

This brochure will help you understand more about your Pap smear, the testing process and the results.

The purpose of a Pap smear.

The purpose of a Pap smear is to detect abnormal pre-cancerous cells (cells which may have the potential to develop into cancer). If such cells are identified in a Pap smear, further investigations can be performed to clarify the severity of the abnormality. In most cases this leads to early and effective treatment of the abnormality, and the risk of development of cervical cancer is greatly reduced.

When you need a Pap smear.

If you've ever had sexual intercourse you should have regular Pap smears, regardless of how many partners you've had and even if you're not currently sexually active.

Your first smear is at 18 years of age or 2 years from first intercourse. You should then have one every two years until you are 70 years of age. In most instances smears are no longer recommended after hysterectomy but be advised by your doctor.

Reminder systems exist, which you can choose to utilise, in order to receive a reminder note when your next smear is due.

If you have any unusual symptoms, such as abnormal bleeding, spotting or discharge, you should see your doctor regardless of the result of your last smear.

Medicare rebates are available for all conventional Pap smears, no matter how often they are taken.

The taking of a Pap smear.

The smear is taken during a vaginal examination. An instrument called a speculum is inserted into your vagina so that the cervix is clearly visible. A small spatula or brush is then used to gently remove cells from the surface of the cervix.

The cells are then smeared on a glass slide and sent to the laboratory for examination. The examination is carried out by highly trained scientific and medical staff to ensure the results are as accurate as possible.

A report is then sent to your doctor.

Results.

Results of Pap smears fall into three broad groups:

- Normal or negative (about 90% of results).

This means there are no abnormal cells seen on the Pap smear slide.

- Abnormal or atypical (about 5-10% of results).

The test shows that there are abnormal cells present, with or without changes of a genital virus (HPV).

Most abnormal smear reports refer to low grade changes in cervical cells, and the only action required is to repeat the smear in 12 months.

Often these low grade changes disappear without the need for further investigation. If they persist then a colposcopy will be recommended at the follow up smear.

In a small number of cases, high grade changes are suspected and, a colposcopic evaluation will be recommended rather than a repeat smear.

A colposcope is a specialised microscope which enables detailed inspection of the cervix. The procedure is usually conducted by a gynaecologist experienced in looking after women with abnormal Pap smear results.

If the colposcope confirms that there is an abnormal area, then a biopsy is performed. In this simple procedure, a small piece of tissue is removed and examined by a pathologist for diagnosis. At Symbion Laverty Pathology we have a team of pathologists with expertise in gynaecological pathology.

- Unsatisfactory (about 2-3% of results).

Sometimes, due to factors beyond anyone's control, the smear is impossible to interpret reliably.

In the case of an unsatisfactory result, you will need a repeat smear. Usually it will take place about three months after the first one.

Accuracy.

Regular Pap smears are essential throughout adult life. Pap smears have very good accuracy but are not perfect. Any one test may fail to detect an abnormality (a "false negative" result) for one of two reasons:

- The smear may not be fully representative of all the cells in the cervix, especially if an abnormal area is small or difficult to reach when the smear is being taken.
- The abnormal cells may be missed or misinterpreted during microscopic examination. This may occur when these cells are very few in number or because they are difficult to recognise as a result of poor preservation, bleeding or inflammation.

Fortunately, since abnormal cells are usually present for many years before actual cancer develops, almost all life threatening cancers can still be prevented if Pap smears are repeated regularly. In Australia it is recommended to have a Pap smear every 2 years.

The ThinPrep test.

In addition to the conventional Pap smear, Symbion Lavery Pathology offers the ThinPrep Pap test. When used in conjunction with the conventional Pap smear, ThinPrep improves Pap testing reliability through better sample processing and slidemaking.

It can lead to an overall reduction in:

- false negative results
- unsatisfactory reports (which would otherwise have required a repeat test).¹

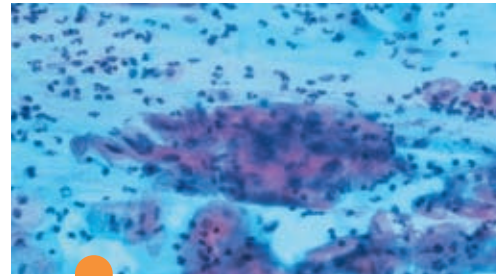
For a ThinPrep test, the Pap smear is collected in the usual manner with no additional samples being needed. Your doctor simply rinses the same sampling implement in a special vial of ThinPrep preservative solution and it is this sample that is sent to the laboratory where a machine-made slide is prepared.

The conventional smear and the ThinPrep specimen mean you have 2 specimens being assessed.

The ThinPrep test means that your results are likely to be more accurate. It does not, however, completely eliminate the chance of error.

While we now have a machine called the ThinPrep Imaging System, which targets areas on the ThinPrep slide for our Scientists to evaluate, it is important to realise that it is our highly trained scientific and medical staff who examine the slides and decide whether an abnormality is present.

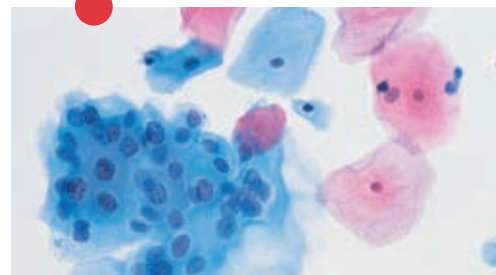
There is an additional fee for the ThinPrep test which is not claimable from Medicare.



With ordinary Pap smears, abnormal cells may be obscured by inflammation or blood.

There is no doubt that having a Pap smear every two years means that the chance of detecting pre-cancerous cell changes is increased, maximising your chance of successful treatment.

While the addition of a ThinPrep test helps to ensure an accurate diagnosis, conventional Pap smears alone are also very reliable.



The ThinPrep test produces a slide of higher quality by removing blood and mucus.

¹Roberts JM, Gurley AM, Thurloe JK, Bowditch R, Lavery CRA. Evaluation of the ThinPrep Pap test as an adjunct to the conventional Pap smear. MJA 1997; 167:466-469.

For more information, please contact your doctor or call Symbion Lavery Pathology, Tel 02 9005 7000
Or visit www.lavery.com.au

Committed to Women's Health, Symbion Lavery Pathology has developed a team of expert scientists and doctors who specialise in this difficult area. Taking and examining Pap smears is a complex, time-consuming and labour intensive process requiring extreme care, concentration and expertise. We have introduced thorough quality assurance measures that mean your Pap smear is analysed to the highest quality standard.

Cervical Cancer is largely preventable through regular Pap smears.

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understanding your pap smear

