

HPV testing in screening program saves 3,500 women from unnecessary tests

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Testing for the human papillomavirus (HPV) as part of cervical screening reduces the number of women unnecessarily going on for further tests by over a third, new research shows today.

The results are from the first evaluation, led by The Institute of Cancer Research, of the ‘Sentinel sites’ project to make HPV tests available to [women](#) as part of [cervical screening](#).

The study, published in the [British Journal of Cancer](#), looked at over 10,000 women aged 25-64 who were part of the NHS Cervical Screening Programme and whose first smear test had shown mild or borderline abnormalities in the cervix.

These cervical screening samples were then tested for HPV – the results showed that around 35 per cent (3581 women) were HPV negative and were able to return to routine screening.

Women with a positive HPV test result were then referred for a colposcopy (internal examination) without having to go through further smear tests.

While most women infected with HPV do not develop cervical cancer, the virus is a major cause of the disease.

Study author Dr. Sue Moss from The Institute of Cancer Research said: “Our study shows that adding HPV testing significantly reduces the number of women sent for more invasive tests, when in fact they do not

have any serious cervical changes.”

The study analyzed the first phase roll-out of HPV testing for borderline or mildly abnormal cytology tests, which began in 2007 at six laboratories in England.

This research gives an insight into the likely effectiveness of the NHS Cervical Screening Programme by including HPV tests in the process at a national level.

This has started being rolled out as part of the existing NHS Cervical Screening Programme since April this year.

One thing that the research highlighted was that the proportion of women who will be referred for colposcopy will vary between laboratories because of differences in how mild or borderline changes and HPV test results are interpreted.

Sara Hiom, director of health information at [Cancer Research](#) UK, said: “This is a welcome refinement to the highly effective cervical screening program. This change has already saved thousands of women an anxious wait for extra tests and results, and should help lead to a more efficient screening program.”

Professor Julietta Patnick CBE, director of the NHS Cancer Screening Programmes, said: “The NHS [Cancer](#) Screening Programs is very pleased indeed with the results from the Sentinel Site project. The use of HPV testing that this paper reports is currently being incorporated into the screening programme nationwide and will be fully rolled out within the next year.

“By incorporating HPV testing into our current screening programme in this way, we will be able to significantly reduce the number of repeat cytology tests required and to target our colposcopy services more

effectively. This is an important development in our programme enabling us to screen women more effectively and efficiently, reducing unnecessary procedures and minimising any associated anxiety.”

More information: Moss SM et al., HPV Testing as a triage for borderline or mild dyskaryosis on cervical cytology: results from the sentinel sites studies, *British Journal of Cancer* (2011)

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