The Challenge:
According to Cancer Research UK, cervical cancer is the second most common cancer in women under the age of 35. In the UK, 2,900 women a year are diagnosed with cervical cancer, that’s around eight women every day.

In 99% of cases, cervical cancer occurs as a result of a history of infection with high-risk types of Human papilloma virus (HPV). HPV is the name for a group of viruses that effect skin and the moist membranes linking the body. Often, infection with the HPV causes no symptoms.

All girls aged 12 to 13 are offered HPV vaccination as part of the NHS childhood vaccination programme. The vaccine protects against cervical cancer.

The Research:
In the UK, the national HPV immunisation programme was implemented in 2008 for girls aged 12-13 years. In addition, a catch up programme was implemented for older girls up to 18 years of age from 2009 to 2011. There was an uptake rate of 49.4% for the catch up programme.

Information about future uptake of cervical screening according to vaccination status is important in order to understand the impact of the vaccination programme and implications for a national cervical screening programme.

The Results:
In the group, 14,966 women (48.5%) had had the HPV vaccination and 14,164 (45.9%) women attended for cervical screening. Women who were unvaccinated were less likely to attend cervical screening.

Of those who attended for screening, 13.9% of vaccinated women had abnormal cells, compared to 16.7% of women who were unvaccinated.

It was also found that women who lived in areas with high levels of social deprivation were less likely to be vaccinated or attend cervical screening, compared to those who live in the least deprived areas.

The Impact:
The findings emphasise the need to promote further engagement with health services in more socially deprived areas with a focus on younger age groups to enhance the potential benefit of prevention programmes in early diagnosis and treatment long term. The HPV vaccination programme represents an ideal opportunity to convey the benefit of prevention programmes and reinforcement of this message is needed.

This study highlights the need for new strategies to address inequalities in cervical screening uptake. The results from this study are being used in an ongoing research project funded by Cancer Research UK that will use mathematical modelling to clarify the impact of the HPV vaccination programme on future cervical cancer incidence.

For more information visit: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3991313/

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A Study of the HPV Immunisation and Cervical Screening Programme in Wales
Institute researchers analysed data on a group of 30,882 women who had been offered the HPV vaccine in the catch-up programme.

Shantini Paranjothy and Sam Hibbits, Cardiff University
Helen Beer, Public Health Wales
Sinead Brophy and Mohammed Rahman, Swansea University
Jo Waller, Cancer Research UK

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