



Cancer Screening Programmes

Cervical screening
THE FACTS

CANCER RESEARCH UK



What is cervical screening?

- Cervical screening is not a test for diagnosing cervical cancer. It is a test to check the health of the cervix, which is the lower part of the womb (often called the neck of the womb).
- For many women the test results show that everything is fine.
- But for one in 10 women, the test shows changes in the cells that can be caused by many things.
- Most of these changes will not lead to cervical cancer.

Why do I need cervical screening?

Cervical cancer can often be prevented. The signs that it may develop can be spotted early on so it can be stopped before it even gets started.

Cervical screening saves over 1000 lives in the UK each year, but unfortunately about 1500 women die from cervical cancer in the UK every year.

Should all women have the test?

We offer the test to all women aged between 25 and 64 but cervical cancer is more common if you:

- first had sex at an early age;
- smoke;
- do not use condoms;
- have had several sexual partners or have had a sexual partner who has had several other partners; or
- take immunosuppressant drugs (for example, after an organ transplant).

If you have passed the menopause, you still need to be tested to check that your cervix is healthy. Ask your doctor for advice if you:

- have had a hysterectomy;
- are over 65;
- have never had sex with a man; or
- you are not sure whether you still need to be tested.

What is the NHS Cervical Screening Programme?

The programme makes sure that if you are aged between 25 and 64, you will automatically receive an invitation. We will get your name from your doctor's list. This means it is important that your doctor always has your correct name and address.

After your first cervical screen, you will receive invitations every three to five years.

Who will carry out my test?

A doctor or nurse will do your test. If you would prefer a female member of staff or would like someone with you, please ask when you make your appointment.

Will I have to undress?

We will ask you to undress from the waist down, but if you wear a full skirt you will not have to remove it.

What happens during the test?

The doctor or nurse will ask you to lie down on a couch. They will then gently put a small instrument, called a speculum, into your vagina to hold it open.

Then, they will wipe a smooth wooden or plastic spatula over the cervix to pick up a few of the cells.

They will transfer these cells to a slide and send it away to be examined under a microscope.

The test takes just a few minutes.

Does the test hurt?

You might experience some discomfort or pain – try to relax by taking slow, deep breaths as it may hurt more if you are tense. If it is painful, tell the doctor or nurse straightaway as they may be able to reduce your discomfort.

Is there anything I should do before the test?

You cannot be tested during your period so make sure you get an appointment before or after your period is due.

Can I have sex before the test?

If you use a spermicide, a barrier method of contraception or a lubricant jelly, you should not use these for 24 hours before the test as the chemicals they contain may affect the test.

When do I get my results?

When you have the test, the doctor or nurse will tell you how, where and approximately when you will get your results. Make sure you have received this information before you leave the surgery or clinic.

How reliable is cervical screening?

Early detection and treatment can prevent around 75% of cancers developing but, like other screening tests, it is not perfect. It may not always detect early cell changes that may lead to cancer. Abnormal cells on your slide may not be recognised because:

- sometimes they do not look much different from normal cells;
- there may be very few abnormal cells on the slide; or

- the person reading your slide may miss the abnormality (this happens occasionally, no matter how experienced the reader is).

About one in 10 tests have to be taken again because:

- you may have an infection which needs treating before a clear slide can be made;
- the cervical cells on your slide may have been hidden by blood or mucus;
- there may not have been enough cervical cells on your slide to give an accurate assessment;
- your sample may not have been properly prepared; or
- your slide may have been broken.

If you have any unusual symptoms, such as bleeding after sex or between periods, you should see your doctor.

What does it mean if I am called back?

Only very rarely does it mean that you have cancer. It might simply mean that your sample did not show up clearly and that we need to take another test. This is called an 'unsatisfactory result'.

On the other hand, your result could identify some small changes in the cells of the cervix. If abnormal changes (known as dyskaryosis) are detected, you will have what is called an 'abnormal result'. This is not cancer. However, sometimes cancer will be found when an abnormal test is investigated further.

For more information about what an abnormal result means, you can read our cancer screening programme leaflet 'What your abnormal result means'.

Can anything be done about abnormal changes?

Yes. Your doctor or nurse will explain what needs to be done. They may ask you to come back for more cervical screening tests because the abnormal cells may return to normal by themselves. However, they may ask you to go to hospital for a closer examination which is called 'colposcopy'.

For more information about colposcopy, you can read our cancer screening programme leaflet 'The colposcopy examination'.

Treatment, if it is needed, is a minor procedure and is usually done in an outpatient clinic which means you will not have to stay overnight.

Can cervical screening prevent cancer?

Regular cervical screening is the best way to detect changes to the cervix early. Early detection and treatment can prevent cancer developing in around 75% of cases.

What happens to my sample once it has been looked at?

The laboratory that looks at your sample will keep it for at least 10 years. They can then compare your latest result with the ones you have had before. This is to make sure that you get any treatment you may need. They may review all screening records, including your sample, as part of our aim to offer a quality service and to help increase the expertise of specialist staff. This means that staff who work elsewhere in the health service will need to see your records.

When a review shows that you should have been cared for differently, we will contact you. We will offer you information about the review of your case if you want to know it.

For more details about the records we keep, you can contact NHS Direct on 0845 4647.

Summary

To help you decide whether or not to come for cervical screening, the main benefits and difficulties of cervical screening are explained below.

- Cervical screening reduces the risk of developing cervical cancer.

- Due to cervical screening, cervical cancer is now an uncommon disease in this country.
- Cervical cancer rates have halved since the 1980s, largely due to most women regularly having cervical screening.
- Cervical screening by the NHS saves over 1000 lives each year.
- In one in 10 tests, the cells cannot be seen properly under the microscope and the test must be taken again.
- The test can show minor abnormalities in cervical cells which would have cleared up on their own and women would never have known about them if they had not been for screening. It is not yet clear which minor abnormalities would develop into cancer and which would not. Many women worry when a minor abnormality is found.
- Cervical screening does not pick up every abnormality of the cervix.
- Regular cervical screening can prevent around 75% of cervical cancers developing, but it does not prevent every case.
- Some women find having the test an unpleasant experience.

More information and support

If you have any questions about the service:

- ask your doctor;
- contact your local health clinic;
- visit our cancer screening website at:
www.cancerscreening.nhs.uk; or
- visit NHS Direct at
www.nhsdirect.nhs.uk

Published by the Department of Health in association with NHS Cancer Screening Programmes, with advice and support from the Cancer Research UK Primary Care Education Research Group.



© Crown copyright 2002

Produced by COI for the Department of Health
28016 5p 3957k Mar05 (GRA) 267717
CHLORINE FREE PAPER

The text of this document may be reproduced without formal permission or charge for personal or in-house use.

If you require further copies of this publication quote
28067/Cervical Screening and contact:

DH Publications Orderline
PO Box 777
London SE1 6XH
Tel: 08701 555 455
Fax: 01623 724524
E-mail: dh@prolog.uk.com

 08700 102870 Textphone (for minicom users) for the hard of hearing 8am to 6pm Monday to Friday.

28067/Cervical Screening can also be made available on request in braille, on audio cassette tape, on disk and in large print. Language versions are available at:
www.cancerscreening.nhs.uk/cervical/publications/in-04.html