Cervical cancer: gap between screenings ‘can be increased to 10 years’

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Dutch researchers say tests suggest increase in screening intervals for HPV-negative women over 40 is justified

The length of time between cervical screenings can safely be extended to a decade for some women, research suggests.

The findings from researchers in the Netherlands show that for women over the age of 40 who test negative for the human papillomavirus (HPV), the gap between screening rounds could be increased to 10 years.

Almost 900 women in the UK died from cervical cancer in 2014, with the disease the most common cancer among women aged between 15 and 34. Among the risk factors for the disease is infection with certain types of HPV.

Women in the UK are currently invited for their first round of screening at the age of 25, with three-year intervals between screening rounds until the age of 49. Women aged between 50 and 64 are invited for screening every five years.

While screening has traditionally involved looking for abnormal cells from a smear test, followed by HPV testing if abnormalities are found, [in July](https://www.gov.uk/guidance/cervical-screening-programme-overview) it was announced that the UK will shift to an approach whereby smear test samples will be screened for HPV first.

As a result, the UK is reconsidering its stance on the length of screening intervals, while in the Netherlands – which is also pursuing an HPV-first approach – intervals between screening rounds are set to increase from five years to 10 years from 2017 for HPV negative women over the age of 40.

A team of researchers from the Netherlands has now confirmed that the extension is safe. Writing in the[British Medical Journal](http://www.bmj.com/content/355/bmj.i4924), the researchers describe how they analysed outcomes for more than 43,000 women aged between 29 and 61 years who enrolled in cervical screening trials, with a follow-up period of 14 years.

The results reveal that for women over the age of 40 who test negative for HPV, the risk of having the highest level of abnormal cells in the cervix was 72% lower than for younger women. The research also found that HPV testing is more accurate than examination of cells from smear tests when it comes to assessing cervical cancer risk.

The results, the authors say, suggests that for HPV-negative women, the increase in screening intervals for over-40s is justified.

“Based on the results for the most severe pre-cancer endpoint we think it is safe to extend from five to 10 years,” said Johannes Berkhof, a co-author of the research, from the VU university’s medical centre in Amsterdam.

But, the authors add, with a lack of data available it is unclear if there is a link between the risk of developing cervical cancer and age. “Close monitoring of interval cancers in between these two screening time points that are 10 years apart is crucial,” said Berkhof.

Dr Anne Mackie, Public [Health](https://www.theguardian.com/society/health) England’s director of screening, said: “The UK national screening committee is currently carrying out a review to identify how often a woman should be tested for HPV. A consultation on the review findings will begin next year.

“Testing for HPV first will be rolled out into the English cervical screening programme over the next few years and we are currently working with NHS colleagues to ensure an effective implementation into the existing screening programme,” she added.

Dr Jana Witt, the health information officer at [Cancer](https://www.theguardian.com/society/cancer) Research UK, described the study as important and said it could help to inform future changes to cervical screening programmes.

“It’s important to remember that whatever your screening history, always tell your doctor if you notice any unusual changes to your body such as bleeding between periods, during sex or after the menopause,” she added.