

HPV Q&A's June 27, 2023

Question Answer

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<i>Can I order HPV testing for use other than cervical screening? For example, as a vaginal vault swab post hysterectomy?</i>	HPV testing in PEI is only validated for cervical specimens and will soon be validated for vaginal vault specimens using the Floq-swab, i.e. self-sample. HPV testing is not validated for other types of tissue, e.g. genital warts, the anus or other sites.
<i>How do I safely take a cervical sample from a pregnant patient?</i>	Use only a plastic Cooper's spatula supplied by the lab for patients ≥ 10 weeks pregnant or a Rover's Broom collection for all other patients.
<i>What happened to the pap tests I took prior to starting the LBC collection?</i>	The lab will process the tests as usual, and the management of the cytology result will follow the previous 2019 guidelines. Do not retake an HPV test. The next time an individual is eligible for screening, or if a colposcopy is required, provide an HPV test.
<i>Do HPV-vaccinated persons still need cervical cancer screening?</i>	Yes, the same screening schedule applies for HPV-vaccinated persons (for the time being). HPV vaccination does not offer complete protection from all subtypes of HPV. Thus, screening remains important.
<i>Who will have access to self-sampling?</i>	First, the lab needs to validate the sample collection. Once the test is validated, self-sampling HPV testing on PEI will be an option for patients. It will initially target the under and never screened population focusing on equity. Examples include gender-affirming clinics, Abegweit Health Centre or Hep C clinics. This is to encourage screening that feels safe when the client has a trusted relationship with a healthcare provider if the results need follow-up.
<i>Do I have to tell my sexual partners I am HPV-positive?</i>	This is a personal decision. Immunization is highly recommended to reduce transmission. However, it is felt that persistent HPV acts differently and does not become transmitted as readily, i.e. to a long-term partner. Providers should be aware of this concern and learn more about the HPV virus (www.HPVinfo.ca)
<i>The patient wants an HPV test to prove to the partner they are negative.</i>	HPV testing for cervical screening is not to be used as an STI test. Educate the client on what HPV is. Resource www.HPVinfo.ca or Center for disease control and prevention https://www.cdc.gov/std/hpv/stdfact-hpv.htm
<i>What if a patient had a pap test 1 year ago and is not due for rescreening yet but wants a new HPV test now?</i>	We encourage patients to be screened as per the guideline when they are due, but the lab will not turn away or charge patients for HPV screening. For example, if a patient had a normal Pap test in 2022 that is not due until 2025 but requests an HPV screen now, the lab will accept and analyze the test. The patient would now follow the HPV screening algorithm.

<p><i>What if a patient requests the HPV test earlier due to anxiety because of an abnormal result earlier?</i></p>	<p>The follow up examination as part of cervical cancer screening should not be carried out earlier than recommended. If a patient develops new symptoms however, then they should be investigated appropriately.</p> <p>The risk of developing cervical cancer or its precursors is related to the persistence of the HPV infection. When an HPV infection persists, it can lead to cell abnormalities in the cervix. The time between infection with HPV and the eventual development of cervical cancer is, on average, 10–15 years. After a negative HPV test, participants do not need to be screened for a long time because of the excellent sensitivity of the test.</p>
<p><i>If a woman gets screened for the first time in a long time at age ≥65, can we repeat the HPV test sooner to get two negatives, or do we need to wait five years?</i></p>	<p>If there is no adequate history record between 55-65 years of age, for example, conduct Cervical Screen (HPV test) now, and if negative, repeat in 5 years.</p>
<p><i>Can I use the cervical brooms left over in my office from conventional paps?</i></p>	<p>No, the lab equipment is only validated for the Rover's cytobrush. All materials used prior to conventional Pap smears cannot be used for liquid-based testing. The materials can be returned to the lab.</p>
<p><i>What is the turn-around time for HPV results or Pap results?</i></p>	<p>HPV results are generated at the QEH Lab and run weekly. Pap test turnaround times remain lengthy. We anticipate this getting much quicker by the fall, with significantly fewer cytology specimens needing analysis (HPV negative results relieving demand).</p>
<p><i>Which screening participants are referred to colposcopy, and which ones are not?</i></p>	<p>The screening examines whether a participant carries the high-risk HPV virus and, if so, what type of HPV it is. If a participant is another HPV-positive, cytology will help determine whether cervical cells have become abnormal. The type of HPV infection, in combination with the severity of the abnormal cells, determines the follow-up pathway. There is a good chance that the body will clear up the HPV infection and the abnormal cells itself; however, if positive for a higher-risk HPV type 16/18/45 or high-grade cells, the patient should be immediately referred to a gynecologist for a follow-up examination. Otherwise, they may be retested after 12 months as per the current algorithm</p>
<p><i>Does the screening schedule also apply to clients with symptoms?</i></p>	<p>Screening is intended for people without symptoms that could indicate cervical cancer. Clients with symptoms may have an HPV and Pap test as part of their workup.</p>
<p><i>How does screening apply to a woman with a previous biopsy-proven high-grade disease?</i></p>	<p>Clients who have had a previous biopsy-proven high-grade change are recognized to be at higher risk of recurrent disease and can be screened with HPV testing once discharged from colposcopy care every three years. Gynecologists have new guidance on this. Canadian Colposcopy Guideline, published June 2023 https://www.mdpi.com/1718-7729/30/6/425</p>

<p><i>For Previous abnormal pap returning for follow-up pap in 3, 6 or 12 months, do I order HPV & Cytology or do a conventional smear?</i></p>	<p>No, if the recommendation was to return for a pap in 3, 6 or 12 months for a Pap test, please perform a Pap test and HPV. Use the LBC collection.</p>
<p><i>What is the advice if a participant tests positive for HPV 16/18/45?</i></p>	<p>If a participant is found to have HPV 16/18/45, referral to a gynecologist is recommended. The lab may perform a Pap test for the colposcopists, but its result does not affect referral to colposcopy.</p>
<p><i>What is the advice if HPV-OHR is detected?</i></p>	<p>If HPV-OHR is detected in a participant, cytological evaluation follows. If no or low-grade abnormal cells are found, the HPV test is repeated in 1 year. If high-grade cell changes are found, the patient is referred directly to colposcopy.</p>
<p><i>Do I do an HPV test or pap for patients requiring a vaginal vault after a hysterectomy for cervical cancer or for a severe dysplasia?</i></p>	<p>A liquid-based sample can be collected for a Pap test, but the lab is currently only validated to perform HPV testing on cervical samples.</p> <p>HPV testing is not required in the setting of hysterectomy for other cancers (ovarian, endometrial)</p>
<p><i>When results come back, there is no information the provider has included on the original req; why is that?</i></p>	<p>Depending on the notes you provide on the requisition, the lab has a process for triaging. The result comments should reflect the details noted if significant to the result and recommendation.</p>
<p><i>Does the Cervical Screening Service send result letters to their clients positive for HPV Other prior to cytology result?</i></p>	<p>No, no letters are generated or mailed to inform about an HPV-OHR result.</p> <p>When the cytology result becomes available following the HPV-OHR result, the cytology lab result will guide next steps.</p>
<p><i>How long do clients of the Cervical Screening Service wait for screening result letters?</i></p>	<p>HPV Negative and HPV 16/18/45 positive result letters are issued daily, and it usually takes seven business days from the date of receiving the result to receiving a letter.</p>
<p><i>HPV-Related Abbreviations</i></p>	<p>HPV: Human papillomavirus</p> <p>HPV-OHR: other High-risk HPV as identified on HPV genotyping. Not HPV 16/18/45.</p> <p>HPV 16/18/45: HPV 16 and/or 18 and/or 45</p> <p>Positive HPV test HPV test showing high-risk HPV types on genotyping</p>