



Encouraging Developments: Self-sampling (HPV)

Where HPV tests are available as part of the national programme, HPV self-sampling offers an additional option to improve cervical cancer screening coverage.

Since women may feel more comfortable or find it more convenient to take their own samples, rather than attending cervical cancer screening, self-sampling can help reach the global target of 70% coverage of screening by 2030.

Self-sampling, also known as 'self-testing', is an exciting innovation in screening (secondary prevention), which is being trialled in different settings across the world but is not yet widespread. It means that a woman takes a sample of her own cells to test for HPV, rather than requiring a healthcare professional to carry out the process, and no follow up would be required if the HPV test result returned negative.

Why self-sampling?



Evidence suggests that self-sampling could be an effective way of increasing uptake and that many women who are overdue, or actively choose not to attend cervical screening, could be interested in HPV self-sampling. Self-sampling has great potential for removing cultural and societal barriers of fear and stigma around going to the clinic.

Self-sampling is private, convenient, time and, cost-effective, more comfortable, and user friendly.

How does it work?



The process differs slightly from country to country but usually a participant takes a vaginal swab using a long cotton bud or a soft brush to collect the sample. This often takes place at home and is then sent off to be tested for HPV. Women who test positive for HPV would be notified, by phone, text or email, and would be invited to have a sample taken by a health professional for further screening.



Studies are taking place all around the world to investigate if HPV self-sampling test kits may increase screening for and early detection of cervical cancer. Countries leading the way include Australia and Denmark.

In 2018, 33 studies were combined in a meta-analysis by the BMJ (93% of participants were in high income countries). It found that participants who took their own samples were twice as likely to accept HPV screening. This was especially the case when HPV self-sampling kits were sent directly to women's homes or offered door-to-door by a health worker, compared to when they were offered on-demand. However, we still face the ongoing issue that whether samples are collected by health workers or individuals themselves, many people with a positive result do not return for clinical assessment and treatment of cervical lesions. [Read more here.](#)

Where can I learn more about HPV self-sampling?

WHO recommends that HPV self-sampling should be made available as an additional sampling approach in existing cervical cancer screening services, for women aged 30-60 years. WHO have created a great **resource**, to get you thinking about what factors to consider to ensure success when planning and introducing HPV self-sampling.



About Cervical Cancer Action for Elimination

Cervical Cancer Action for Elimination (CCAIE) is a community of organizations and individuals working together to accelerate global progress towards cervical cancer elimination. CCAIE builds connections and synergies between organizations advocating for cervical cancer elimination regionally and globally. It provides a forum for sharing information and resources, as well as amplifying the work of civil society and its shared messaging across the world. **To learn more about cervical cancer elimination, please visit <https://cervicalcanceraction.org/>**

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