How abnormal cells are treated
If you have an abnormal smear result, you may be advised to have a repeat smear test within the next few months and, if necessary, colposcopy.

Colposcopy is an examination of the cervix, using a colposcope. The colposcope looks like a pair of binoculars on a stand. It magnifies the cervix and vaginal wall so that the abnormal cells can be found. (See the pamphlet Colposcopy, code 1202.)

Ma te mohio ka ora
Knowledge improves health and well-being

An important message
See your doctor if you have:
- bleeding or spotting between menstrual periods
- bleeding or spotting after sexual intercourse
- bleeding or spotting after your menstrual periods have stopped (after menopause)
- persistent pain in your pelvis
- pain during sexual intercourse
- unusual discharge from the vagina. The discharge might be smelly, have changed colour from white to pink, brown, or green, or be streaked with blood.

These symptoms can happen for several reasons and rarely mean that you have cervical cancer. However, they should be checked by your doctor.

The National Cervical Screening Programme
The programme aims to prevent cervical cancer. All women who have cervical smears are part of the programme unless they say that they do not want to be.

The benefits of recording cervical smear test information include:
- ready availability of records to you, your smear taker and the laboratory reading your tests
- automatic reminder letters when you are overdue for having a cervical smear test
- checks to ensure the right follow-up after an abnormal smear test
- planning for the needs of different ethnic groups.

The programme is checked regularly to see that it is working well and it is measured against National Quality Standards to help all women get the best possible screening and treatment.

What information is collected?
The information collected by the programme includes your personal and contact details, relevant clinical history, cervical results and any treatment details. This confidential information is stored on a computer system called the NCSP Register, which is held by the National Screening Unit of the Ministry of Health. For more information about the legislation governing the NCSP, ask to see the booklet Cervical Screening: A Guide for Women in New Zealand, code 1328.

Any woman can withdraw from the programme at any time by filling in a form or by writing to the programme. In order to ensure no follow-up, your name, address, date of birth and national health index number will be kept, but the programme will not track your smear history.

You can rejoin the programme at any time, and your screening history with the programme will recommence with your most recent smear.

Further information
Read the free booklet Cervical Screening: A Guide for Women in New Zealand, code 1328, obtainable from your doctor or smear taker.

Visit our website: www.cervicalscreening.govt.nz

View this pamphlet and other health education resources at www.healthed.govt.nz

Contact:
- the National Cervical Screening Programme, freephone 0800 729 729
- your doctor or practice nurse
- Pacific health centre, marae-based or other Māori health centres
- your local women’s community health centre
- your local Family Planning Association (FPA)
- your local Cancer Society.

For more information contact the National Screening Unit, the Ministry of Health, phone Auckland (09) 580 9000, or Wellington (04) 496 2000.

Revised December 2007. Code 1256
The cervical smear test
You will be asked to lie on your side or your back with your knees bent up. The lower part of your body will be covered with a sheet. The smear taker gently opens the vagina with a speculum and carefully takes a sample of cells from the surface of the cervix with a small spatula or tiny brush. This process will take only a few minutes. The sample is then sent to a laboratory to be examined.

Some women may find the test uncomfortable but it does not usually hurt. If you are embarrassed or nervous, tell your smear taker how you feel. You can take a support person with you if you wish. It is best not to have the test during your period.

Liquid-based cytology
A different way of preparing a smear test, called liquid-based cytology (LBC), may be appropriate for some women. The sample is collected in a similar way to the conventional smear test. With LBC, the cells are put in a liquid instead of on a glass slide, and the liquid is sent for testing. Discuss this with your smear taker.

Cervical smear test results
Cervical smear tests are a very good screening tool, but they are not perfect. Some women may be asked to come back for another test if there were not enough cells on the slide (or in the liquid preparation) to test.

If you have an abnormal result you may be called back for other tests. An abnormal result hardly ever means cancer. If a woman has been told her smear is abnormal, she will have a further smear or be referred for colposcopy. The results from these tests may show there are no abnormal cells and no treatment may be needed.

See the pamphlet Cervical Screening: Understanding Cervical Smear Test Results, code 4598.

Getting your cervical smear test results
You will need to contact your smear taker to get your results. They will usually take from two to four weeks. The programme will only contact you if you have had an abnormal result. You will be informed by mail and also advised about any follow-up needed.

Who should have cervical smear tests?
All women aged 20 until they turn 70 who have ever been sexually active should have regular smear tests. Women who have had a hysterectomy (removal of the uterus) need to check with their doctor or smear taker whether they still need to have cervical smear tests.

Where do you go for a cervical smear test?
The choices include:
- your doctor or practice nurse
- the Family Planning Association (FPA)
- your sexual health service
- marae-based or other Maori health centres
- community health centres, eg, Pacific health centres and women’s health centres.

Most of the above services have women smear takers.

The cost of a cervical smear test will be what you would normally pay to see your doctor or nurse. Some community or primary health organisations offer a free or low-cost service.

How often do women need a cervical smear test?
Women are advised to have a cervical smear test every three years. Research shows very little extra benefit from having more frequent smears. Cervical cancer usually takes many years to develop. Any abnormal cells can be found and treated to stop them from becoming cancer.

If this is your first cervical smear test, or if you have not had a test for over five years, you will be advised to have a second test in a year’s time.

In some circumstances, you may be advised to have a test more often, eg, after an abnormal result.

Kia ora and welcome
Being part of the National Cervical Screening Programme and having cervical smear tests every three years can prevent cervical cancer. A cervical smear test shows if there are abnormal changes in cells on the surface of the cervix. (See Figure 1.)

Cervical cancer and the human papillomavirus
Cervical cancer is caused by the human papillomavirus (HPV). HPV is a sexually transmitted infection that affects almost all people at some point in their lives.

There are many types of HPV. Most HPV infections will clear up by themselves.

Only a few types of HPV will lead to abnormal, precancerous cells that could progress to cancer.

Although there is no treatment for persistent HPV infections, there is treatment for the abnormal cells that HPV can cause.

Having regular smear tests every three years is the best way of finding and treating abnormal cell changes and preventing cervical cancer from developing.

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