



An tSeirbhís Náisiúnta Scagthástála  
National Screening Service

04 August 2020

Deputy Alan Kelly  
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Our Ref: HM/Communications

**PQ18975/20: To ask the Minister for Health when HPV screening will be rolled out for women under the CervicalCheck programme; and if he will make a statement on the matter.**

Dear Deputy Kelly,

I refer to the above Parliamentary Question.

The move to HPV cervical screening has been informed by a 2017 Health Information and Quality Authority (HIQA) Health Technology Assessment report that focused on the human papillomavirus (HPV) - a virus which can cause cell changes that can lead to cancer.

The report concluded that HPV cervical screening together with a HPV vaccination programme was the recommended strategy for the reduction in the incidence of cervical cancer and the prevalence of abnormal cells. This type of cervical screening has been introduced, to date, in Australia, England, Scotland, the Netherlands and Wales.

Ireland's CervicalCheck programme made the transition to HPV cervical screening on 30 March 2020. The move was taken following a review of international HPV primary screening implementations, ICT testing, the development of education and training materials, and extensive consultation with stakeholders (including patient representatives, primary care, acute hospital services and laboratories).

The HPV cervical screening test replaces the previous test as a better method of screening for changes that can lead to cervical cancer. It is a machine-based test that looks for the presence of HPV. If HPV is found, your test sample is checked for abnormal cells (cytology test). The previous test looked for abnormal cells first. But finding HPV first is a better way to screen for cervical cancer. If we find a HPV infection early, we can monitor it and offer treatment if there are any changes to the cells of the cervix.

If 1,000 people are screened, about 20 people will have abnormal (pre-cancerous) cervical cells. The previous test picked up cell changes in 15 of the 20 people. HPV cervical screening picks up cell changes in 18 of these 20 people, who are then assessed and treated.

The National Screening Service's (NSS) four programmes: BreastCheck, CervicalCheck, BowelScreen and Diabetic RetinaScreen were paused in March 2020. This move was taken on public health advice due to the situation with COVID-19. The pause in screening was put in place to protect participants and staff by complying with social distancing guidelines. In addition, the HSE temporarily redeployed staff and resources to the response to COVID-19. However, clinical staff continued to work within the programmes.

In June, the NSS announced a planned phased restart of its screening programmes. CervicalCheck and Diabetic RetinaScreen recommenced screening at the beginning of July.

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☎ 353 1 865 9300 ✉ [info@screeningservice.ie](mailto:info@screeningservice.ie) [www.screeningservice.ie](http://www.screeningservice.ie)



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Invitations and reminders for people who are now overdue screening will be sent on a phased basis, in line with programme prioritisation. In the case of cervical screening, this means that invitations and reminders were first sent to people who were overdue a non-routine repeat screening.

As of 01 August, standard recall letters are being issued to people who are on a 3- or 5-year recall and whose invites were delayed by the COVID-19 pandemic, starting with women who have been waiting the longest.

The continued recommencement of screening is underpinned by the assumption that there will be no worsening of the COVID-19 situation, and that restrictions will continue to ease.

A public information campaign on HPV cervical screening began in July to inform people of the changes to the cervical screening programme and communicate the benefits and limitations of screening.

Screening is a population health measure for people who are presumed healthy and do not have symptoms. The aim of a population screening programme is to reduce the incidence of disease in a population. Screening is not a diagnostic tool and no screening test is completely accurate.

All screening programmes are limited by the sensitivity of the test which is the ability to detect those with the disease in a population (true positives). Screening programmes are likewise limited by the specificity of the test which is the ability to detect those who are free of the disease (true negatives). Therefore, a negative test result is not a guarantee that a person is clear of the condition, or that they won't develop the condition between screening appointments.

The NSS continues to encourage all people who are between screening appointments, or waiting for rescheduled appointments, to be aware of, and act upon, any symptoms associated with the conditions for which they are being screened. We ask that those people contact their GP, who will arrange appropriate follow-up care.

For other queries patients can call the Freephone information line on 1800 45 45 55, email [info@screeningservice.ie](mailto:info@screeningservice.ie) or contact their clinic directly.

I trust this information is of assistance to you, but should you have any further queries please contact me.

Fiona Murphy  
Chief Executive  
National Screening Service

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