

# CERVICAL SCREENING

## INTRODUCTION

Cervical Cancer is a potentially preventable disease, due to the use of the cervical smear test, and more recently the introduction of human papilloma virus (HPV) vaccination.

This module has been produced to support multi-disciplinary learning, however it can be studied by single professional groups. The aim of this module is to improve the quality and effectiveness of the service provided.

The objectives are:

- Highlight the need for GPs and practice nurses to be adequately trained in doing smear tests
- Discuss the barriers which prevent women being screened, and barriers which prevent them receiving treatment that they need
- Explore the concepts of HPV triage, and “test of cure”

This module contains a number of appendices, which may be more useful if printed in colour. The management of cervical cancer is not covered in detail in this module, though reference is made to post-coital bleeding.

The cases below are designed to illustrate the problems described in the aims of the module. They are real cases, but are **not** meant to be the focus of the group's discussion. Instead, PBSGL groups are encouraged to think of similar cases in their own place of work.

Studying all the cases is not compulsory. If the group runs short of time, and completing the group feedback is still to be done, it is better to leave out a case completely. The feedback, where group members say what changes they will make in practice as a result of the meeting, is an essential part of the learning process – more important than “completing the cases”.

## CASES

### Case 1. Pauline, aged 34

Pauline is fit and well and has no past medical history of note. Routine smears have been normal since the age of 25. She is on the oral contraceptive pill and has been married for four years. She has