening Test due to unsatisfactory test result
- are referred to a specialist.

Return to screen in 5 years

This means that your screening results show you do not have an HPV infection. Your next screening will be in 5 years. The National Cancer Screening Register will send you a reminder.

Return for another sample collected by your healthcare provider

This means that you have provided a self-collect sample and your screening results show you have an HPV infection. When there is an HPV infection, it is important to check if the infection has caused changes to the cervical cells. As a self-collect sample does not have cervical cells to check for cell changes, you are asked to return to your healthcare provider who will collect a sample that will include cervical cells.

Repeat the test in 12 months

This means that your screening results show you have an HPV infection that is

likely to be cleared by your body within the next 12 months.

You are asked to have a repeat test in 12 months to check that the infection has gone and you are safe to return to screening every 5 years.

If the repeat test in 12 months shows the HPV infection has not gone, you may be asked to return for a second repeat test in another 12 months, or you may need referral to a specialist.

Repeat the Cervical Screening Test due to unsatisfactory test result

An unsatisfactory test result happens when your sample cannot be checked properly by the laboratory. An unsatisfactory test result does not mean there is something wrong. If you have an unsatisfactory test result it is important to repeat the test in 6-12 weeks.





What happens if I'm referred to a specialist?

Referral to a specialist

This means that your screening results show you have a type of HPV infection that needs further investigation by a specialist.

This does not mean you have developed cancer.

You will be referred to a specialist for a follow-up test, known as a colposcopy (see “What is colposcopy” for more information).

Please make sure you follow the instructions from your healthcare provider if you are referred to a specialist.

Here is some information that explains some of the procedures and treatments.

What is a colposcopy?

A colposcopy is an examination of your cervix. It is usually performed by a gynaecologist. At the colposcopy

appointment, you will be asked to lie on an examination bed. The specialist will insert a speculum into your vagina and put a small amount of liquid on to your cervix to highlight any abnormal areas. The specialist will use a colposcope (like a pair of binoculars on a stand) to carefully examine the cervix and vagina. The colposcope does not enter the body. This examination takes 10-15 minutes. It should not be painful, however, you may feel discomfort from having the speculum inside your vagina.

Let the staff know if you are pregnant or think you might be pregnant. You can still have a colposcopy when you are pregnant, but the staff need to know.

After your colposcopy, you can return to your usual life immediately. You can drive yourself home or catch public transport and work as normal.



Cervical Screening aims to prevent cervical cancer. Talk to your healthcare provider if you are anxious or worried about your result.



What is a biopsy?

If areas of your cervix appear abnormal during the colposcopy, a sample of tissue (a biopsy) may be taken. A biopsy does not need anaesthetic; some people don't feel it and some feel a pinch or discomfort. This sample will be sent to a laboratory for testing.

You will be sent your results in about 2 weeks' time. If you don't, you can follow up with your healthcare provider.

After your biopsy, you might feel some mild period-type pain or cramping, but this should only last a few hours. You might have a small amount of bleeding from your vagina that may be darker than usual. Any bleeding should stop after a few days. To reduce the risk of infection, you should not have sex, use tampons, swim, or take a bath or spa for a few days after a biopsy. Showering is fine. Contact your doctor if you have heavy bleeding, fever, or a smelly vaginal discharge.

It is normal to have some vaginal discharge or spotting for a few hours afterwards, so it is a good idea to take a thin sanitary pad or panty liner to the appointment.

Treatment for abnormalities

If an abnormality which could develop into cancer is found during your colposcopy, treatment of the cervix may be required. Your healthcare provider will talk to you about the best treatment options for you. These could include:

Loop excision

During this procedure, the abnormal cells are removed from your cervix using a wire loop. Most women have the procedure with a local anaesthetic, however, some need a general anaesthetic. If a general anaesthetic is advised, a same day hospital admission may be necessary. This procedure takes 15-30 minutes.

Laser

Laser treatment uses a laser beam to destroy the abnormal cells. The procedure takes 15–30 minutes. Most women have the procedure with a local anaesthetic, however, some need a general anaesthetic. Like the loop excision, if a general anaesthetic is advised or preferred, a same day hospital admission may be necessary.

Cone biopsy

In this minor operation, a cone-shaped section of the cervix, which contains the abnormal cells, is removed. A general anaesthetic is normally needed, and a day or overnight hospital stay for recovery may also be required.

This operation is recommended when the abnormal cells are higher in the cervical

canal and/or affect the glandular cells. Glandular cells appear higher up in the cervical canal.

Note: After any form of treatment for abnormalities you should not swim, use tampons or have vaginal intercourse for 3 to 4 weeks until the cervix has healed. Strenuous exercise should be avoided for 7 to 10 days as this increases the risk of bleeding and infection.

Abnormalities can usually be treated easily and successfully if detected early. If untreated there is a greater chance of developing cervical cancer.





Frequently asked questions

How did I get HPV?

The human papillomavirus (HPV) is spread by genital-skin to skin contact during sexual activity. You can be exposed to HPV the first time you have sexual activity, and from only one sexual partner.

Most people will have the HPV infection at some point in their lives, but the body usually clears the virus. The virus is so common it could be considered a normal part of being sexually active.

Condoms may provide some protection from HPV, but condoms do not cover all the genital skin.

Will treatment affect my chances of becoming pregnant?

Treatment such as a laser, cone biopsy or loop excision may weaken the cervix. While it is still possible to become pregnant, a

weakened cervix may need a stitch inserted to strengthen it and reduce the risk of miscarriage. It is important to notify your healthcare provider of any treatment you have had to your cervix in the past.

Can Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) people also get the virus?

Yes, anyone who engages in genital skin to skin contact with a person of any gender can get the HPV virus.

Do I need to avoid having sex if I have HPV?

No. HPV is very common and there is no way of knowing if your partner currently has, or has had in the past, this type of virus as most of the time the body is able to clear the virus.

Should I tell my partner I have HPV?

HPV can remain inactive for a long time. For most people it is impossible to know when or from whom they got an HPV infection.

HPV also can cause genital warts and, more rarely, other cancers such as anal, vaginal, vulva, penile and oropharyngeal (throat) cancer. If you have HPV, you may choose to discuss this with your partner. Talking with your partner about your Cervical Screening Test results is completely your decision.

If you are worried about passing HPV onto your partner, talk to your healthcare provider for further advice.

How is HPV treated?

While there is no treatment for HPV, the immune system clears HPV from the body naturally over time and has no long-lasting effects. Most people with HPV have no symptoms and will never know they have it. Treatment is available for people with cervical cell changes. You should follow all recommendations given to you by your healthcare provider following your Cervical Screening Test.

Can I be reinfected with HPV?

There are different types of HPV. Once you have been exposed to one type of HPV, you are unlikely to be infected again with the same virus, as the body usually becomes immune to that type. However, the virus may remain inactive in your body and many years later may become active again.

Even if you are no longer sexually active, or only have one sexual partner, you should

continue having regular Cervical Screening Tests.

I have had the HPV vaccine. Can I still get an HPV infection?

Yes. Even if you have had the HPV vaccine you can still get an HPV infection and should have regular Cervical Screening Tests. There are many types of HPV and the HPV vaccine does not protect you against all of them. The HPV vaccine also does not protect against HPV infections you have already been exposed to.

Should I have the HPV vaccine?

The HPV vaccine works best if it is given before exposure to HPV, before you are sexually active. If you have already been exposed to HPV, the benefits of the vaccine may be reduced.

In Australia, the HPV vaccine is given to adolescents through the school-based immunisation program and is approved for use in females aged 9–45 and in males aged 9–26. Talk to your healthcare provider about the individual benefits to you. The vaccine can be purchased outside of the funded school program; you might be charged extra consultation fees by your healthcare provider.

The vaccine is safe and protects against seven high-risk HPV types which cause 90% of cervical cancer and other HPV-related cancers. Two of these high-risk HPV types (types 16 and 18) cause around 70% of cervical cancers, as well as some anal, vaginal, vulva, penile and oropharyngeal, cancers. It also protects against two non-cancer causing HPV types that cause up to 90% of genital warts.

Even if you are no longer sexually active, or only have one sexual partner, you should continue having regular Cervical Screening Tests.





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Where can I get more information?

If English is not your first language and you need help, please call the Translating and Interpreting Service on **13 14 50**. It will cost the same as a local phone call.

National Cervical Screening Program

If you would like to find out more about cervical screening and understand how the program works in Australia, please go to the National Cervical Screening Program website **www.health.gov.au/NCSP** or call **1800 627 701**.

The National Cervical Screening Program is a joint Australian, State and Territory Government Program.

National Cancer Screening Register

The National Cancer Screening Register supports the National Cervical Screening Program by sending invitation and reminder letters to participants who are due for cervical screening and other follow-up tests. You can update your contact details and look up when your next Cervical Screening Test is due, online through the Participant Portal via MyGov at my.gov.au and linking your account to the Register or by calling the Register on **1800 627 701**.

Australian Immunisation Register

Human papillomavirus (HPV) vaccinations are recorded on the Australian Immunisation Register (AIR).

Any immunisations on your AIR record will display on your immunisation history statement.

You can access your immunisation history statement:

- online, by setting up your own myGov account at my.gov.au and then accessing your Medicare online account
- through the Express Plus Medicare mobile app
- by calling the AIR enquiries line on 1800 653 809 (8am-5pm, Monday to Friday AEST) and asking them to send it to you. Please allow up to 14 days to receive your statement in the post
- by asking your doctor or vaccination provider to print a copy for you.