



Date: 31.1.2018

PRESS RELEASE: Smear test results delayed as changes to cervical screening programme impact NHS labs

An overhaul of the cervical screening programme, which will see the number of laboratories involved cut by up to 80% in England, is compounding backlogs and delays, top scientists are warning.

Both the English and Welsh governments have announced that a test for the Human Papilloma Virus (HPV) is set to replace cytology screening as the primary investigation within the NHS Cervical Screening Programme.

The overwhelming majority (99.7%) of cervical cancers are caused by persistent HPV infection, which leads to changes to the cervical cells.

Under the new process, samples will only be screened under a microscope for abnormal cells – cytology triage – if HPV is found.

The change, due to be implemented in England by the end of 2019, will see HPV testing and cytology screening centralised within just 10-13 laboratories. Around 50 are involved in the current programme.

A similar process is being undertaken in Wales, which will be the first of the four nations to change to HPV primary screening in September 2018. Scotland will move from seven laboratories to two by January 2020.

Ongoing uncertainty around which laboratories will be commissioned to do this work is leading to recruitment and retention issues, and compounding delays in the service, experts from the Institute of Biomedical Science (IBMS) have warned.

Sue Vryenhoef, a Consultant Biomedical Scientist and Hospital Based Programme Coordinator for cervical screening at Leicester Royal Infirmary and a member of the IBMS Cytopathology Advisory Panel, said: "Over the next two years the national cervical cytology screening programme will see one of the biggest changes to cervical screening that has occurred since organised screening began in the 1980s. This will be extremely challenging.

"There are 37-40 laboratories that will cease to be part of the screening programme by the end of 2019.

"One of the major challenges in the next two years is how to continue to provide a quality service to the women of England whilst this change is implemented.

"Currently many areas of England are not achieving the 14-day national turnaround time and women are experiencing significant delays for their results.

“The laboratories and PHE are working to try and reduce the waiting times for results but this is difficult and may not be achievable. Maintaining staffing levels will undoubtedly be a challenge because of the uncertainty around which laboratories will be undertaking HPV primary testing.

“Every effort will be made during this period to ensure that a quality service is provided and that staff are well supported. To achieve this there may be delays in women receiving results.”

Fellow Advisory Panel member Kirstie Rice, a Consultant Biomedical Scientist in cervical cytology at New Cross Hospital, added: “There is a huge team of dedicated professionals involved in the provision of cervical screening in the UK from call/recall, primary care, screening laboratories, colposcopy and commissioners all working together with the aim of providing a world-class screening service for women.

“The NHS cervical screening programmes throughout the UK has faced many challenges since 2004 with the introduction of Liquid Based Cytology, HPV vaccination, HPV Triage and test of cure testing, which has resulted in laboratory mergers and a consequential loss of experienced staff.

“The move towards roll-out of HPV primary screening has impacted on turn-around times for results due to an accelerated loss of staff from the service and difficulty in recruiting qualified replacement staff. Eighty percent of laboratories in England are now struggling to achieve turnaround time targets.”

But, despite the pressure the service is facing, the IBMS is at pains to emphasise the value of smear testing, and how important it is that women attend.

“The importance of regular cytology screening is well documented and the delays in getting results back to women should not deter anyone from having a smear test. Better to have a test and wait for a result than not to participate in the screening programme at all,” added Sue Vryenhoef.

Allan Wilson, Senior Chief Biomedical Scientist and Advanced Practitioner in cervical cytology at Monklands Hospital, said: “There is no doubt that the UK cervical screening programmes are the envy of many countries with their focus on quality standards.

“The programmes have directly led to a steady decline in incidence and deaths from cervical cancer. This success can only continue if women attend for smears. It is not a coincidence that the most significant risk factor in women who develop cervical cancer is that they have not attended regularly for screening.”

ENDS

Notes to Editor

Six laboratories in England have been piloting primary HPV testing since 2013, and in July 2016 following a review of the evidence, the UK National Screening Committee recommended the change be implemented country-wide.

About the Institute of Biomedical Science (IBMS)

The Institute of Biomedical Science is the leading professional body for biomedical scientists, support staff and students. For over 100 years we have been dedicated to the promotion, development and

delivery of excellence in biomedical science within all aspects of healthcare, and providing the highest standards of service to patients and the public.

For over 100 years we have been dedicated to the promotion, development and delivery of excellence in biomedical science within all aspects of healthcare, and providing the highest standards of service to patients and the public.

For more information visit the IBMS [website](#).

Our profession

The term 'Biomedical Scientist' is a legally protected title. Anyone using the title must meet Health & Care Professions Council (HCPC) standards and be HCPC registered to protect public safety.

Biomedical scientists mostly work in healthcare laboratories, they diagnose diseases and evaluate the effectiveness of treatment by analysing fluids and tissue samples from patients. In the UK alone, healthcare laboratories are involved in over 70% of diagnoses in the NHS, handling over 150 million samples every year.