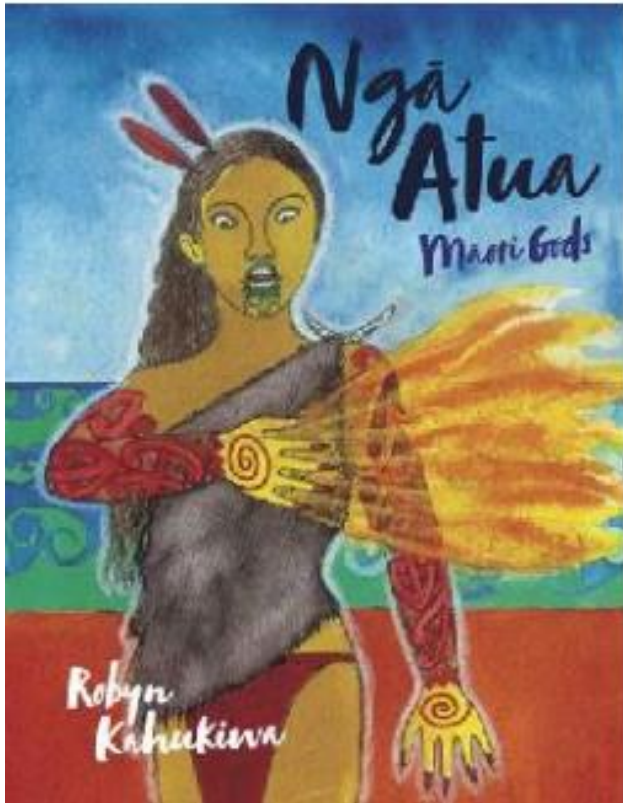


Self-sampling: New horizons for primary and community health care

Dr Margot McLean,
Public Health Physician,
National Screening Unit



Covering...



Programme basics

What's the evidence:

- Is self-swabbing acceptable? To whom?
- Will people get follow up?
- Is self-swabbing as accurate as clinician-taken swab?

How can labs support?

Future developments

Programme basics

1A.

VCS Pathology

HOW TO TAKE YOUR OWN HPV TEST

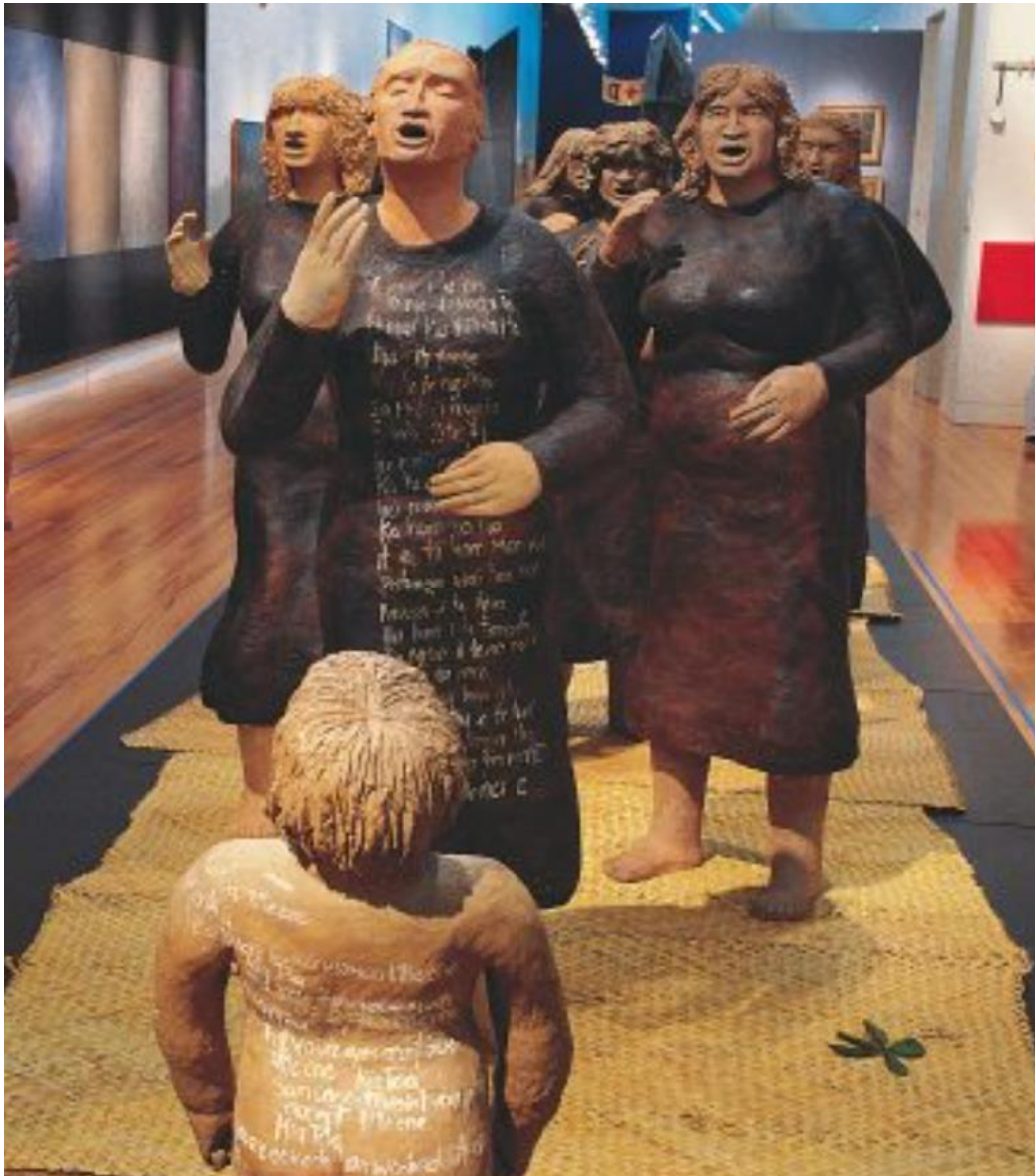
SIMPLY FOLLOW THE STEP-BY-STEP INSTRUCTIONS

Step 1	Step 2	Step 3	Step 4
 <ul style="list-style-type: none">Lower your underwear.Twist the red cap and pull out the swab.Look at the swab and note the red mark closest to the tip.	 <ul style="list-style-type: none">Get in a comfortable position.Insert the swab into your vagina, aiming to insert to the red mark. It may be easier to use your other hand to hold the skin of your vagina.	 <ul style="list-style-type: none">Rotate the swab gently for 10-30 seconds. It should not hurt.	 <ul style="list-style-type: none">Remove the swab, and place back in tube.

1B.



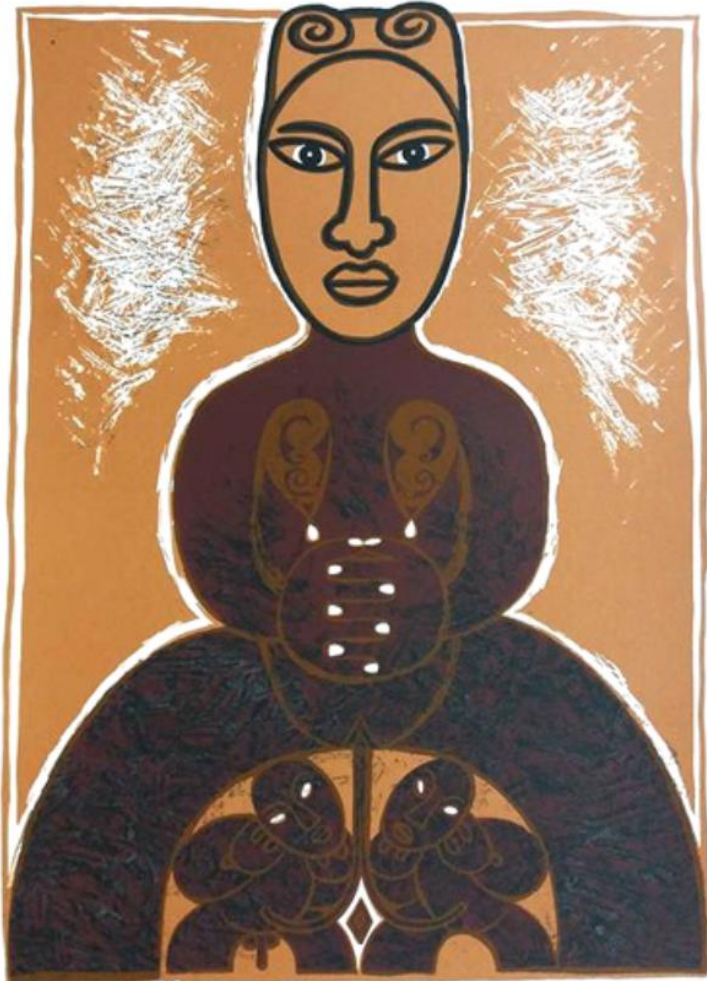
- Options provided – participants can choose
- No national mail out
- Clinician who signs form is responsible for giving results and providing follow-up
- Local services can determine models - eg swab done out of clinic, local mail outs



Ngā Morehu – Shona Rapira Davis

Reasons for not testing

- Desire for bodily autonomy
 - Whakamā (shyness, embarrassment, reticence)
 - Tapu (sacred/taboo/ forbidden)
 - Negative health experiences (pain, inappropriate actions or comments)
 - Lack of time/ other commitments
-
- *Adcock et al, ANZJOG 2019;59:301-307*
 - *Acceptability of self-taken vaginal HPV sample among an underscreened indigenous population*



Mana Wahine 2 – Robyn Kahukiwa

Acceptability of HPV self-test

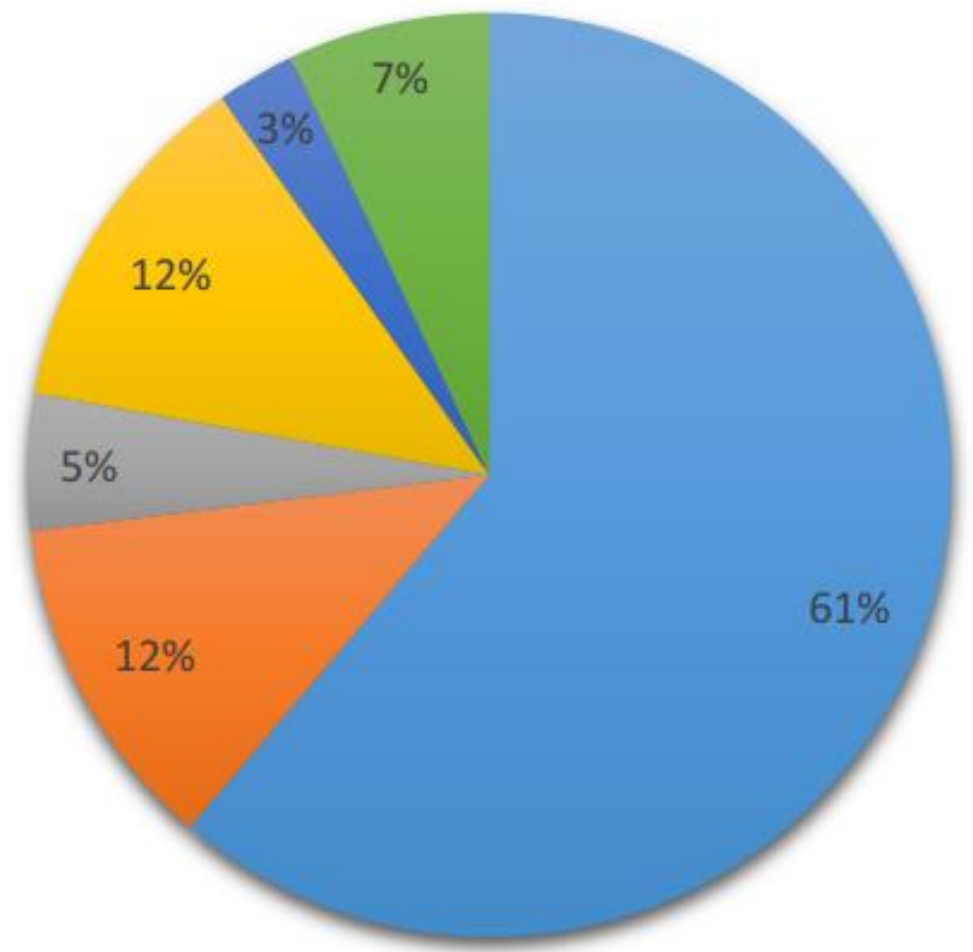
73% said they were likely/ very likely to self test:

“easier”
“more comfortable”
“less intrusive”
“brilliant”

Areas important for HPV education:

- relationship-building between communities and health promoters;
- including whānau/ family in HPV education;
- ensuring clear information about HPV vaccination

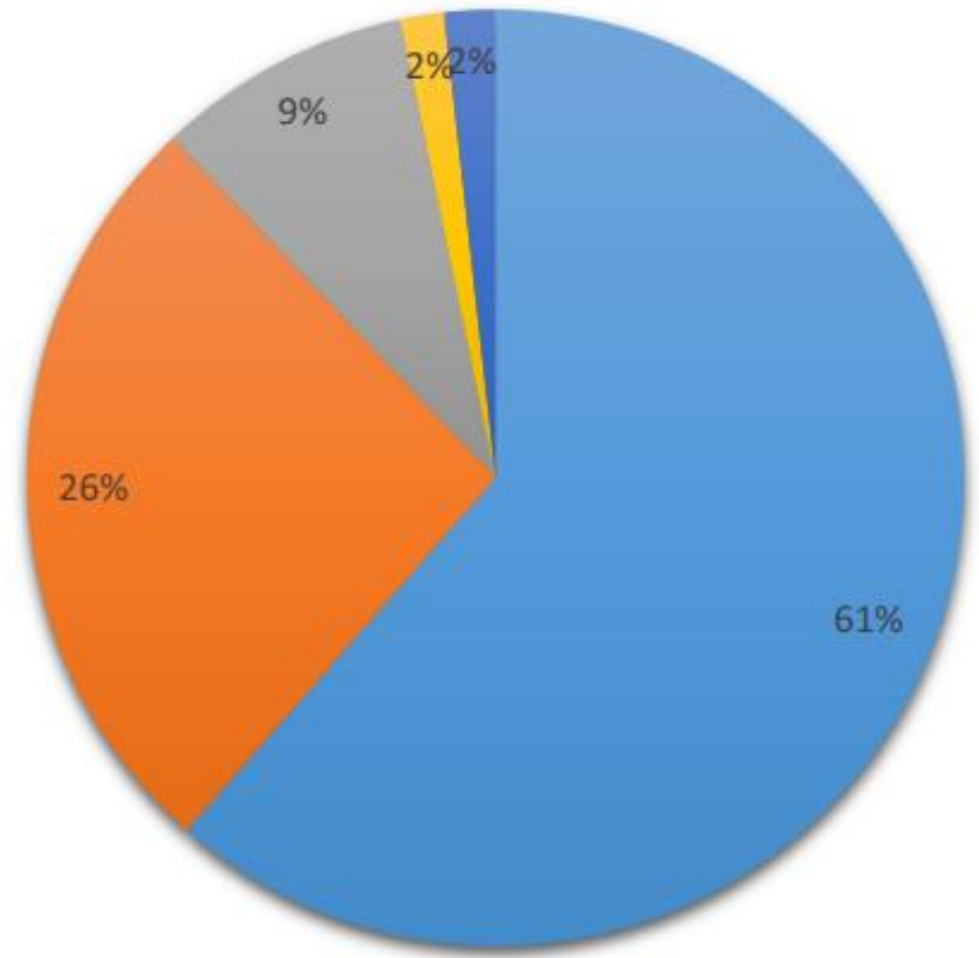
Preferences



- HPV self-test
- Health practitioner - vaginal swab
- Health practitioner - speculum
- Any HPV test option
- Does not want an HPV test
- Unsure

FIGURE 1 Preferences regarding HPV testing (N = 397).

Follow-up



■ Extremely likely ■ Likely ■ Unsure ■ Unlikely ■ Definitely not

FIGURE 2 Likelihood to seek follow up (N = 397).

Is self-swabbing as good as clinician taken?

A Cochrane review found self-testing for HPV using polymerase chain reaction (PCR) assays reliably offers equivalent sensitivity to clinician-collected samples.

Arbyn M, Smith S, Temin S, Sultana F, Castle P on behalf of the Collaboration on Self-Sampling and HPV Testing. Detecting cervical precancer and reaching underscreened women by using HPV testing on self samples: updated meta-analyses *BMJ* 2018; 363: k4823 <http://dx.doi.org/10.1136/bmj.k4823>)



Rita Angus – The Aviatix

Will everyone choose self-testing?

- Online questionnaire completed by screening-eligible women living in England (n =3672).
- Half of participants (51.4%) intended to choose self-sampling, 36.5% preferred clinician screening, 10.5% were unsure, and <2% preferred no screening
- More irregular and never attenders chose self-sampling, compared with regular attenders (71.1% and 70.1% vs. 41.0% respectively)

Self-sampling for cervical screening offered at the point of invitation: A cross-sectional study of preferences in England
Hannah Drysdale, Laura AV Marlow, Anita Lim, Peter Sasieni, and Jo Waller
J Med Screen 2022, Vol. 29(3) 194–202



Robyn White – Florence and Harbour Cone

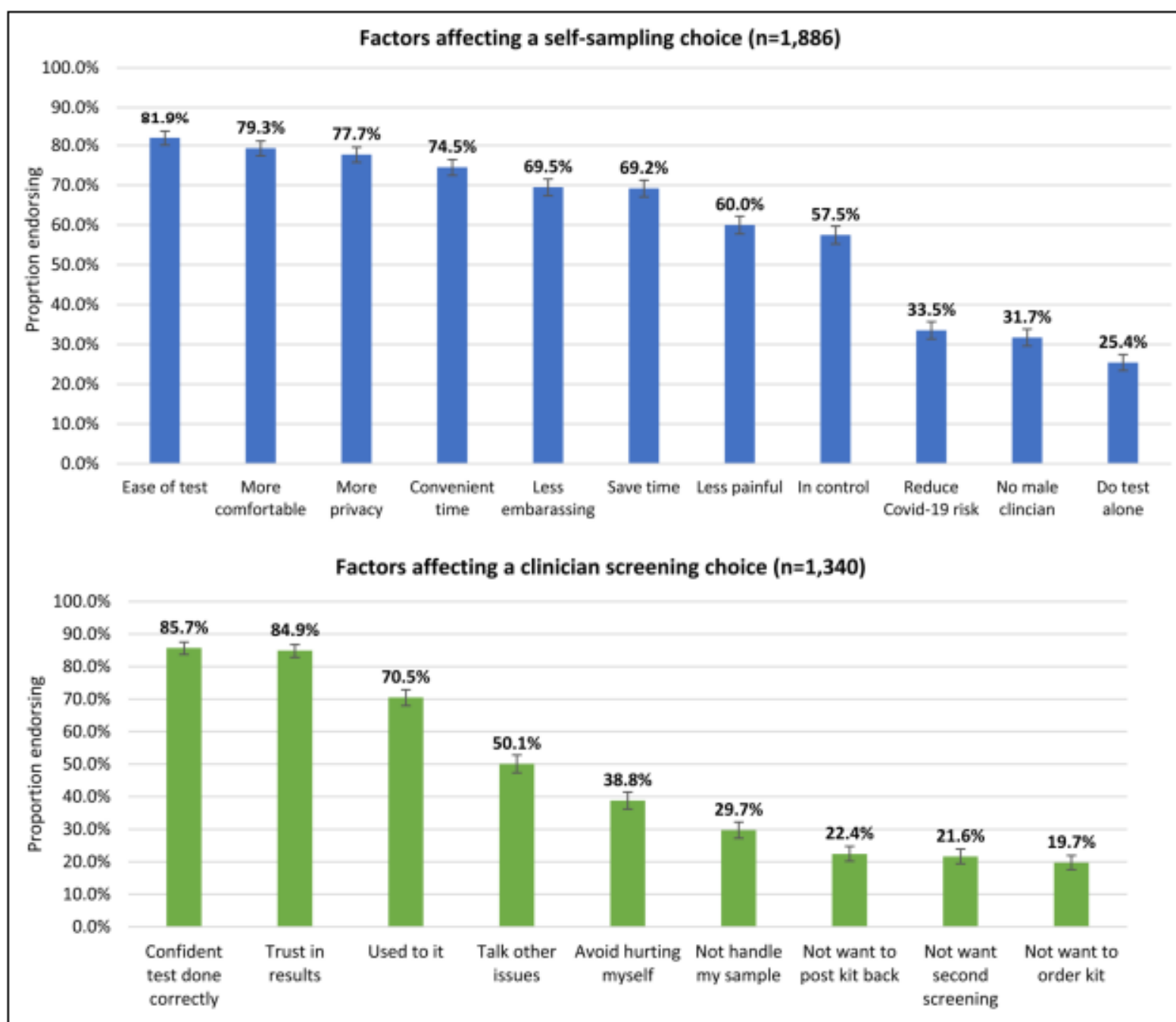


Figure 1. Factors affecting women's screening choice.

Laboratory support of HPV self-swabbing

- Confidence and reassurance to health care professionals
- Expertise and knowledge
- Clear instructions aligned with the programme
- Good relationship with local providers
- Easy drop-off, flexibility




New directions

POC testing using Cepheid GenXpert – and colposcopy appointment made immediately

New models of primary and community care – experience from COVID

Evidence from implementation of the programme

ALL WĀHINE HAVE HPV SELF-TEST	
Intervention	Control
POC Results in 1 hour 	Test swab to off-site lab
Immediate on-site result to patient with information and support HPV-negative information given with follow-up screening times	Results to GP/Nurse
Immediate referral date for colposcopy if HPV-positive	Patient notified by text or phone HPV-negative information given with follow-up screening times
Colposcopy	Letter/phone/text to patient if HPV-positive Letter of referral to gynaecologist Outpatient appointment generated and sent to patient
	Colposcopy

HPV self-testing will save lives!

Flexible



Strengths based

Culturally responsive

Good communication