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25 January 2021

## Important Update - changes to the clinical management of women at Intermediate Risk within the National Cervical Screening Program

Dear ASCCP members,

Changes to the Guidelines for the clinical management of women at Intermediate Risk of cervical cancer will come into effect from **1 February 2021**.

This follows the Cancer Council Australia Clinical Guidelines working party review of national data from the first two years of the renewed program.

A review of the national clinical program data shows that women at **Intermediate risk** whose follow-up test is HPV (not-16/18) positive, Liquid Based Cytology prediction negative, possible or low grade squamous intraepithelial lesion will have a low likelihood of histologically-confirmed high grade squamous intraepithelial lesion (CIN2/3) or worse.

Please note that it is now recommended that:

**Women with a 12-month follow up HPV (not-16/18) result with LBC prediction negative, pLSIL or LSIL (Intermediate risk result) should be recommended to undertake a further HPV follow up test in 12 months' time following their previous HPV test instead of referral to colposcopy.**

Some groups of women may be at higher risk of harbouring a high-grade abnormality and should be referred to colposcopy if HPV is detected at 12 months, regardless of the LBC result. These include:

- Women two or more years overdue for screening at the time of the initial screen
- Women who identify as being of Aboriginal or Torres Strait Islander
- Women aged 50 years or older

The Cervical Screening Pathway flowchart has now been revised and it provided as an attachment.

The new recommendations will come into effective from **1st February 2021**.

Find out more:

- Visit the [NCSP website](#)
- Read the [Frequently Asked Questions](#) for more on the changes
- Visit the [NCSP Clinical Guidelines online](#) – which will be updated on 1 February 2021

Please circulate this information as required and let us know if you have questions.

Regards,



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