

# **HPV Testing Every Five Years: Victorian Women's Reactions to Renewal Recommendations**

**Hiranthi Perera, Kate Scalzo and Robyn Mullins**  
**PapScreen Victoria**  
**[hiranthi.perera@cancervic.org.au](mailto:hiranthi.perera@cancervic.org.au)**

# Background

- **Recommended changes to the National Cervical Screening Program**
  - Human papillomavirus (HPV) testing as the primary screening test
  - Testing every five years
  - Commencement of screening at age 25
- **How do women interpret these changes?**
- **Implications for future communication strategies**

# Aims

- **Primary aim**
  - Explore how Victorian women interpret and react to the recommended changes
- **Secondary aims**
  - Explore Victorian women's knowledge about HPV and its role in cervical cancer
  - Preferences for communication channels and sources for message delivery

# Method

- **Eight focus groups**
- **Victorian women aged 25 - 59**

	Current screeners (< 2.5 years)	Late screeners (2.5 - 4 years)	Lapsed screeners (> 4 years)
25 - 34 years	1 group	1 group	1 group
35 - 49 years	1 group	1 group	1 group
50 - 59 years	1 group	1 group	

# Results

- **Good knowledge about current screening recommendations**
- **Relief about a longer interval**

*“I don’t mind that (screening) every five years personally ... it’s not a very pleasant thing to have to do, I’d be quite happy with that”  
(50-59, current screener)*

- **Concern about the risks posed by a new test and longer interval**

# Results

- **HPV testing may miss early cell changes**

*“If it’s just testing for that virus is it missing something else?” (50-59, current screener)*

*“If it’s an addition, fantastic. But if it’s replacing I’d be a bit hesitant. Do I have the option to say ‘Look, can I still continue to have Pap smears in between?’”  
(35-49, current screener)*

# Results

- **5 year interval is too long**

*“Then it’s going to get longer...you don’t get how quickly the two years goes until you get your letter. If it’s every five years you’d think ‘I had it done a couple of years ago, that’s alright’ and then all of a sudden it’s been eight years”*  
*(25-34, current screener)*

*“What does that mean for us if we go five years and find that we’ve got it (cervical cancer) and it’s been sitting there for three years?”*  
*(35-49, current screener)*

# Results

- **Once women understood the role of HPV in cervical cancer they were more accepting of the changes**

*“That’s telling me that it only needs to be done every five years, and it is more effective”  
(35-49, late screener)*

*“Oh, I’d be ok with the five years then”  
(25-34, current screener)*

*“The fact that it is picking it up before the Pap smear, that is reassuring”  
(50-59, lapsed screener)*

# Communication preferences

- **Comprehensive social marketing campaign**
- **Endorsed by a respected authority in the field**
- **Information also to be provided by:**
  - GPs
  - Direct mail

*“If we are now going to go to five years then I think they should really put a lot of promotion into it”  
(35-49, lapsed screener)*

# Conclusion

- **Explaining the link between HPV and cervical cancer is a crucial factor in helping women to accept changes to the screening program**
- **High importance was placed on social marketing, the role of GP's and direct communication channels**