

Revised December 2017



MELBOURNE
PATHOLOGY

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Cervical Screening Renewal - R U Ready?

Counting down to 1 December 2017

From 1 December 2017, the renewal of cervical cancer screening with primary HPV testing commences. Along with a new test comes a new name – the Cervical Screening Test (CST).

Conventional Pap smears will no longer be used for screening or funded by Medicare after 1 December 2017. Many practitioners have already begun collecting the direct to vial liquid based cytology (LBC) specimens required for the new screening program and this has brought to light significant issues which can adversely affect both the cell sample and endocervical components.

Direct to vial collection

Two elements of collection technique should be emphasised:

1. Active rinsing of sampling device

This is different from other types of preparation which allow the head of the instrument to be left in the vial. Valid assessment of ThinPrep® specimens requires adequate cellularity; to ensure this, the sampling device must be **ACTIVELY RINSED** in the vial of fluid.

2. Lubricant

Some lubricants contain chemicals which disrupt the cell sample necessary for the ThinPrep® and also interfere with HPV testing.

- **Lubricant should be avoided if possible.** If required, warm water can be used.
- **If a lubricant (other than warm water) is necessary,** a small amount of a water-based, carbomer free preparation can be used, avoiding the tip of the speculum.

Compatible lubricants include



- Surgi-gel (not SurgiGel Plus)
- PAP Test lubricating gel sachets
- Personal lubricants – Glyde and Astroglide naturally derived

Formulations not recommended



- KY Gel personal (surgical grade only can be used – not available in Australia)
- L-gel
- Apicare

Please see overleaf, an updated specimen collection guide for the HPV test and LBC.

Self-sampling

Another component to the program is self-sampling which is specifically aimed at the under or never screened woman. The program states that the self-sampling device is to be provided by the practitioner's rooms. Self-sampling is currently unavailable until advised by the Government.

In the Guidelines, a patient is only eligible for a restricted number of self-collect samples in a specified period and patients with a positive HPV result will need to have either a practitioner-collected sample for LBC or be referred directly for colposcopy depending on the type of oncogenic HPV detected.

Management

The clinical management guidelines are complex and the appropriate testing (routine or co-test) and recommendations are in part, dependant on the clinical history provided by the referring practitioner (eg. symptomatic, immunosuppressed or DES exposure) and on the patient's screening and HPV vaccination history obtained from the National Cancer Screening Register (NCSR).

The imminent changes to cervical screening are significant but, as always, Melbourne Pathology staff are working diligently to make the transition as smooth as possible. If we can be of any assistance or if there is anything you wish to discuss, please contact our Cytology Department on 9287 7761, our specialist gynaepathologists on 9287 7700 or our Director of Cytopathology, Dr Vanessa Obers on 9287 7451.

For more information

1. **Melbourne Pathology website** : <http://mps.com.au/doctors/cst-dr-page.aspx>
2. **ThinPrep® Pap test**: <http://www.thinprep.com.au/health-care-pro.php>
3. **ThinPrep® Collection**: <http://www.thinprep.com.au/assets/MED-00248-AUS-EN%20Rev%20001%20ThinPrep%20Pap%20Test%20training%20bulletin.pdf>
4. **National Prescribing Service**: <https://learn.nps.org.au/mod/page/view.php?id=7804>
5. **NSCP Reporting Guidelines**: http://wiki.cancer.org.au/australia/Guidelines:Cervical_cancer/Screening

Details correct December 2017





Direct to vial ThinPrep® for cervical screening tests – cytology and HPV

Collection Guide

Collection Using a Cervical Sampler

For the majority of pre-menopausal women, it is advisable to use the cervical sampler (broom-like device) alone.

Lubricant

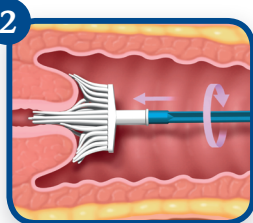
The chemical composition of some lubricants can interfere with cervical cytology and HPV testing. If lubrication of the speculum is required, please use warm water.

If additional lubrication is necessary, use only a small amount of water-soluble lubricant, avoiding the tip of the speculum.



Label the ThinPrep® vial with the patient's given name, surname and date of birth.

Record patient details and clinical history on the pathology request form.



Visualise the cervix and **obtain** an adequate sample from the cervix by rotating the cervical sampler 3–5 times in the cervical os.



Vigorously rinse the sampler immediately in the vial. The sampler should hit the base of the vial 5–10 times, splaying the bristles open.

DO NOT LEAVE THE HEAD OF THE SAMPLER IN THE VIAL.



Tighten the cap of the vial. Place the vial and the request form in a specimen bag for transportation to the laboratory.