

### Review of NCSP data

In 2020, a review of the first 2 years of the renewed NCSP was conducted on data for women classified as having higher or intermediate risk of cervical cancer on their baseline Cervical Screening Test with subsequent colposcopy and/or histology recorded on the NCSR. The following data were included:

- all results for women at higher risk and intermediate risk from 1 December 2017 to 31 December 2019 (data extracted 14 January 2020)
- all colposcopy assessment and MBS forms coded and completed by the NCSR relating to visits up to 16 April 2020 (data extracted 22 September 2020)
- and all histology assessment and MBS forms coded and completed by the NCSR relating to samples collected up to 16 April 2020 (data extracted 22 September 2020).

For benchmarking, the outcomes for intermediate risk women whose follow-up test result is HPV (not 16/18) were compared with outcomes in those women at higher risk at baseline (Tables 6.1, 6.2).[1]

**Table 6.1. Outcomes for higher-risk group according to baseline test (based on April 2020 NCSR data)**

<b>Baseline test result</b>	<b>Histologically confirmed CIN2+</b>	<b>Histologically confirmed CIN3+</b>	<b>Invasive cervical cancer</b>
<b>HPV 16/18</b>	17.8–19.5%	12.6–14.0%	0.88–0.96%
<b>HPV (not 16/18) and LBC prediction pHSIL, HSIL, or glandular</b>	55.4–58.6%	35.9–38.5%	0.66–0.76%
Source: National Cervical Screening Program[1]			

Ranges reflect variation depending on whether or not histological outcomes are restricted to occurring within 6 months of referral.			
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**Table 6.2. Outcomes for women initially at intermediate risk, whose follow-up test result is HPV (not 16/18), according to LBC prediction at follow-up test (based on April 2020 NCSR data)**

<b>LBC prediction</b>	<b>Histologically confirmed CIN2+</b>	<b>Histologically confirmed CIN3+</b>	<b>Invasive cervical cancer</b>
<b>pHSIL, HSIL, or glandular</b>	54.1–55.8%	32.1–33.8%	0.32–0.37%
<b>negative, pLSIL or LSIL</b>	8.1–8.5%	3.1–3.4%	0.01–0.02%
Source: National Cervical Screening Program[2] Ranges reflect variation depending on whether or not histological outcomes are restricted to occurring within 6 months of referral.			

The analysis shows that, compared with other groups who are referred for colposcopy, the risk of CIN2+, CIN3+ and cervical cancer are much lower for women at intermediate risk whose follow-up test is HPV (not 16/18) and who have an LBC prediction of negative, pLSIL or LSIL. Within this group of women, we compared risks for women age <50 years with those for women age 50 years or older (Table 6.3).[1]

**Table 6.3. Outcomes for women initially at intermediate risk, whose follow-up test result is (HPV (not 16/18), and LBC prediction is negative, pLSIL or LSIL, according to age (based on April 2020 NCSR data)**

Age	Histologically confirmed CIN2+	Histologically confirmed CIN3+	Invasive cervical cancer
<50 years	10.08%	4.0%	0.02%
≥50 years	3.4%	1.5%	No cases identified
Source: National Cervical Screening Program[1]			

#### References:

1. National Cervical Screening Program (NCSP). [National Cancer Screening Register \(NCSR\) \[unpublished data\]](#). Department of Health, Australian Commonwealth Government; 2020 Apr 16. Report No.: [Search period: 1 December 2017 to 31 December 2019].