## Early re-screening

The National Cervical Screening Program seeks to maximise reductions in incidence of and mortality from cervical cancer. The design of the screening program defines two key parameters to achieve these objectives—target populations and screening intervals. Compliance with these parameters is crucial in maintaining the effectiveness of the program and in maintaining cost efficiency in order that resources may be used to increase population coverage. For most women who have a negative smear, the recommended interval before their next screen is 2 years.

This indicator is defined as the repeating of a Pap smear within 21 months of a negative smear report.

## This indicator:

- tracks over a period of 21 months a cohort of women from all states and territories, who
  had a negative smear result in February 1999, to determine the extent of early re-screening
  within the National Cervical Screening Program. The exception to this is Queensland where
  the index month is March. February was selected as the index month nationally because it
  has been shown to be a relatively stable month in terms of the number of women who are
  screened. This pattern has been consistent over a number of years, partly because fewer
  women take holidays at this time;
- measures the compliance with the recommended screening interval following a negative smear; and
- is important in assessing screening coverage around the recommended interval, as significant differences may reduce program effectiveness.

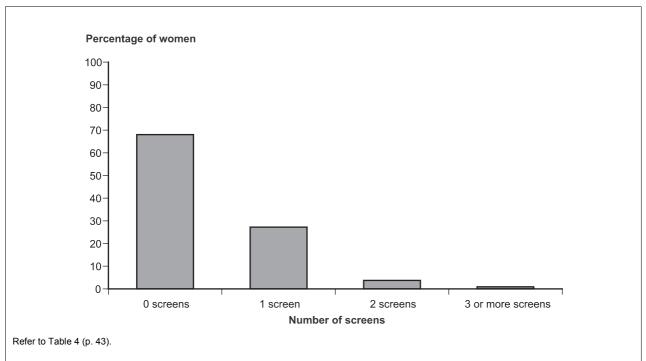
This indicator should be interpreted with caution as some early re-screening after a negative Pap smear report is appropriate and in accordance with the National Health and Medical Research Council (NHMRC) guidelines. Specifically, if a woman has a history of histologically proven high-grade abnormality, then annual screening is recommended. If a woman is being monitored after treatment or during the resolution phase of a low-grade abnormality, it is appropriate for her to be screened earlier than the 24 months interval.

## **Data issues**

The data published in previous reports for Indicator 2, early re-screening, are not directly comparable with the data in this report as this indicator has been modified to change the follow-up period from 24 months to 21 months. This change has been made because women often have their Pap smear taken at a time convenient to them and are likely to have their biennial screening immediately before the 24-month anniversary. Also for some women, prescriptions for oral contraceptives lapse at 22 months and the women are then likely to combine their Pap smears at their visit to the GP for renewing their scripts for contraceptives.

## **Indicator 2: Early re-screening**

Proportion of women re-screened, by number of re-screens during a 21-month period following a negative smear.



Note: The reference period for this indicator was the 21 months following the index month February 1999. For Queensland the index month was March 1999.

Source: AIHW analysis of state and territory Cervical Cytology Registry data.

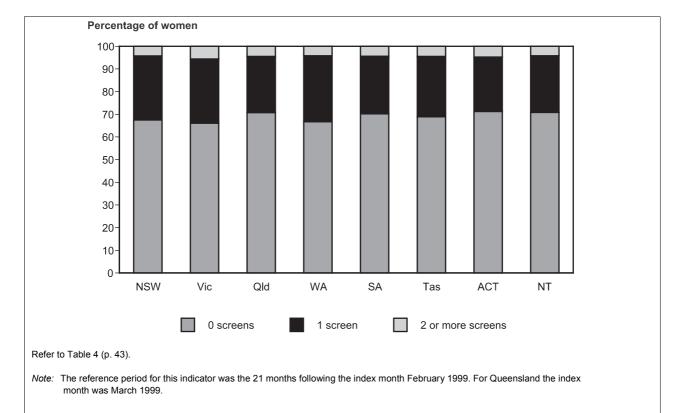
Figure 3: Proportion of women re-screened, by number of screens during the 21-month period following a negative smear in February 1999, Australia

21-month period	0 screens	1 screen	2 screens	3+ screens				
	(Per cent)							
Feb 1999–Nov 2000	68.0	27.3	3.8	0.9				

Note: Previously published data for this indicator refer to a cohort of women followed up for a period of 24 months. Therefore, the data published in previous reports are not directly comparable to the data published here.

This indicator, early re-screening, tracked over a period of 21 months a cohort of 175,723 Australian women who had a negative smear result in the index month to ascertain how many of them had early repeat screens.

• Of these women 68% were not re-screened in the follow-up period, 27% had one additional screening, 3.9% two additional screenings and less than 1% had 3 or more additional screenings.



Source: AIHW analysis of state and territory Cervical Cytology Registry data.

Figure 4: Proportion of women re-screened, by number of screens during the 21-month period following a negative smear in February 1999, states and territories

No. of screens	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Australia	
	(Per cent)									
0 screens	67.5	66.1	70.8	66.8	70.2	68.9	71.3	70.8	68.0	
1 screen	28.3	28.3	24.7	29.1	25.4	26.6	24.0	25.0	27.3	
2 or more	4.2	5.6	4.5	4.2	4.5	4.4	4.7	4.2	4.7	

- Over 70% of the women in Queensland, South Australia, the Australian Capital Territory and the Northern Territory who had a negative Pap smear result in the index month had no additional screenings during the follow-up period of 21 months.
- The lowest proportion of women who had additional smears was in the Australian Capital Territory (28.7%) and the highest was in Victoria (33.9%).