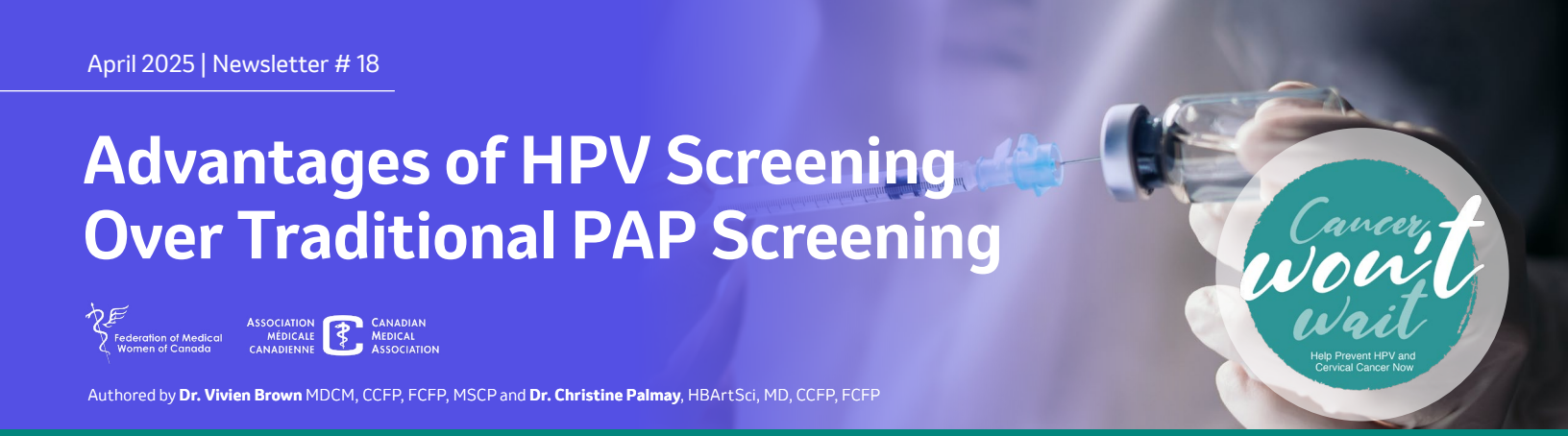
April 2025 | Newsletter # 18

Advantages of HPV Screening Over Traditional PAP Screening



Federation of Medical Women of Canada
Association Médicale Canadienne
Canadian Medical Association

Authored by **Dr. Vivien Brown** MDCM, CCFP, FCFP, MSCP and **Dr. Christine Palmay**, HBArtSci, MD, CCFP, FCFP

Statement of Support:

"The CMA supports public awareness campaigns to help patients understand the benefits of HPV vaccines. The CMA recognizes vaccination as a key aspect of overall health care."

There have been several recent changes to the cervical cancer screening programs. In this edition of Cancer Won't Wait, let's explore some of the issues, and why provinces are taking different approaches.

Screening for cervical cancer is a crucial part of preventive healthcare for women. Traditionally, the PAP smear test has been the standard method used for detecting precancerous changes and abnormalities in cervical cells. However in recent years, Human Papillomavirus (HPV) screening has emerged as a more effective alternative.

Accuracy

One of the primary advantages of HPV screening is its higher accuracy in detecting high-risk HPV strains, that are responsible for the majority of cervical cancers. HPV screening is sensitive and may facilitate earlier detection by identifying those with oncogenic HPV. While PAP smears rely on the visual examination of cell samples for abnormalities, HPV tests can detect the presence of high-risk HPV DNA. Studies have shown that HPV tests are more accurate than PAP smears, leading to earlier and more reliable detection of potential cancer-causing infections. HPV tests are also more accurate and reproducible as they are not contingent on pathologists' interpretation of cytology.

Early Detection

HPV screening allows for the identification of high-risk HPV infections before they cause significant cellular abnormalities detectable by a PAP smear. Early detection capability is critical for timely intervention and treatment, potentially preventing the development of cervical cancer. By detecting high-risk infections earlier, HPV screening can reduce the incidence of advanced cervical lesions and improve patient outcomes.

Longer Screening Intervals

Due to the higher accuracy of HPV screening intervals can safely be extended, compared to PAP smears. Women who test negative for high-risk HPV can safely wait longer before their next screening, typically every five years instead of the three-year interval recommended for PAP tests. This longer interval reduces tests needed and associated healthcare costs, making cervical cancer screening programs more efficient and cost-effective.

Reduction in False Negatives

Traditional PAP smears can sometimes fail to detect abnormalities, resulting in false-negative results. These false negatives can delay diagnosis and treatment, posing serious health risks. HPV screening minimizes the risk of false negatives by directly detecting the presence of HPV, providing a more accurate representation of a woman's risk for developing cervical cancer.

Enhanced Risk Stratification

HPV screening provides better risk stratification for patients. By identifying specific high-risk HPV strains, healthcare providers can better identify women at higher risk for developing cervical cancer, and tailor their monitoring and treatment plans accordingly. This precise risk assessment better optimizes patient care and ensures high-risk individuals receive needed attention in a timely manner.

In summary, HPV screening offers several advantages over traditional PAP screening, including higher accuracy, early detection of high-risk infections, extended screening intervals, reduction in false negatives, and enhanced risk stratification. These benefits make HPV testing a superior method for cervical cancer prevention and improving women's health outcomes. As healthcare advances, HPV screening is likely to become the primary method for cervical cancer detection, further enhancing the effectiveness of preventive care.

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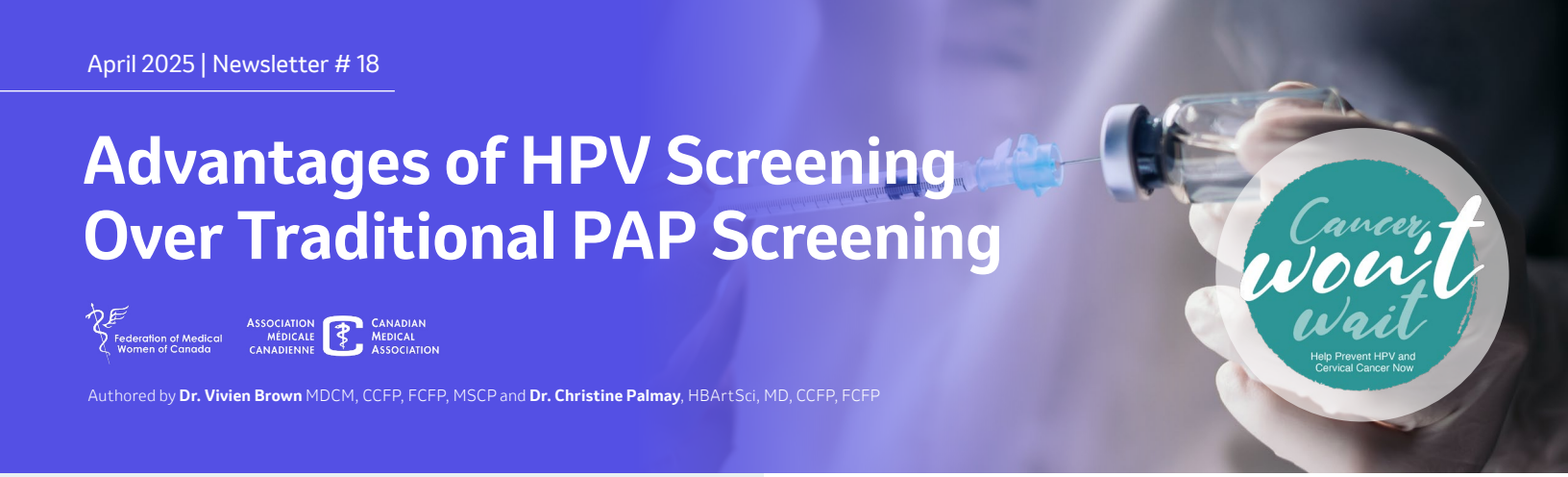

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Why Have Some Provinces Adopted Self-Screening and Others Haven't?

The choice between self-screening and traditional methods for HPV and cervical cancer detection has varied significantly across provinces. This discrepancy arises from multiple factors including healthcare infrastructure, population demographics, and policy decisions. Understanding these choices illuminate how provinces approach women's health and preventive care.

Healthcare Infrastructure

One of the main deciding factors for self-screening is the availability of healthcare resources. Provinces with robust healthcare systems and advanced medical infrastructure are more likely to adopt self-screening programs. These regions have the necessary facilities to support the distribution, processing, and follow-up of self-screening kits. However, provinces with limited healthcare resources may struggle to implement such programs, relying instead on traditional screening methods, which are easier to manage with limited resources.

Population Demographics

Population demographics play a critical role in the decision to adopt self-screening. Provinces with younger populations or higher rates of HPV might prioritize early and frequent screenings. Thus, adopting self-screening methods can be more accessible and less invasive. Conversely, provinces with older populations or lower rates of HPV may not see an urgent need for self-screening, and continue using traditional PAP smears.

Policy Decisions

Government policy and public health strategies significantly impact screening practices. Provinces with strong public health leadership and progressive healthcare policies might be more inclined to innovate and adopt self-screening methods.

These decisions are often influenced by research findings, healthcare budget considerations, and the perceived efficacy of self-screening in improving health outcomes.

Accessibility and Convenience

Self-screening offers greater accessibility and convenience for women, allowing them to perform tests in the privacy of their homes. This approach can increase participation rates, especially among women who may be hesitant or unable to attend regular clinic visits. Provinces that recognize the barriers to traditional screening methods may adopt self-screening, to ensure broader coverage and better health equity.

Cost-Effectiveness

The economic feasibility of self-screening also plays a crucial role. Provinces that have found self-screening to be cost-effective in the long term, due to reduced healthcare visits and streamlined testing processes, may adopt it more readily. However, provinces that assess the initial costs of implementing self-screening programs as too high may continue traditional methods until more cost-effective solutions are available.

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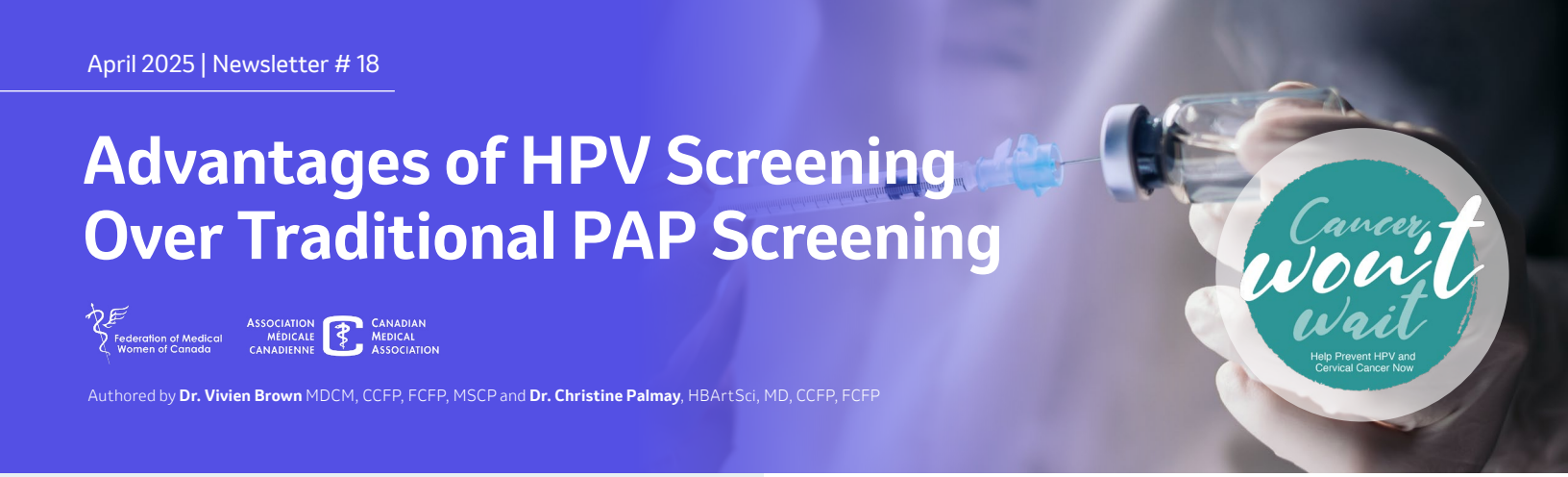

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Public Awareness and Education

Public awareness and education about HPV and cervical cancer screening can influence the choice between self-screening and traditional methods. Provinces that have invested in robust health education campaigns are likely to see higher acceptance rates for self-screening, as informed women are more likely to participate in preventive measures. In contrast, provinces with lower levels of public health education may face challenges in promoting self-screening effectively.

Conclusion

The decision for provinces to assess adopting self-screening is multifaceted, involving considerations of healthcare infrastructure, population needs, policy decisions, accessibility, cost-effectiveness, and public awareness. As healthcare continues to evolve, it is possible that more provinces will shift towards self-screening methods, as they become more feasible and widely accepted. By understanding the unique circumstances and challenges faced by each province, policymakers can better tailor their strategies to improve women's health outcomes.

How we can integrate HPV Vaccination into Cervical Screening Appointments

Human papillomavirus (HPV) vaccination and cervical screening are two pivotal strategies in the fight against cervical cancer. While both measures are highly effective on their own, combining them into a single appointment can optimize healthcare delivery, improve patient compliance, and enhance preventive care outcomes.

Benefits of Integration

Streamlined Healthcare Delivery

Combining HPV vaccination with cervical screening appointments offers a streamlined approach to preventive care. By consolidating these services, healthcare providers can reduce the need for multiple visits, saving time for both patients and medical staff. This integration can also lead to better resource utilization, minimizing administrative burdens and improving overall clinic efficiency.

Increased Patient Compliance

Patients are more likely to adhere to preventive measures when they are convenient and accessible. Offering the HPV vaccine during cervical screening appointments can allow healthcare providers to vaccinate women who may otherwise miss separate vaccination appointments. This approach can significantly increase vaccination rates and coverage.

Enhanced Preventive Outcomes

Integrating HPV vaccination into cervical screening appointments ensures that women receive comprehensive preventive care in one visit. This holistic approach not only protects against HPV infection but also facilitates early detection of cervical abnormalities. As a result, it can lead to a reduction in cervical cancer incidences and improve long-term health outcomes.

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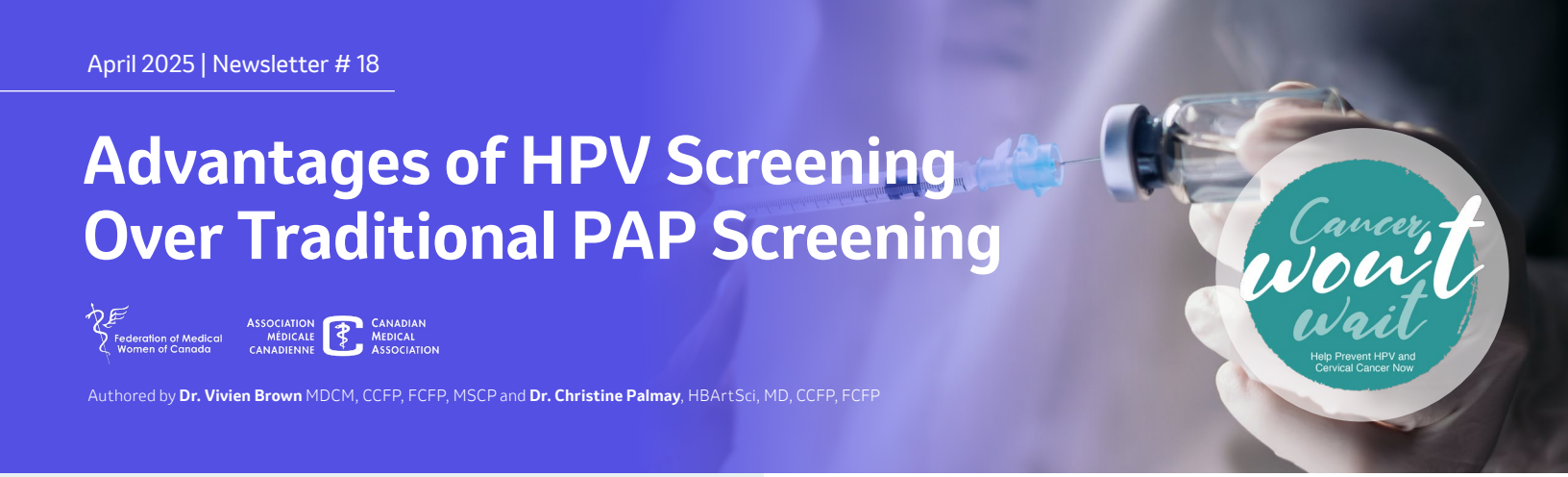

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Challenges and Considerations

Logistical Coordination

Implementing integrated appointments requires thorough logistical planning. Healthcare providers must ensure vaccines are readily available during screening appointments and that staff are trained to administer them. Additionally, scheduling systems must be adjusted to accommodate the added time required for both screening and vaccination.

Patient Education and Consent

Patient education is crucial for effective integrated appointments. Patients must be informed about the benefits of integrated appointments and provided with clear information about the HPV vaccine. Obtaining informed consent for both screening and vaccination is essential, and requires thorough communication between healthcare providers and patients.

Financial and Insurance Considerations

Healthcare providers must navigate financial and insurance challenges to ensure that integrated services are covered and affordable for patients. This may involve coordinating with insurance companies to include HPV vaccination in screening appointments, and addressing any potential cost barriers for patients.

Practical Steps for Integration

Developing Standard Protocols

Establishing standard protocols for integrated appointments is essential for consistency and efficiency. These protocols should outline the steps for administering the HPV vaccine during cervical screening, including patient eligibility, consent procedures, and post-vaccination monitoring.

Training Healthcare Staff

Healthcare staff must be adequately trained to deliver integrated services. This includes training on HPV vaccination administration, patient education, and managing any potential adverse reactions. Continuous professional development and support are key to maintaining high standards of care.

Enhancing Patient Communication

Clear and effective communication with patients is vital for effective integrated appointments. Healthcare providers should leverage various communication channels, such as brochures, websites, and direct consultations, to educate patients about the benefits and logistics of receiving both services in one visit.

Integrating HPV vaccination into cervical screening appointments represents a proactive and patient-centered approach to preventive care. By addressing logistical, educational, and financial challenges, healthcare providers can enhance the delivery of comprehensive preventive services. This integration not only streamlines healthcare delivery and increases patient compliance, but also significantly improves preventive outcomes; ultimately reducing cervical cancer incidences and promoting women's health.

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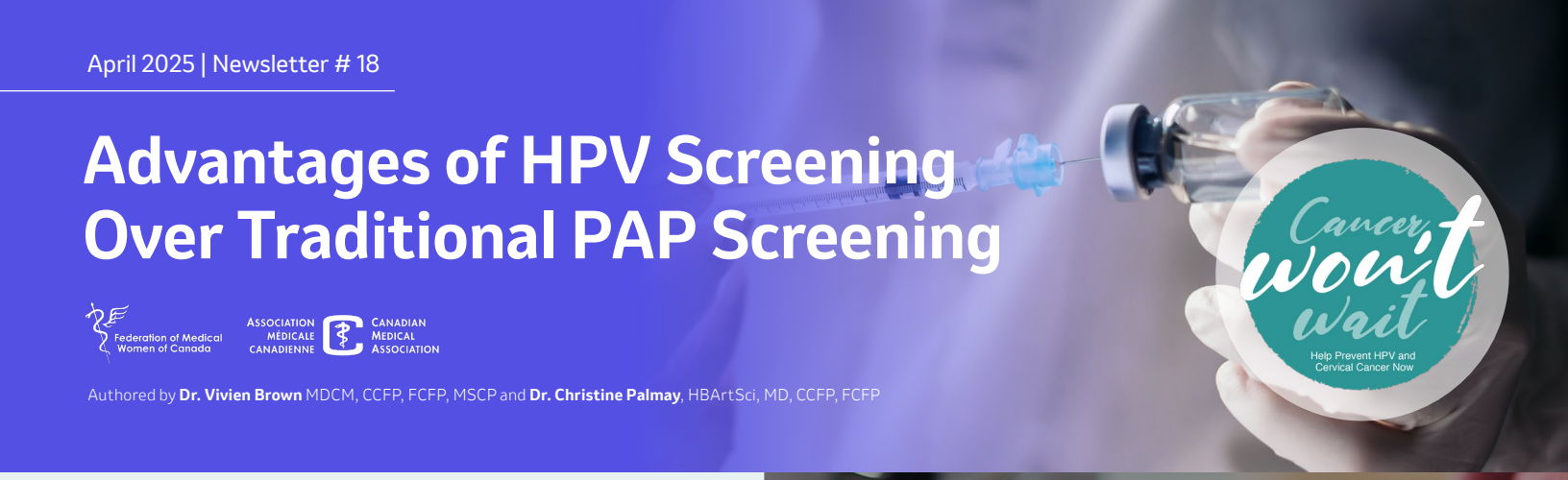

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Back In Time

In the early 1980s, Dr. Harald zur Hausen, a German virologist, discovered the link between human papillomavirus (HPV) and cervical cancer, specifically HPV types 16 and 18. This discovery earned him the 2008 Nobel Prize in Physiology or Medicine and laid the groundwork for vaccine development.

Did you Know?

In March 2025, Ontario moved to the the HPV test for cervical cancer screening in place of the Pap test. CBC News

Hot off the Press

Trends in Cervical Precancers Identified Through Population-Based Surveillance — Human Papillomavirus Vaccine Impact Monitoring Project, Five Sites, United States, 2008–2022 released February 27, 2025.

Around the Globe

Sweden is trying to become the world's first country to eliminate HPV. Here's how. euroNews December 2024

In November in Sweden, 600 women received free HPV vaccines at local cinemas in a two hour pop up event!

Ressource du mois

Ontario College of Family Physicians New HPV Testing for Cervical Screening — Information for Family Physicians