

FAQ for Primary Care Providers

HPV Self-Sampling Pilot Project

(Cervix Self-Screening)

Project Overview

The HPV Self-Sampling (also known as Cervix Self-Screening) Pilot Project is an Alberta Cervical Cancer Screening Program (ACCSP) initiative, funded by Alberta Health. The purpose of the project is to increase cervical cancer screening access and participation in three under-screened populations in Alberta: Indigenous, newcomer and rural/remote. The project aims to develop effective and sustainable HPV self-sampling strategies, laying the foundation for potential future expansion. 5,000 samples will be returned to the lab over the duration of the project.

The Testing Kit

The Cervix Self-Screening Test Kit allows patients to collect their own vaginal sample at home or in a place they feel comfortable. The kit includes a letter, the collection swab, plastic bag, lab requisition, postage paid return envelope, instructions, and brochure. The patient removes the swab from the tube, inserts the swab into the vagina, and rotates for 20 seconds to collect a sample. The swab is re-inserted into the tube and mailed to Provincial Public Health lab (ProvLab) to be tested for high-risk human papillomavirus (hrHPV). For more detailed instructions, visit screeningforlife.ca/cervical.



Kit Distribution

Cervix Self-Screening Test Kits will be distributed at a small number of community locations and through the mail. Kits are mailed after an eligible participant requests one by phoning the ACCSP at 1-866-727-3926 OR completing the online order form at screeningforlife.ca/cervical.

Eligibility Criteria

- Identify as Indigenous, or newcomer, or live in a rural/remote part of Alberta.
- 25 to 69 years of age.
- Have a cervix.
- Have a valid Alberta Health Care number.
- Have been sexually active at some time.

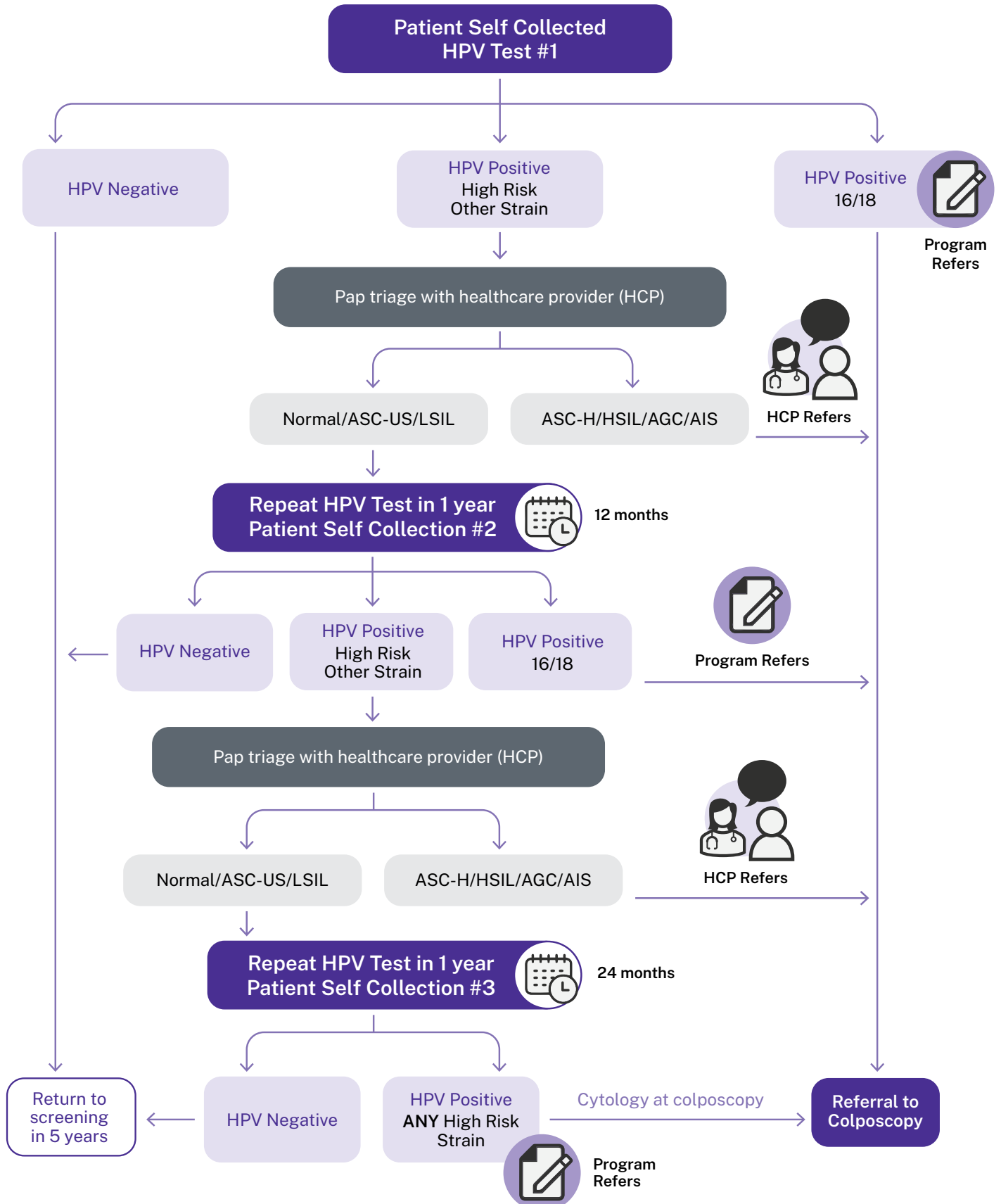
Participation is limited to those who meet all of the eligibility criteria.

Exclusion Criteria

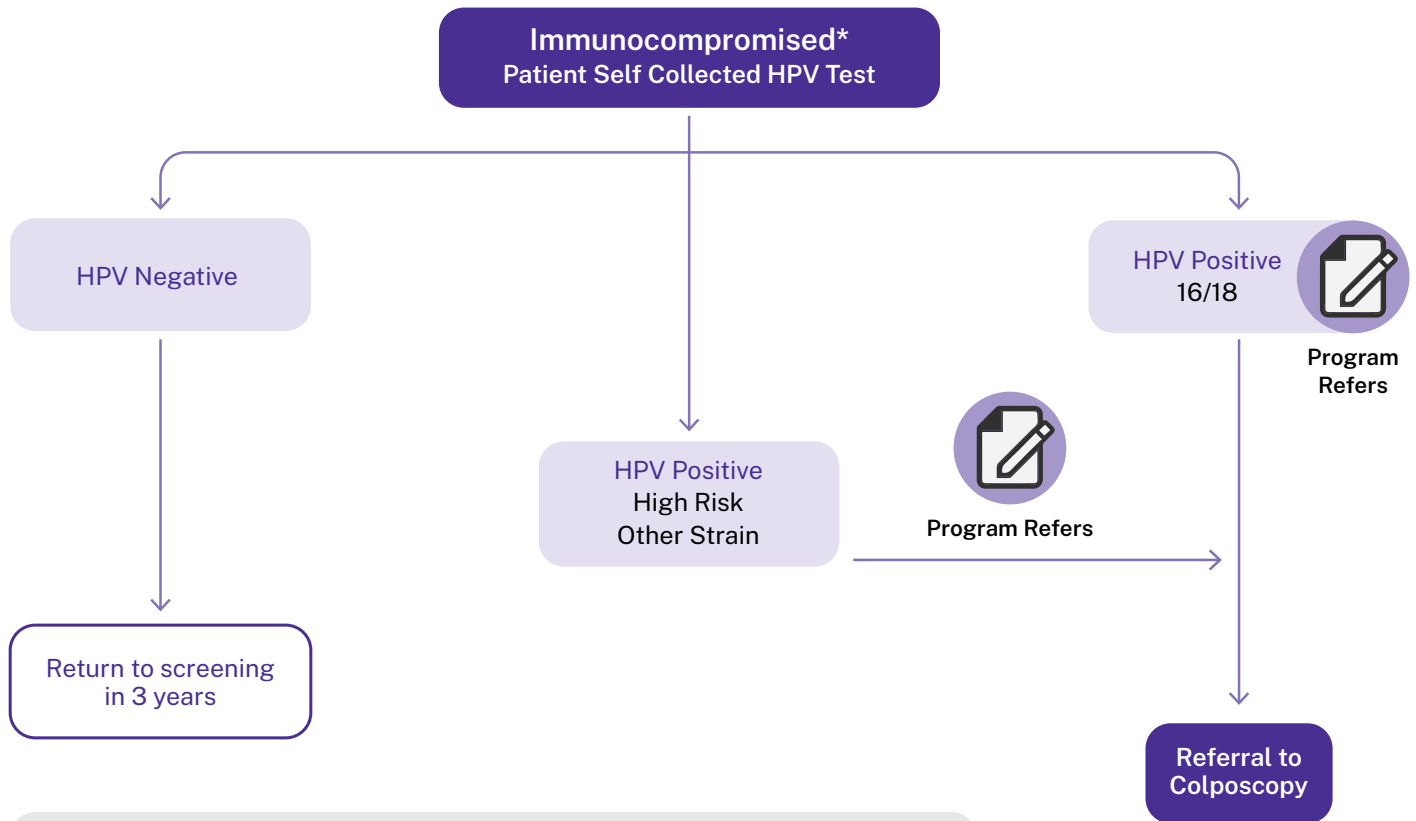
Self-screening is not recommended for patients with the following history:

- Pap test in the last 3 years **OR** self-screening in the last 11 months.
- Currently pregnant.
- Invasive cervical cancer.
- Abnormal result with previous Pap test.
- Currently in colposcopy care or discharged within the last 11 months.
- Experiencing abnormal vaginal bleeding (between periods, after intercourse or after menopause). These patients should see a healthcare provider to discuss cervical cancer screening, clinical care, and diagnosis.

HPV Self-Sampling Clinical Pathway



HPV Self-Sampling Clinical Pathway Immunocompromised Patients



* Patients with HIV, lymphoproliferative disorders, organ transplantation, long-term use of oral corticosteroids, or common/long-term use of immunosuppressant, tumor necrosis factor inhibitors. For more information please see the Cervical Cancer Screening Clinical Practice Guideline: actt.albertadoctors.org/media/w3vpspf2/cervical-cancer-screening-cpg.pdf

Frequently Asked Questions

Eligibility

Can I enroll my patient in the project?

No, but patients who may be eligible can call the ACCSP at 1-866-727-3926 (Monday to Friday, 8:00 am to 4:30 pm) to be assessed for eligibility.

How can my patient get a Cervix Self-Screening Test Kit?

Patients can call the ACCSP at 1-866-727-3926 (Monday to Friday, 8:00 am to 4:30 pm) to be assessed for eligibility and to request a kit. Eligible patients may also be invited to participate through a mailed letter or by attending a community event. Patients who have received an access code by mail or at a community event can order a kit online at screeningforlife.ca/cervical.

If my patient has had the HPV vaccine and is eligible for the project, should they participate?

Yes, because the vaccine does not protect against all HPV types that can cause cervical cancer. Even those who have been vaccinated against HPV should be screened for cervical cancer.

If my patient is pregnant should they participate?

No, patients who are pregnant are not eligible.

HPV testing

What is HPV testing?

HPV DNA testing is a molecular genotyping test that detects oncogenic HPV types that cause cervical cancer and its precursors.

What are the benefits of HPV testing compared to the Pap test?

- A higher detection rate for pre-cancerous lesions.
- Greater reassurance that women or people with a cervix with not detected hrHPV (normal) results have a low risk of developing cervical cancer.
- The potential to increase cervical cancer screening participation in unscreened women by offering at-home testing.

What is the difference between a Pap test and an HPV test?

- **HPV Test:** Detects genotypes of HPV that are more likely to cause cancer.
- **Pap Test:** Looks for abnormal cervical cells caused by HPV.

Does the kit test for anything other than HPV?

No, the kit only tests for high-risk types of HPV (HPV 16, HPV 18 and 12 other high-risk types). If a patient requires testing for other sexually transmitted infections (STIs), they should make an appointment with you.

What happens when the project comes to an end?

Once the project is complete, patients may need to see a healthcare provider for Pap testing if HPV testing or self-sampling is not yet available for population-based cervical cancer screening.

Kit Specimen Collection

Can a patient collect their sample if they have their period?

Ideally, patients should wait at least two days after their period has ended before collecting a sample.

Can a patient collect their own sample if they are using vaginal creams?

Yes.

What if my patient has difficulty collecting a sample?

The sample should be quick and easy for patients to collect. If your patient is having difficulty, they can:

- Visit screeningforlife.ca/cervical to view the Cervix Self-Screening Instructions.
- Call the ACCSP at 1-866-727-3926 (Monday to Friday, 8:00 am to 4:30 pm). Interpreter services are available.

Can I support my patient to collect the sample?

Yes, you can provide additional support or instructions to your patient but it is important that the patient do the self-collection.

If my patient has lost their kit or has a damaged kit, can they request a new one?

Yes, the patient can request a new kit by calling 1-866-727-3926 from 8:00 am to 4:30 pm, Monday to Friday.

If my patient needs an interpreter, are translation services available?

Yes, please have your patient call the ACCSP at 1-866-727-3926 from 8:00 am to 4:30 pm, Monday to Friday. Interpreters are available over the phone.

Frequently Asked Questions

How accurate is a sample collected by a patient?

Self-collected vaginal samples have similar accuracy to clinician collected cervical specimens.^{1,2}

Does the swab need to be inserted into the cervical os?

No, the sample is collected deep inside the vagina.

Results

Will I receive my patient's result?

If a patient lists a healthcare provider on the lab requisition or on the online order form, that provider will receive a copy of the result. The lab will send the results using the same process as other results.

Results will be available within 4 to 6 weeks after the sample is received at the lab. Results will also be viewable in Netcare and Connect Care. The ACCSP will also send providers a result letter (via fax or eFax) with recommended follow-up. Letters will only be sent when the patient has identified a healthcare provider.

High Risk HPV was detected, what do I need to do?

- If colposcopy is recommended, the ACCSP will attempt to contact the patient and complete a referral on your behalf. If the patient has not been contacted after 3 phone call attempts, the ACCSP will fax you a letter requesting that you complete the referral.
- If a triage Pap test is recommended, please contact your patient to schedule this. The ACCSP will send a special requisition form with the results letter to both the patient and the provider. Please ensure the Pap sample goes to the lab with this special requisition form.

How will patients get their HPV results?

Patients can access their results through MyHealth Records or MyAHS Connect. Results will be available 4 to 6 weeks after the sample arrives at the lab.

HPV detected results (abnormal):

- An ACCSP nurse will call all patients with results of HPV detected. Three attempts will be made to reach the patient by phone.
- A letter will be mailed to all patients with information about their abnormal results and the recommended follow-up.

HPV not detected results (normal):

- A letter will be mailed with information about the normal results and the recommended re-screening interval. Re-screening interval is 3 to 5 years, depending on the patient's immune status.

How are patients referred to colposcopy?

There are 2 ways patients can be referred to colposcopy.

Direct Referrals/Program Referrals:

This project is trialling a new referral process. This process aims to expedite referral to colposcopy. An ACCSP nurse will phone the patient to complete the referral. The healthcare provider will be copied on the referral. If the patient cannot be reached by phone, the patient and provider will be sent a letter advising the patient to see the healthcare provider for referral to colposcopy. Patients without a provider can phone the ACCSP for referral.

Healthcare Provider Referrals:

If colposcopy is required after a triage Pap test, please refer as per your normal process.

What should I tell a patient who asks how they got HPV?

HPV passes from person-to-person through sexual contact. There is no way to know when or from whom HPV was passed. A person can have HPV for many years before it develops into a cervical abnormality.

Where can I get more information on colposcopy for my patient?

Direct the patient to myhealth.alberta.ca/colposcopy to learn more, including 3 videos on what is colposcopy, what to expect, and results and treatment.

How does HPV get treated?

There is not a cure for HPV. However, signs of HPV (genital warts and abnormal cells), can be removed through colposcopy treatments. This is done by a colposcopist in a colposcopy clinic with cryosurgery, laser surgery or LEEP (loop electrosurgical excision procedure).

Will the treatment get "all" of the HPV?

The purpose of treatment in colposcopy is to remove high-grade dysplasia (abnormal cells) on the cervix caused by HPV. Follow-up visits will determine if all the dysplasia is treated. Patients treated for high grade dysplasia will have an HPV Test of Cure prior to discharge from colposcopy.

It's important for a patient to continue with screening (HPV self-sampling or Pap tests) once discharged from colposcopy. Colposcopy discharge information will be sent to the healthcare provider and will provide direction on follow-up screening.

1 Arbyn M, Smith SB, Temin S, et al. Detecting cervical precancer and reaching underscreened women by using HPV testing on self samples: updated meta-analyses. *BMJ*. 2018;363:k4823. Detecting cervical precancer and reaching underscreened women by using HPV testing on self samples: updated meta-analyses - PubMed (nih.gov)

2 Clark M, Horton J. Self-Sampling Devices for HPV Testing. *CADTH*. 2021. 1(12). <https://doi.org/10.51731/cjht.2021.229>.

Frequently Asked Questions

Partners

How does a person know which partner gave them HPV?

It's not possible to know when an HPV infection was acquired. With each new sexual contact there is the risk of HPV transmission. Most people who have ever had sexual contact will get an HPV infection but most will be unaware of it.

If a person is in a long-term, monogamous sexual relationship, how did they acquire HPV?

HPV can be acquired from any prior sexual relationship of either partner, and live in the body for many years. There is no sure way to know when or from whom an HPV infection is passed. Research shows the possibility that HPV can lie dormant and be reactivated in the future, so a person can have HPV for many years before it is detected.

HPV Information

Where can I learn more about HPV?

For more information on HPV visit:
screeningforlife.ca/cervical/cervical-cancer.

Should a patient inform their partner that high-risk HPV has been detected in their sample?

Discussing your health status with a partner is an individual decision. It's important to know that HPV transmission is a normal part of being sexually active, and that most sexually active people will have at least one HPV infection at some point in their lives. There is no cancer screening HPV test for males at this time.

HPV Vaccine

Can a patient still benefit from HPV vaccination if high-risk HPV has been detected?

Yes, patients who have been exposed to HPV may still benefit from receiving the HPV vaccine, since they are unlikely to have been exposed to all types of HPV in the vaccine. The HPV vaccine is effective at preventing high-risk HPV infections; those who have had the vaccine have a low chance of being infected or transmitting the infection. Choosing to get the HPV vaccine is a personal decision and should involve an informed discussion with a patient's healthcare provider.

In Alberta, people 26 years of age and under can get the HPV vaccine for free. For more information, visit myhealth.alberta.ca/topic/immunization/pages.

If a patient has had the HPV vaccine, do they still need regular screening?

The HPV vaccine does not protect against all types of HPV that can cause cervical cancer, therefore it's important the patient continues with routine cervical cancer screening.

Other Jurisdictions

Is self-sampling available in other jurisdictions?

Within Canada, several provinces have done similar HPV self-sampling projects. In January of 2024, British Columbia began offering HPV self-sampling for population-based screening.

Several countries outside of Canada offer HPV self-sampling for cervical cancer screening (Australia, Denmark, Sweden, Netherlands).

Contact the ACCSP

Questions?

For more information, call the ACCSP at 1-866-727-3926, Monday to Friday, 8:00 am to 4:30 pm.