

CERVICAL SCREENING

Cervical Screening Test (CST)

Routine cervical screening plays a vital role in preventing cervical cancer by enabling early detection of the Human Papillomavirus (HPV).

QUICK FACTS

Common name:

Cervical screening test (CST), previously called pap smear or pap test.

Who?

Women and people with a cervix between ages 25–74.

How?

May involve a speculum examination with a clinician, or a self-collected swab.

Self-collected swab:

Most people are eligible: ask your healthcare provider.

Will the test tell me if I have cancer?

No. It is checking for the presence of the human papilloma virus (HPV) only.

How often should you have a CST?

If your results come back as low risk, then every 5 years.

The HPV vaccine:

Free for people aged 9 - 25 years.

Given at school, or by your healthcare provider.

STIs:

A test for sexually transmitted infections (STIs) can be collected at the same time as a CST.

Cost:

No cost for the test if you hold a Medicare card. Consultation/appointment fees may apply.

Where to get it:

Available at True clinics and GP clinics.



Cervical screening test (CST) is a simple procedure that detects the human papillomavirus (HPV). Over time HPV may cause cells in the cervix to change and these changes can sometimes progress to cervical cancer. If these changes are picked up early, cervical cancer can be prevented. If you are 25 to 74 years old, have a cervix and have ever been sexually active, then it is recommended that you have a CST. This is the best way to protect yourself against cervical cancer.

What is HPV?

The Human Papillomavirus or HPV is a common virus with more than 100 different types identified to date. There are 14 types of anogenital HPV that are considered significant because they can lead to the development of cancer. These are known as oncogenic HPV types.

Anogenital HPV is spread through skin-to-skin contact in the genital area, and transmission can occur between people of any gender and any age. HPV types 16 and 18 are responsible for the majority of cervical cancer cases and are considered high-risk. In contrast, HPV types 6 and 11 are low-risk and do not cause cancer—but they are the most common cause of genital warts.

How do I get a cervical screening test?

See your GP, Nurse Practitioner or credentialed nurse who can arrange for you to have this screening test done. If you have no symptoms of cervical cancer, then there are two ways this can be done. A clinician can collect the sample for you. This procedure involves a speculum exam and the collection of cells from your cervix with a soft swab called a broom or brush. This sample is then sent off to a pathology centre for analysis.

The other way to get a CST is a self-collection sample. You will still need to see your healthcare provider for this. Self-collection means you collect your own vaginal sample using a swab, which is then sent off for further testing.

Self-collection

Anyone between the ages of 25–74 is eligible for self-collection provided there are no signs or symptoms of cervical cancer. This includes unexplained bleeding in-between periods, bleeding after sexual intercourse, bleeding after menopause, deep pain with sexual intercourse or unusual persistent vaginal discharge.

What will happen if HPV is detected?

For most people, the body's immune system clears the HPV infection within 1-2 years all by itself. For a small number of people, the HPV persists and can cause cell changes.

Your CST result reports HPV as HPV 16, HPV 18 or HPV not 16/18 ("HPV other"). If HPV is detected, an additional test called Liquid Based Cytology (LBC) is done to look for cell changes to the cervix. In cases where a clinician collected sample was performed, the same sample is used, and an additional sample is not required.

For self-collected CSTs that detect HPV other, you will be invited back for a speculum examination to collect an LBC test. If the self-collected CST detects HPV 16 or 18 you will be referred to a specialist for colposcopy.

The combined test results (HPV and LBC) will determine whether further tests are required and the timing for your next CST. You will be advised of your CST result and what you need to do next by your healthcare team.

Understanding your CST results

Your result will fall into one of three categories:

1. LOW RISK

What it means: No HPV detected.

Next steps: You'll be recommended to have your next CST in 5 years.



2. INTERMEDIATE RISK

What it means: HPV was detected but not type 16 or 18.

Your LBC shows either no changes or minor changes to the cells of your cervix.

Next steps: Your result will be explained with instructions on when to have your next CST.

3. HIGH RISK

What it means: HPV type 16 or 18 was detected, and/or abnormal changes to the cells of your cervix.

Next steps: You'll be referred to a specialist for further assessment which may include a colposcopy.

What does an Unsatisfactory CST result mean?

An unsatisfactory CST result means that the laboratory could not process the sample to provide a report. In this case you will be asked to return to the Clinic and have a repeat test in 6–12 weeks. There may be several reasons why this occurs, including an inadequate sample or technical difficulty for the laboratory reading the sample.

Do I need to tell my partner I have HPV?

HPV is not considered a sexually transmissible infection, and it is not a notifiable infection like chlamydia or gonorrhoea.

You may wish to discuss your CST result with a partner as they can provide you with ongoing support through any further assessments you may need. It is not, however, a legal requirement to inform any of your sexual partners and partners do not need any testing done.

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What is Colposcopy?

A colposcopy is a minor procedure involving a special microscope to allow close examination of the cervix, vagina, and vulva for any abnormal changes. It is usually recommended if your cervical screening test shows abnormal results or if you have certain symptoms.

During the procedure:

- a speculum is gently inserted into the vagina to allow the cervix to be seen
- a colposcope—a special magnifying instrument with a light is used to get a detailed view of the cervix (this always remains outside the body).
- the health practitioner looks through the colposcope to carefully examine the cells of the cervix.
- in some cases, a mild solution may be applied to highlight any abnormal areas, and a small tissue sample (biopsy) may be taken for further testing.

The procedure is usually quick and done in a clinic. You may feel some discomfort. Some people experience pain.

Light bleeding and vaginal discharge is common after cervical biopsies. Your healthcare practitioner may advise you to avoid inserting anything into the vagina for 48 hours after a colposcopy.

What can I do to protect myself from cervical cancer?

The best way to protect yourself from cervical cancer is to have a CST when it is due. Smoking increases your risk of developing cervical cancer, as well as many other serious health conditions. It is recommended that you avoid or stop smoking all together.

If you develop bleeding in between periods, after sexual intercourse, after menopause or suffer from deep pelvic pain after sexual intercourse or have persistent unusual vaginal discharge then see your GP or Nurse Practitioner as you may need a CST sooner than the recommended screening schedule.

Can I still get HPV if I have had the vaccine?

The current HPV vaccine is a once off injection that is offered to everyone aged 12–13 for free as part of the national school immunisation program. If you miss this, you are still eligible for a free vaccine up until you turn 26 years of age.

The vaccine provides protection against nine oncogenic (cancer causing) HPV types including types 16 and 18. The vaccine also provides protection against HPV types 6 and 11 which cause genital warts.

Having the HPV vaccine greatly reduces the risk of developing cervical cancer but it does not remove the risk completely.

Therefore, it is still recommended to attend cervical screening regularly.

If you have any questions about the HPV vaccine you can ask your healthcare provider. More information regarding the HPV vaccine can be found on the Cancer Council's HPV vaccine website: <https://www.hpvvaccine.org.au/hpv-vaccine>

For more information
visit: true.org.au

