

Government of Western Australia North Metropolitan Health Service WA Cervical Cancer Prevention Program

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# **Cervical screening during pregnancy**

Cervical screening is safe at any time during pregnancy, provided that the correct sampling equipment is used.

# Cervical screening is recommended:

every 5 years

for asymptomatic women and people with a cervix

aged 25 to 74

who have ever had any sexual contact

#### Contact the National Cancer Screening Register to:

- Access patient cervical screening information
- Manage your patients' participation

Phone 1800 627 701



# NATIONAL

CERVICAL SCREENING

PROGRAM A joint Australian, State and Territory Government Pro

# Pregnant women should be offered a choice of screening options:

#### Self-collected vaginal sample

 Human papillomavirus (HPV) self-collection is as sensitive for the detection of HPV and cervical intraepithelial neoplasia grade 2 or higher (CIN2+)/adepocarcinoma in situ (AIS)

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higher (CIN2+)/adenocarcinoma in situ (AIS) as a clinician-collected test.

- HPV self-collection is suitable for use at all stages of pregnancy and may be a more acceptable option for some women.
- Clinicians may assist their patients to collect a vaginal sample if required. The sample should be recorded as 'self-collected' on the pathology request form, even if assistance is provided.
- If HPV is detected: Patients will need to return for a clinician-collected cervical sample or be referred to a specialist for further investigation.

### **Clinician-collected cervical sample**

• A cervical sampler broom is **recommended** for use during pregnancy



Cervical sampler broom

 The endocervical brush and Cervex-Brush® Combi are not recommended for use during pregnancy, due to the risk of associated bleeding which may cause unnecessary distress for the patient



8 -----

Cervex-Brush® Combi

Endocervical brush

# **Practice points**

#### **Screening history**

Routine antenatal and postpartum care should include a review of the patient's cervical screening history. For some patients, **pregnancy may be one of the few points of contact** with the health system.

#### **Pregnancy safety**

Cervical screening during pregnancy is safe at any time and should not be delayed. Patients who are due or overdue for screening should be offered a Cervical Screening Test (CST).

#### Symptoms

Patients with signs and symptoms suggestive of cervical cancer at any age should be investigated **using a clinician-collected** co-test (HPV and liquid-based cytology (LBC)).

#### Reassurance

Reassure your patients that HPV is very common, and usually cleared independently by the body.

A positive HPV result does not mean your patient has, or will develop, cervical cancer.

#### **Test results**

**Low risk - HPV not detected:** Return for next screen in 5 years.

Intermediate risk - HPV (not 16/18) detected, and

• reflex LBC negative/pLSIL/LSIL: Repeat test in 12 months

 reflex LBC pHSIL/HSIL or glandular abnormality: Refer for colposcopy.

Higher risk - HPV (16/18) detected: Refer for colposcopy, regardless of LBC result.

### Colposcopy

Colposcopy is safe and referral should not be delayed during pregnancy.

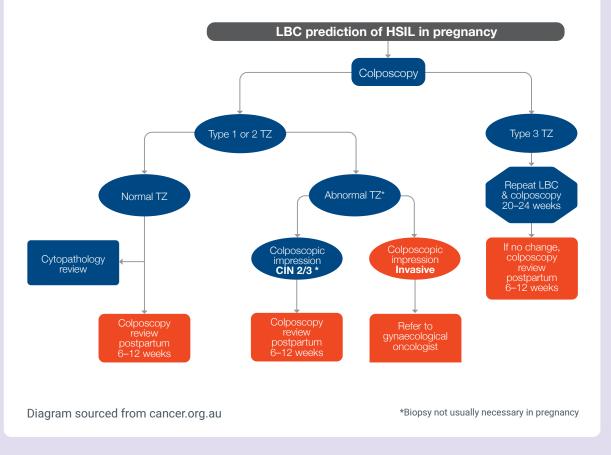
# **Requesting pathology**

Information to include on the pathology request form:

- If the sample was self-collected, write: 'CST - self-collected' or 'Follow-up HPV test self-collected'.
- Record whether the patient is of Aboriginal origin, Torres Strait Islander origin or both.

#### Management of suspected high-grade squamous intraepithelial lesion (HSIL)

- Conservative management of HSIL is recommended during pregnancy.
- Regression of CIN lesions is common in the postpartum period.
- Definitive treatment of a suspected high-grade lesion, except invasive cancer, may be safely deferred until after the pregnancy.
- If invasive disease is found in pregnancy, the patient should be referred urgently to a gynaecological oncologist.



## Key resources

National Cervical Screening Program Clinical Guidelines



Pathology test guide for cervical and vaginal testing



WA Cervical Cancer Prevention Program (WACCPP)

For further local resources and information visit kemh.health.wa.gov.au/ cervical

This document can be made available in alternative formats on request.

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