

New Colposcopy referrals to a tertiary hospital on the Gold Coast based on HPV subtype and eligibility for HPV vaccination following the introduction of the Cervical Screening Test (CST) on 1 December 2017.



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Introduction

Following the introduction of the Cervical Screening Test (CST) on 1 December 2017, we have experienced a significant increase in the number of Colposcopy referrals (see Figure 1).

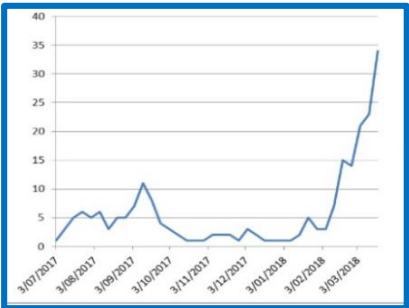


Figure 1: Rate of new referrals to Colposcopy at Gold Coast University Hospital following the introduction of the CST.

Objectives

To assess the relationship between eligibility for HPV vaccination and in the indication for referral to Colposcopy.

Methods

A retrospective audit of new Colposcopy referrals to a tertiary hospital on the Gold Coast because of a positive CST between 1 December 2017 and 28 February 2018. Referrals were separated into 3 groups:

- **Group 1:** Eligible for HPV vaccination (born after 1994)
- **Group 2:** Eligible for catch-up vaccination (born 1981-1993)
- **Group 3:** Ineligible for HPV vaccination (born 1980 or earlier)

HPV subtypes were separated into HPV 16/18, HPV 'Other' and both HPV16/18 and 'Other'. Separate Chi squared analyses were used to compare the rate of HPV subtypes within each group.

Results

There were a total of **143** new referrals

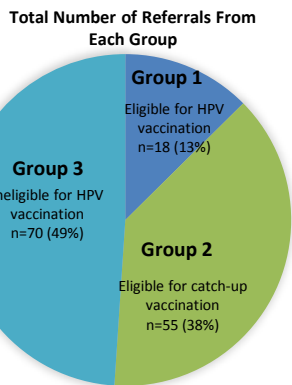


Figure 2: Total number of referrals from each age group category (based on eligibility for HPV vaccination)

Group 1 had the highest rate of HPV 'Other' (n=14, 78%) compared with Group 2 (n=26, 48%) and Group 3 (n=15, 21%), p<0.001

Group 3 had a significantly higher rate of HPV 16/18 only positive results (n=44, 63%) compared with Group 2 (n=20, 37%) and Group 1 (n=3, 17%), p<0.001

Conclusion

Those eligible for vaccination had the lowest number of referrals and a significantly lower rate of HPV 16/18 but higher rate of HPV 'Other'. Those ineligible for HPV vaccination had the highest number of referrals and a significantly higher rate of HPV 16/18. This is consistent with predicted post vaccination infection patterns.