

# **HIV & your Cervix**

Looking after your cervical health



It's recommended you have a review of your cervical screening history with your doctor to make sure you are up to date with the recommended three-yearly screening guidelines for people living with HIV.

### The Facts

- Human Papillomavirus (HPV) is a common virus that can be passed through skin to skin contact, usually during sexual activity.
- Most people only know they have been exposed to HPV if they develop genital warts (which are caused by some HPV types) or if they have HPV detected on a cervical screening test (CST), previously known as Pap Smear but now replaced by a more accurate and modern test to detect HPV.
- Most of the time HPV clears up by itself and we never knew we had it.
- Sometimes HPV doesn't clear itself and remains in our body, which has the risk of causing small cell changes, called precancers which can go on, usually over a long time, to develop into cancer. HPV is a known risk factor for developing almost all cervical cancers.
- For women and people living with HIV who have a cervix, the risk of developing cervical cancer is roughly five times higher than people who are HIV-negative.
- Women and people living with HIV who have a cervix, are also at greater risk for other HPV-related cancers of the head and neck, vulvar, vagina and anus. Ask your doctor about other HPV-related cancers.

It is recommended that people living with HIV have a cervical screening test every three years

#### **HPV Vaccination**

- Some types of HPV can be prevented by vaccination.
- You may have already received the <u>HPV vaccine</u>. If you are unsure or have not received the HPV vaccination, we recommend you discuss your HPV vaccination options with your doctor.
- It is recommended that all women and people living with HIV who have a cervix, receive the <u>HPV vaccination</u> (<u>Gardasil9</u>). This is a new vaccine that reduces your risk against nine HPV types. The previous vaccine protected you against four different types of HPV.
- If you are 19 years or over, or you were previously vaccinated with the older HPV vaccination, you can be revaccinated with the nine valent vaccine to provide further protection. The cost of the Gardasil9 vaccine is \$460 over the vaccination course.

# What's it like to get a cervical scan?

- The CST is usually collected in the same way as a Pap Smear test.
- The doctor or nurse will take you to a private room and ask you to remove your clothing below your waist and lie down on the bed. When you are comfortable the doctor or nurse will gently insert a speculum into your vagina so they can swab your cervix with a long small brush. It usually takes a few minutes.
- This is your CST. You can ask your doctor questions anytime and to explain how the test works.
- Once the swab is completed, your sample of cells will be sent to a pathology lab to look for HPV.
- Your doctor or nurse will explain to you how you will get your results. Results can take up to two weeks.
- There is a new option for collecting the sample yourself. This is available to people aged 30+ who have never been screened, or are two or more years overdue for screening, and who are not comfortable with a speculum. This test contains vaginal cells only which can only be tested for HPV, whereas a sample taken by health providers contains cervical cells which can also be tested for HPV. If the test is positive, the same sample can be used to check whether there are abnormal cells. Samples taken by health providers are more accurate. If this option is suitable for you, talk to your health care provider.

If you have received the HPV vaccination, you'll still need regular CSTs as the vaccination does not protect you from all types of HPV virus.

## Cervical screening guidelines

- It is recommended that women and people living with HIV who have a cervix, and who are between the ages of 25–75 years, have a CST every three years if your last test result was normal (i.e. HPV-negative).
- If you are aged between 20–24 years and have lived with HIV for five years or more, you might need to have the cervical screening test sooner. Talk with your HIV specialist for advice about a CST.
- If you have unexplained vaginal bleeding, experience pain during sex, bleeding after sex and/or persistent discharge, talk with your HIV specialist as soon as possible, regardless of your age and previous CST result.
- If you have a Medicare card, and visit a clinic that bulkbills, your CST may be free of charge.

## Screening reminders

- Women and people living with HIV who have a cervix, are recommended to get a CST every three years. It might be a good idea to write down the year and month you are next due for a cervical screen and save it in your calendar or keep it down somewhere safe.
- You may also receive a reminder in the mail from the <u>National Cancer Screening Register (NCSR)</u>. You can call the NCSR on 1800 627 701 to check if you are registered, access your screening status and history, defer your next screening date or ask not to receive reminders.

## Checklist to discuss with your doctor

- 1. Guidelines for cervical screening for women and people living with HIV who have a cervix
- 2. HPV Vaccination
- 3. Screenings Reminders
- 4. Vaginal, vulvar and anal screening for HPV-related cancers



For more information phone 02 8357 8386 or 1800 245 677 (freecall) or visit www.positivelife.org.au

