“I am relatively new to the Screening Division of Public Health Wales and have been both interested and enthused to learn about the HPV primary pilot that will pave the way for full rollout of the new test. I would like to take this opportunity to thank you for your participation in the pilot; it is great that practices and the programme have been able to work together in this way to achieve what is proving to be an effective and informative pilot.

Human papillomavirus (HPV) testing as the first stage in the cervical screening programme is recognised by the UK National Screening Committee to be a better way of identifying women at risk of cervical cancer. The work that we, in partnership, are undertaking to support its full implementation will mean a more effective test which will support improving health outcomes for our women in Wales.

I know that with any changes in practice there will be questions and some concerns, please do not hesitate to get in touch if this is the case. Also, if you have any experience of what has worked well we would love to hear it. We are delighted how the pilot is working in Wales and thank you for your continued support”

Heather Lewis, Consultant in Public Health

“The primary HR HPV screening pilot, that commenced on 1st April 2017 following approval by Welsh Government, is continuing to run very successfully due to the efforts and dedication of our pilot practices and CSW teams. The rollout of the pilot followed an intense period of training for both CSW staff and staff within primary care and Health Board Colposcopy units, and we are now preparing for the training sessions that will be required for the remainder of the primary care staff to achieve full roll out in October 2018.

The aim of the pilot is to understand and resolve any issues raised by implementing HPV primary screening whilst those issues are still on a small and more easily manageable scale, and our evaluation of how the pilot has run so far, including planning for issuing Service User Experience feedback invitations, is well underway.

We hope the briefing will help keep you abreast of developments and please do not hesitate to get in touch with us on the contact list below if you have queries or feedback”

Louise Dunk
Head of Programme, Cervical Screening Wales
Prevalence vs incidence in HPV Primary Screening

When looking at screening programmes, we often talk about ‘prevalence’ and ‘incidence’ – but what is the difference?

- Prevalence is the proportion of the population who are affected by a disease at a particular time
- Incidence is the number of new individuals who develop a disease over a period of time

The introduction of primary screening using the HPV test will be the first time we test every screening participant for HPV, so it is a ‘prevalent’ screening round. This is when we expect to pick up most of the ‘disease’ in our eligible population. In the case of cervical screening, ‘disease’ is CIN and cervical cancer.

We would expect an increase in referrals to colposcopy (in the order of 60%) for the first round of screening, because HPV Primary Screening is a more sensitive test. After the first round of screening it appears that numbers of women referred to colposcopy fall. This is because we should have picked up most of the already present ‘disease’ in the first round, so future screening rounds would be looking for new cases.
HPV Vaccination and HPV Primary Screening

The HPV vaccination programme started in Wales in 2008, and was aimed at girls in Year 8 (aged 12-13). At the same time, a ‘catch-up’ programme offered vaccination to young women up to the age of 19. The uptake of vaccination increased in the 1993-1994 birth cohort (compared with older birth cohorts).

The vaccines (Cervarix initially, Gardasil currently) work against infection with HPV types 16 and 18, the cause of 70% of cervical cancers. They also appear to provide some cross-protection against other high risk HPV types.

In the 25-29 age group, HPV positivity rates are at their highest (approximately 25%), but most of these infections will clear. Once vaccinated women enter the screening programme, the number of women requiring cytology (because they test positive for HPV), early repeat tests and referral to colposcopy is likely to fall. It is very important however that these young women realise that the vaccine does not give them 100% protection, and they should continue to attend for screening when invited.

Online learning on Human Papillomavirus (HPV), vaccinations and cervical screening is available through the online learning module provided by the Public Health Wales Vaccine Preventable Disease Programme (VPDP) which can be accessed via [http://nww.immunisation.wales.nhs.uk/e-learning](http://nww.immunisation.wales.nhs.uk/e-learning). Section 4 (HPV) focuses on Human Papillomavirus (HPV), vaccinations and cervical screening. The modules are designed to provide knowledge on HPV and in particular genital HPV, key immunisation knowledge and cervical screening and HPV vaccines. This module has been updated to reflect the evidence and clinical advice around reducing the schedule of the HPV vaccine to a two dose programme.
Possible changes to the cervical screening programme in Wales

The change to using a test for HPV as the primary test for cervical screening may bring other changes into the cervical screening programme, which are currently under discussion:

A test that is negative for HPV seems to provide extended protection against developing high grade CIN, and may mean that screening intervals could be extended.

Evidence is being gathered on whether testing for HPV types 16 and 18, and managing these differently to other high risk HPV types, is of benefit to women.

Women aged 65 or over who test HPV positive and have no abnormalities found may need to stay within the screening programme. Currently they are staying on recall until we have further guidance.

We may be able to screen vaccinated women differently to non-vaccinated women, due to their very low risk. However, this does rely on us being able to accurately identify women who have been fully vaccinated.

There is a possibility that women who do not respond to screening invitations could ‘self-sample’ for HPV testing.

*All of these possibilities require firm evidence to support them and any changes would need to be recommended by the National Screening Committee before being considered in Wales.*
Latest statistics

It is expected that HPV Primary will bring about a reduction in the need for cytology by at least 85%, based on the findings from the English sentinel sites. Colposcopy referrals are likely to increase by about 60%, due to the referral of women who are persistently HPV+ve, despite normal cytology. However, this increase does not seem to be in the first year of HPV Primary Screening – there is a slight increase after the first year, with the main impact being after two years.

Total number of HPV tests performed by HPV result

A total of 11,125 HPV tests have been performed on samples authorized from April 2017 with 87.3% (9,711) as HPV negative and 12.0% (1,338) as HPV positive.

Total number of HPV positive samples by cytology result

Of the 1,338 samples which tested HPV positive, 55.2% (738) were reported as normal and 42.5% as abnormal.
Your feedback

We include recent feedback from GP practices across Wales who are currently taking part in the HPV Primary Pilot in Wales

“I feel screening is going very very well, the patients appear to be impressed that the screening is taking place, and seem happy to take part, I have received no negative comments what so ever, the information leaflet is well accepted”

“Programme very well received by patients and almost all see it as a positive thing; giving everyone the info sheet to take away with them. Results coming back much quicker. Newsletter good to have feedback on what’s happening”

“The HPV pilot seems to well accepted and understood by women attending for their smear test; although in my experience most of them did not read the accompanying information to the invitation – so the process takes a little longer to obtain informed consent”

“We have found little problem with discussing the additional information for HPV with the patients. The patients have been receptive to this and found the information you included in the invite letter has been really useful. It also gives us an opportunity to direct patients to the CSW web pages”

“Quite a few patients have given very positive feedback when the testing process has been explained especially those who have been on a six month or yearly recall. One or two have rang to tell me they have not been found to be HPV positive therefore going back onto normal recall for the first time in many years and being completely thrilled about it. Not one lady has refused to consent to the procedure and overall the outlook is really good.”

“Overall the pilot testing for HPV has been straight forward. Ladies seem happy with the change and we have only received 1 query regarding a result. I worry of the possibility of the 3% that develop cervical cancer without a HPV infection will actually never have cytology. The newsletter and the support from yourselves has been very informative and helpful.”
Working towards October 2018...

We anticipate for all GP practices in Wales to convert to HPV Primary Screening as of 1st October 2018. Alongside evaluating elements of the primary pilot throughout November 2017 – February 2018, we are in parallel planning ahead to ensure GP practices across Wales are equipped and informed by end of August 2018.

Inevitably, conversion to HPV Primary will bring about a reduction in the need for cytology by at least 85%, based on the findings from the English sentinel sites and Health Board cytology teams are planning accordingly. CSW are therefore developing mitigation plans should a more sudden reduction in cytology screening capacity significantly affect the service. Should this risk materialize, we will need to collaborate with non-pilot practices to convert some or all of them to HPV Primary Screening prior to the planned implementation date of 1st October.

Formal communication is planned to be circulated to all GP practices, however we would like to encourage practices who are keen to come onboard earlier to contact their lead nurse/nurse coordinator.

We hope you have found the briefing of value as part of the work in supporting Cervical Screening Wales. Please do not hesitate to contact your local CSW nurse for the Pilot

Local contacts – HPV Primary Pilot

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