

### NORTHERN IRELAND CERVICAL SCREENING PROGRAMME

# ANNUAL REPORT & STATISTICAL BULLETIN 2009-2010





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### **Summary**

### **Cervical Screening Programme, Northern Ireland 2009-10**

This report refers to the period 2009/10

Women between the ages of 20 and 64 were invited for regular cervical screening under a Northern Ireland screening programme. This is intended to detect abnormalities within the cervix that could, if untreated, develop into cancer. Women were invited for screening every five years.

### **Coverage:**

- At 31 March 2010, 76.7% of eligible women in Northern Ireland had been screened at least once in the previous five years. The coverage has increased year on year, comparing to 75.4% in 2008/09 and 73.4% in 2007/08.
- 68,594 women aged 25-64 years were invited for screening by the regional call/recall centre between 1<sup>st</sup> April 2009 and 31 March 2010. This is a decrease of 1.3 % on the previous year.
- 132,839 women (all ages) had a screening test reported in 2009/10. 115,240 of these were in the 25-64 age group, a decrease of 8.5% on the previous year.

### **Laboratory activity:**

- Over 146,000 cervical samples were reported by cytology laboratories in Northern Ireland during 2009/10 from women of all ages.
- Less than 4% of samples were reported as inadequate, requiring approximately 5,000 women to have a repeat screening test. This compares to an inadequate rate of over 8% prior to the introduction of Liquid Based Cytology technique.
- 68.6% of samples were reported by laboratories within two weeks of receipt. 92.7% were reported within 4 weeks.

LABORATORY STANDARDS &	DATA FOR	2009-2010	
NHSCSP STANDARDS	2007-08	2008-09	2009-10
Inadequate as % of all samples (LBC only)	0.9-2.7% 1	0.9-2.7% 1	0.9-2.7% <sup>1</sup>
BNC/Mild as % of adequate samples	3.6-7.4%	4.0%-7.5%	3.9 - 7.4%
Moderate or worse as % of adequate samples	0.7-1.4%	0.8-1.5%	0.8-1.5%

Belfast and South Eas	t HSC Trust	:	
	2007-2008	2008- 2009	2009-2010
Screening programme samples	56,467	59,446	57,990
Inadequate rates as % of all samples	6.3%	2.1%	3.6%
BNA/Mild rate as % of adequate samples	7.6%	6.9%	5.3%
Moderate or worse rate as % of adequate samples	1.2%	1.3%	1.2%

Northern HSC	Trust		
	2007-2008	2008-2009	2009-2010
Screening programme samples	32880	35,270	31590
Inadequate rates as % of all samples	1.1%	2.0%	2.6%
BNA/Mild rate as % of adequate samples	4.7%	5.4%	5.7%
Moderate or worse rate as % of adequate samples	0.4%	0.8%	0.9%

Southern HSC	Trust		
	2007-2008	2008-2009	2009-2010
Screening programme samples	29552	33,810	30,107
Inadequate rates as % of all samples	7.98%	6.3%	5.5%
BNA/Mild rate as % of adequate samples	6.78%	5.8%	6.4%
Moderate or worse rate as % of adequate samples	1.40%	1.6%	1.7%

Western HSC 1	rust		
	2007-2008	2008-2009	2009-2010
Screening programme samples	35,217	32,499	27098
Inadequate rates as % of all samples	1.4%	2.03%	3.3%
BNA/Mild rate as % of adequate samples	5.7%	6.12%	5.6%
Moderate or worse rate as % of adequate samples	1.5%	1.41%	1.4%

<sup>&</sup>lt;sup>1</sup>The inadequate rate used above is not a national standard but a regional standard used by West Midlands QARC (UK). The measure has been calculated and developed from the regional KC61 2007/08 LBC data submitted by those laboratories whose workload consisted of LBC samples only. WMCIU have used this as a regional indicator of performance for LBC samples, whilst no National LBC inadequate standards are available. The last national standard for inadequate rates (2006-2007) was 5.9%-11.8% for conventional smears. Northern Ireland QARC has provided this LBC rate as a guide only.

## Introduction and overview of the programme

During the reporting period 2009/10, eligible women in Northern Ireland, aged 20-64, were invited for cervical screening every 5 years.

The aim of the programme is to detect abnormalities in cervical cells that could, if left untreated, develop into cancer.

The screening programme consists of three main operational elements:

Call and recall Cervical cytology Colposcopy

### Call and recall

The Business Services Organisation (BSO) provides the regional call and recall functions for the screening programme. This involves identifying those to be invited and issuing letters to attend for screening. An information leaflet on the programme is included with the invite letter. Women are invited to make an appointment with their GP practice or to attend a community family planning clinic to have their screening test.

Some GPs in Northern Ireland have opted out of this regional call and recall process and alternatively operate their own invitation system for women registered with their practice.

Women aged 65 or over, whose last three consecutive screening tests were reported as normal are removed from the call/recall programme. Women over 65 who require ongoing surveillance continue to be included to ensure they are not lost to follow-up.

Screening tests can also be undertaken opportunistically and not as the direct result of an invitation letter.

### **Cervical Cytology**

Cervical screening samples collected at GP practices and community clinics are sent to a cytology laboratory to be processed and reported. There are four cytology laboratories in Northern Ireland participating in the Cervical Screening Programme, located at:

- Belfast City Hospital
- · Craigavon Area Hospital
- · Antrim Area Hospital
- Altnagelvin Area Hospital

The Belfast laboratory provides the cytology service for both the Belfast and South Eastern Health and Social Care Trust areas.

The results of all screening tests are returned to the professional who took the test (sample taker) as well as the woman's GP. When the test result is available it is electronic notified to the call/recall centre to be included on the cervical screening database and form part of the woman's screening history, this also triggers the next screening due date set for that woman.

Most women receive a **normal** result and are recalled for another routine screening test in 5 years time (routine recall).

When the laboratory identifies cell changes that require further investigation, an **abnormal** result is issued. These may be high grade abnormalities (severe or moderate changes) or low grade abnormalities (mild or borderline changes). All high grade changes are referred to colposcopy. Low grade changes may be referred to colposcopy or managed by a repeat screening test in 6 or 12 months time.

In a small number of cases there are not enough cells in the sample for the laboratory to issue a result. These are reported as **inadequate** and a repeat test is advised.

### Colposcopy

Women referred for further investigation attend a colposcopy clinic provided by their local Trust. A colposcopy is an examination of the cervix using a lighted, low powered microscope (a colposcope). A biopsy may be taken during the examination for diagnosis, and treatment may also be carried out at the same time.

Women who have confirmed cancer are managed within the multidisciplinary team setting.

### **Screening data**

Standard data returns are used to collect and present data on the cervical screening programme:

KC53 – Information sourced from the call and recall system.

KC61 – Information on screening samples processed by the cytology laboratories. Data is sourced from the four screening laboratories.

The data from each of these returns is collated and published at the end of each financial year.

The production of a standard data return for colposcopy (KC65) is not yet possible in Northern Ireland. A regional information system for colposcopy is being rolled out across all colposcopy units and it is anticipated that colposcopy data will start to be available from 2011/12 onwards.

The standard data returns are used to support the quality assurance of the screening programme and facilitate benchmarking of the Northern Ireland programme against national standards and similar programmes elsewhere in the UK.

### Report structure

This report outlines the performance of the Northern Ireland Cervical Screening Programme for the year 2009/10. It contains data and statistics compiled from the standard data returns, reports on performance against national standards and describes significant trends in the programme over recent years.

The statistics are presented under the three key headings:

- Call and recall programme
- Cervical cytology
- Colposcopy

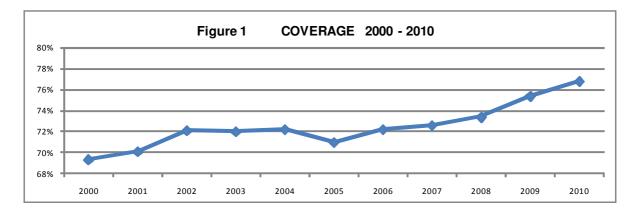
Detailed tables are included in the Data Tables section of the report.

As some of the terms used in the report are technical, a glossary of definitions has been included to support the reader's understanding.

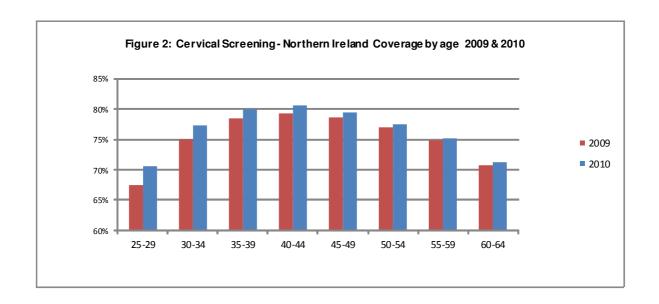
### **Call and Recall Programme**

### 2.1 Coverage (Data Tables 1, 2, 10, and 11)

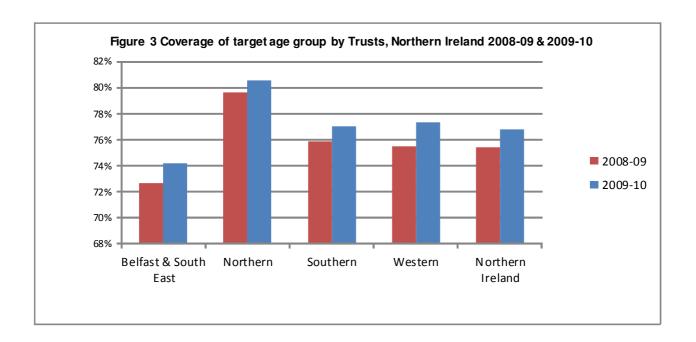
**2.1.1** Of the eligible women, (aged 25-64) at 31st March 2010, 76.7% were recorded as being tested within 5 years of their last adequate test (coverage). Coverage continues to improve in Northern Ireland and this is the fifth consecutive year it has increased. (Figure 1)



**2.1.2** Coverage has increased in every age group, although this is slightly less marked in older women. (Figure 2) The 80% coverage target was achieved in two age groups (35-39yrs & 40-44yrs) during 2009/10. This is the first time the target has been achieved in any age group in Northern Ireland



**2.1.3** Coverage of the target age group 25-64 varied between Trusts. The highest reported coverage was in the Northern Trust at 80.6%, This is the first time that the 80% coverage target has been achieved by any Trust in Northern Ireland. The lowest coverage was the combined Belfast & South East Trusts at 74.2%. All trusts showed an increase over the previous year. (Figure 3)

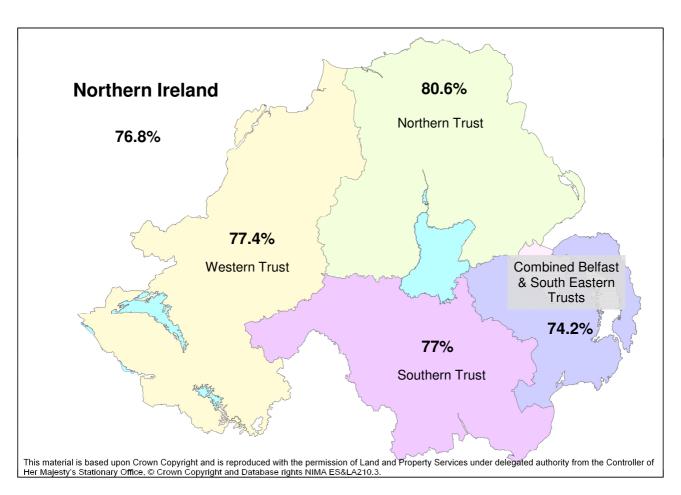


**2.1.4** When the time since last screening test is considered 10.8% of women aged 25-64 have been called but never attended for screening (figure 4) For another 6.4% it is more than five years since they had a screening test. 5.4% of women in the age group have been ceased from further screening invitations on clinical grounds.

Where GP's operate their own call recall system the cytology record is only activated when a woman has her first screening test result. Although the statistics indicate that 5.4% of women in the target age group have no cytology record, many of these women are likely to have been invited for screening by their GP but have never attended.

Fig	ure 4	Wo	Women who have been tested, (time since last test)							lled but not ted	
Number of women	number of women ceased for	less than 1.5	1.5 to 3	3 to 3.5	3.5 to 5	5 to 10	10 to 15	15 years	no adequate	never attended	no cytology record
resident (25-64)	clinical reasons	years	years	years	years	years	years	and over	sample	attended	
493331	26606	170063	125125	24072	39135	29943	158	73	2432	50482	25232
100%	5.4%	36.4%	26.8%	5.2%	8.4%	6.4%	0.03%	0.02%	0.5%	10.8%	5.4%

Source: Northern Ireland KC53 Parts A2 & A3



Source: Northern Ireland KC53 Parts A2

### 2.2 Invitations for screening (Data Tables 3 and 4)

2.2.1 Almost 85,500 women of all ages were invited for screening by the central call/recall system between 1 April 2009 and 31st March 2010. This is a decrease of 1.4% compared with 2008-09. Over 68,000 of these women were in the target age group were invited during this period. For 23.8% of these women this was either their first invitation or they had not previously attended (call). For 24.9% it was a routine recall and for 37.5% invitations were early recalls for surveillance. (Figure 5)

Figure 5 Number of women (aged 25-64) invited in the year 2009-2010 by type of invitation

			_	Repeat ir	less than 3 years	s for reasons of
Year	Total	Call	Routine Recall	Surveillance	Abnormality	Inadequate Sample
2008-09	69502	25.53%	26.08%	34.15%	8.09%	6.16%
2009-10	68594	23.78%	24.94%	37.53%	7.33%	6.42%

Source: Northern Ireland KC53 Part B

2.2.2 115,240 women in the target age range 25-64 were tested in the year. Of these, 45,107 were tested following an invitation from the central call/recall office (Figure 6). Over 70,000 women (60.9%) had screening tests not prompted by the programme, i.e. invited directly by their GP, or the test was initiated opportunistically by the woman or the sample taker without her necessarily having been invited. This compares to England where <20% of tests are carried out outside the programme, and probably reflects the fact that very few GP's in England operate their own call/recall systems.

Figure 6

Number of women tested in the year by invitation Northern Ireland - 2008-09 and 2009-10 (% Figures for England is shown in brackets).

		Total Number Tested	Number invited	%	Attended outside the programme	%
Target						
age group	2008-09	126514	46828	37% (79.6%)	79686	63% (20.4%)
(25-64)	2009-10	115240	45107	39.1% (80.3%)	70133	60.9% (19.7%)

Source: Northern Ireland KC53 Part C1

### **2.3 Test results (Data Tables 4, 5, 6, 7 and 10)**

**2.3.1** Some women have more than one test during the year for clinical reasons and the 132,839 women of all ages tested in 2009-10 generated 143,507 tests. (Table 7a)

About 3.7% of tests did not have a result, as the sample was "inadequate" i.e. it did not contain material suitable for analysis. (see section 3.1.2 for more information on inadequate samples).

For women tested again due to an earlier inadequate test (Table 7b), over 13% resulted in a repeated inadequate result, an increase on 2008-09 (10.6%).

Figure 7a test results 2009-10

Result of test	Number of tests	Percentage (%)
Inadequate	5,305	3.7%
Adequate	138,202	96.3%
Total	143,507	100%

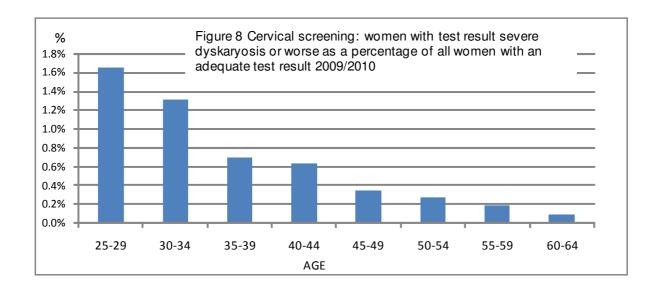
Source Northern Ireland KC53 Part c3

Figure 7b test result of tests where a repeat invitation was sent in less than 3 years due to a previous inadequate sample 2008-09 & 2009-10

	2008	8-09	2009	9-10
Result of test	Number of tests	Percentage (%)	Number of tests	Percentage (%)
Inadequate	468	10.6%	580	13.6%
Adequate	3,942	89.4%	3,672	86.4%
Total	4,410	100%	4,252	100%

Source Northern Ireland KC53 Part c3

2.3.3 Within the target age range the percentage of results which are severe or worse shows a distinct pattern by age, being highest at 1.65% for women aged 25-29, falling to 0.09% for women aged 60-64. (Figure 8)



**2.3.2** Of the 114,709 women aged 25-64, who had an adequate result in 2009-10, 92.7% were negative, 7.3% were abnormal. The detail of the test results are shown below. (Figure 9)

Figure 9 Results of adequate tests for women aged 25-64 Northern Ireland (Percentage data for England is shown in brackets).

Result*	2008-09	2009-10
Negative	93% (93%)	92.7% (92.8%)
Borderline dyskaryosis	3.8% (3.6%)	3.9% (3.7%)
Mild dyskaryosis	1.8% (2.0%)	2.0% (2.1%)
Moderate dyskaryosis	0.7% (0.6%)	0.7% (0.6%)
Severe dyskaryosis	0.6% (0.7%)	0.7% (0.7%)
Severe/?invasive carcinoma	0.02% (0.0%)	0.02% (0.0%)
?Glandular neoplasia	0.03% (0.1%)	0.03% (0.1%)
Total	100%	100%

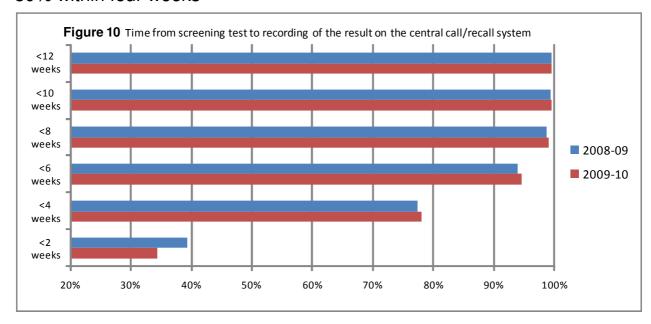
<sup>\*</sup> Most severe result

### 2.4 Time from screening to availability of result (Data Table 8)

**2.4.1** The time between the smear test being taken and the result being logged on the central call/recall system against the woman's cytology record is monitored.

During 2009/10 this process was completed within two weeks in 35.5% of cases.

Overall 78.2% of results were logged within 4 weeks, and 99.2% were completed within 8 weeks. (figure 10) The programme aims to complete 80% within four weeks



More detail is available in Data Table 8 which shows this data broken down by Trusts. Regionally the 4 weeks result availability ranged from 62% to 93%.

### 2.5 Recall status (Data Table 9)

**2.5.1** Recall status of "normal recall" is used only where the test result is negative. In 2009-10, 76.3% of women who had nothing other than a negative test result in the year had a normal recall status. Almost all the remaining women with negative results (21.6%) had a repeat recall status due to previous history; and 2.1% had a suspend recall status as they were currently under hospital care.

**2.5.2** A recall status of repeat means that a further test is required earlier, typically within 6 months of the previous test. This may be used where a test result is negative, inadequate, borderline or mild dyskaryosis. In 2009-10, 36.4% of women whose most severe test result in the year was mild dyskaryosis had a repeat recall status; the corresponding proportion for borderline was 78.4%, and for inadequate 95.9%. The remaining women in these three groups had a suspend recall status.

**2.5.3** A recall status of suspend means that recall has been suspended due to referral (Figure 11). This should be the only status used following a test result of moderate dyskaryosis or worse. In 2009-10, all women whose most severe test result in the year was moderate dyskaryosis or worse had a suspend recall status recorded.

Figure 11 Recall status by most severe screening result, Northern Ireland 2009-10

result of test	Normal %	Repeat %	Suspended %
	76	76	76
Inadequate	-	95.9%	4.1
Negative	76.3%	21.6%	2.1%
Borderline dyskaryosis	-	78.4%	21.6%
Mild dyskaryosis	-	36.4%	63.6%
Moderate dyskaryosis	-	-	100.0%
Severe dyskaryosis	-	-	100.0%
Severe/? Invasive Carcinoma	-	-	100.0%
? Glandular Neoplasia	-	-	100.0%

Source NI KC53 Part F

### **Cervical Cytology**

The following information is taken from the four laboratory Management Systems (LMS) in Northern Ireland. The data which has been verified by each laboratory may not have been gathered using the same criteria across the region. This section of the statistical bulletin provides information as a guide only and cannot be directly compared to nationally published data by the NHSCSP.

### 3.1 Samples examined (Data Tables 12, 13, and 14)

**3.1.1** Over 146,000 samples were examined by pathology laboratories in 2009-10, (Figure 12) about 9% less than in 2008-09. Approximately 134,000 (91% of the total) were submitted by GPs or by HSC community clinics—it is assumed that almost all of these samples would have been taken as part of the screening programme. A further 13,000 (9%) samples come from hospitals, most of these samples were probably taken from individuals with symptoms or cytological abnormality.

Figure 12 Number of samples examined by pathology laboratories by source of sample 2008-09 & 2009-10

					HSC			
	TOTAL	GP	HSC CLINIC	GUM	HOSPITAL	PRIVATE	COLP	OTHER
2008-09	147765	142466	5299	376	6458	836	2978	2792
2009-10	146785	129845	4559	265	6449	1048	3051	1568

**3.1.2** The rate of inadequate results for samples submitted from GP and community clinics increased in 2009/10. The trends in inadequate rates since 2002/03 are shown in figure 13. The marked reduction in inadequate rates since 2007/08 is a result of the introduction of liquid based cytology (LBC). There is a wide variation between individual labs in their reported inadequate rates - Ranging from 2.6% to 5.5%.

This may be explained by differences in thresholds being used for determining inadequate samples across Northern Ireland in the absence of an agreed national approach.

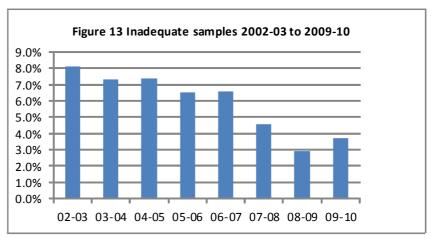


Figure 14: Number of GP and HSC clinic samples examined by pathology laboratories, number and proportion inadequate by year for women ages 25-64, Northern Ireland 2008-09 & 2009-10

Year	Number of samples examined	Number of inadequate samples	% inadequate samples	England
2008-09	128,436	3777	2.9%	2.5%
2009-10	114,464	4272	3.7%	2.8%

Source NI KC61 and NHSCSP England KC61

### 3.2 Results (Data Tables 12 and 13)

**3.2.1** Of the adequate samples submitted by GP and HSC Community Clinics for women aged 25-64, 92.3% were reported as negative. Borderline changes were reported in 3.9% of adequate tests, mild dyskaryosis in 1.7%, moderate dyskaryosis in 0.6% and severe dyskaryosis in 0.6%; suspected invasive carcinoma or glandular neoplasia were reported in less than 0.1% of samples.

Figure 15 Adequate samples (women ages 25-64) examined by pathology laboratories by result 2009-10 Northern Ireland 2009-10. Data for England, 2009-10 in grey for comparison only

Result of test	Number	Percentage	% (England)
Negative	102,519	93%	(93.2%)
Borderline changes	4,324	3.9%	(3.8%)
Mild dyskaryosis	1,952	1.8%	(1.9%)
Moderate dyskaryosis	676	0.6%	(0.5%)
Severe dyskaryosis	670	0.6%	(0.6%)
? Invasive Carcinoma	18	0.0%	(0.0%)
? Glandular Neoplasia	31	0.0%	(0.0%)

Source NI KC61 and NHSCSP England KC61

**3.2.2** Older women have a marginally higher proportion of tests reported as negative, but also the proportion of tests showing suspected invasive carcinoma or glandular neoplasia increases with age. Borderline changes and mild dyskaryosis occurred more frequently in samples from younger women; moderate dyskaryosis accounted for a higher proportion of results from women aged 20-29 than from women in other age groups; the proportion of severe dyskaryosis was highest in samples from women aged 20-34.

- **3.2.3** At laboratory level the percentage distribution of results, in particular in the proportion reported as borderline or mild was consistent across the four reporting laboratories.
- **3.2.4** The distribution of individual laboratory results is used for quality assurance purposes, as set out in sections 8.2 8.4 of the second edition of Achievable Standards for Cervical Cytopathology, NHSCSP publication No 1, May 2000.

Target ranges for laboratory reporting are set from the 10th and 90th percentiles of the distributions of three key indicators. The ranges for 2008-09 and 2009-10 are set out in (Figure 16) which report on women aged 25-64 tested in GP or HSC Community Clinics and include results from all laboratories. Ranges for 'percentage inadequate' will be reviewed and implemented when the phased roll out of LBC, which affects the inadequacy rate, is complete.

Indicator	10th - 90th per	centile range*
	2008-09	2009-10
Mild / Borderline as a % of adequate samples	4.0% - 7.5%	3.9% - 7.4%
Moderate or worse as % of adequate samples	0.8% - 1.5%	0.8% - 1.5%
PPV for CIN2 or worse	75.3% - 88.6%	74.2% - 90.3%
Source: NHS CSP KC61		
* Based on results from women aged 25-64 from GP & NHS Comm	unity clinics	
Source: NHS Information Centre Annual Bulletin ,Cervical Screenin	•	

**3.2.5** Average times from the receipt of the specimen at the laboratory until authorisation of the report was 68.6% within two weeks of receipt at the laboratory. Overall 92.7% were reported within four weeks.

Less than 1% of tests were reported more than 6 weeks after receipt. At laboratory level, there was wide variation within these timeframes. (See data table 14)

### **Definitions**

- **5.1 Coverage** is defined as the percentage of women in a population eligible for screening at a given point in time who were less than a specified period (the headline coverage figure relates to 5 years) since their last test producing an adequate test result. Women ineligible for screening, and thus not included in the numerator or denominator of the coverage calculation, are those whose recall has been ceased for clinical reasons (most commonly due to hysterectomy).
- **5.2 Local level coverage** is calculated for Health & Social Care Trusts (HSCT) Organisations. Although HSCT's do have a defined geographical boundary, the populations used are not those of women resident within the HSCT boundaries. Instead the populations of women for whom each HSCT is responsible are used. Responsible populations include women on the list of GPs who comprise the HSCT, regardless of which geographical HSCT they live in; where women on the call/recall register are not under the care of a GP at the time coverage is calculated, they are allocated to a HSCT on a geographical basis.
- **5.3** The term "abnormal" and "negative" used in the text to describe the result of a cytology test are defined as follows in terms of the categories used on the cytology report form HMR 101/5:

**Potential cancer:** HMR 101/5 cat. 5 (severe dyskaryosis/?invasive carcinoma) or cat. 6 (?Glandular neoplasia); women who have such test results are usually referred directly for further investigation, e.g. biopsy.

**Abnormal:** HMR 101/5 cat. 4 (severe dyskaryosis), cat. 3 (mild dyskaryosis), cat. 7 (moderate dyskaryosis) or cat. 8 (borderline changes); women who have an abnormal test categorised as result code 3 or 8 will usually be recalled early for another test. Women who have an abnormal test categorised as result code 7 will be referred immediately for further investigation, e.g. colposcopy. Potential cancers are also included.

**Negative:** HMR 101/5 cat. 2 (negative); women with a negative test result will be returned to the screening programme to be called again usually at the normal interval (5 years).

**5.4 A positive predictive value (PPV)** relating cytology with histology was calculated from outcomes of referral for tests with result moderate dyskaryosis or worse as follows:

### **Numerator:**

Number of tests with outcome of referral cancer, adenocarcinoma in situ, CIN3 or CIN2.

### **Denominator:**

Number of tests with outcome of referral known and not recorded as inadequate biopsy.

- **5.5 CIN** (cervical intra-epithelial neoplasia) CIN is not cancer but an indicator of the depth of abnormal cells within the surface layer of the cervix, and is divided into 3 grades. The higher the number/grade the more severe the condition:
  - CIN 1 one third of the thickness of the surface layer of the cervix is affected.
  - CIN 2 two thirds of the thickness of the surface layer of the cervix is affected.
  - CIN 3 full thickness of the surface layer of the cervix is affected (also known as carcinoma in situ).
- **5.6** For definitions of further medical terminology please visit the Cancer Screening Programmes website at

www.cancerscreening.hscni.net or www.cancerscreening.nhs.uk

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Table 1 NI Cervical screening programme: test status of women and coverage by age, 31st March 2010

		Number of wo	omen with rec	all ceased				
AGE AT 31/3/2010	Number of women resident	Ceased for clinical reasons	Ceased for AGE reasons	Ceased for OTHER reasons	Number of eligible women	LESS than 5 years since last adequate test	Women called but no adequate smear	COVERAGE less than 5 years since last adequate test %
UNDER 20	235179	0	0	0	235179	1137	20	0.48%
20-24	65132	2	0	0	65130	28394	256	43.60%
25-29	69019	10	0	0	69009	48655	482	70.51%
30-34	64805	60	0	1	64745	50076	390	77.34%
35-39	66464	366	0	5	66098	52801	337	79.88%
40-44	69525	1267	0	2	68258	55012	336	80.59%
45-49	67487	3212	0	6	64275	51117	302	79.53%
50-54	58810	5394	0	4	53416	41359	219	77.43%
55-59	49498	7050	0	6	42448	31947	179	75.26%
60-64	47723	9247	10808	3871	38476	27438	187	71.31%
65-69	41143	8580	11807	4572	32563	16199	193	49.75%
70-74	33945	6451	6427	357	27494	2454	161	8.93%
75-79	28140	2974	756	99	25166	387	36	1.54%
80 & OVER	42975	33	264	55	42942	144	25	0.34%
TARGET AGE GROUP (25-64)	493331	26606	10808	3895	466725	358405	2432	76.79%
TOTAL ALL AGES	939845	44646	30062	8978	895199	407120	3123	45.48%

KC53 Parts A2 and A3

#### Notes:

Source: NI KC53 Parts A2 and A3

<sup>(1)</sup> The denominator used in calculating the percentage is the resident population less those women with recall ceased for clinical reasons.

<sup>(2)</sup> For the period of this report NI policy for the screening programme was that eligible women aged 20-64 were screened at least once every 5 years.

Table 2 NI Cervical screening programme: test status of women by age (numbers), 31st March 2010

		Nui	mber of women : t	ime since last ad	dequate test (Ye	ars)		Women called but not tested		
Age of woman at 31/3/2010	less than 1.5 years	more than 1.5 but not more than 3 years ago	more than 3,but not more than 3.5 years ago	more than 3.5 but not more than 5 years ago	more than 5 but not more than 10 years ago	more than 10 but not more than 15 years ago	more than 15 years ago	no ade- quate sample	Women called but never attended	Women with no cytology records
Under 20	1016	112	3	6	2	0	0	20	5587	228433
20-24	19886	6485	863	1160	184	0	0	256	23893	12403
25-29	28030	14685	2389	3551	2408	1	0	482	11360	6103
30-34	26258	16320	2991	4507	3660	28	3	390	6904	3684
35-39	26523	18057	3249	4973	4143	38	3	337	5875	2901
40-44	26313	19567	3638	5494	4536	27	11	336	5626	2710
45-49	23282	18843	3475	5517	4471	21	20	302	5641	2703
50-54	17367	15427	3191	5364	4127	15	9	219	5299	2388
55-59	12201	12001	2747	4997	3417	17	14	179	4589	2285
60-64	10089	10225	2392	4732	3181	11	13	187	5188	2458
65-69	2852	5334	2012	6001	7676	7	14	193	5090	3384
70-74	362	839	398	855	8459	26	11	161	5	16378
75-79	89	119	44	135	999	22	17	36	1	23704
80 & over	37	36	17	54	298	6	38	25	0	42440
Target age group (25-64)	170063	125125	24072	39135	29943	158	73	2432	50482	25232
Total all ages	194305	138050	27409	47346	47561	219	153	3123	85058	351974

### KC53 Part A3

Table 2a NI Cervical screening programme: test status of women by age, 31st March 2010

	Number of women resident	Women with at least on	e adequate test result	recorded	Women called b	ut not tested	_	
AGE AT 31/3/2010		CEASED for clinical reasons	LESS than 5 years since adequate test	5 years or more since adequate test	Women called but no adequate sample	Women called but never attended	Women with no cytology records	
UNDER 20	235179	0.0%	0.5%	0.0%	0.0%	2.4%	97.1%	
20-24	65132	0.0%	43.6%	0.3%	0.4%	36.7%	19.0%	
25-29	69019	0.0%	70.5%	3.5%	0.7%	16.5%	8.8%	
30-34	64805	0.1%	77.3%	5.7%	0.6%	10.7%	5.7%	
35-39	66464	0.6%	79.4%	6.3%	0.5%	8.8%	4.4%	
40-44	69525	1.8%	79.1%	6.6%	0.5%	8.1%	3.9%	
45-49	67487	4.8%	75.7%	6.7%	0.4%	8.4%	4.0%	
50-54	58810	9.2%	70.3%	7.1%	0.4%	9.0%	4.1%	
55-59	49498	14.2%	64.5%	7.0%	0.4%	9.3%	4.6%	
60-64	47723	19.4%	57.5%	6.7%	0.4%	10.9%	5.2%	
65-69	41143	20.9%	39.4%	18.7%	0.5%	12.4%	8.2%	
70-74	33945	19.0%	7.2%	25.0%	0.5%	0.0%	48.2%	
75-79	28140	10.6%	1.4%	3.7%	0.1%	0.0%	84.2%	
80 & OVER	42975	0.1%	0.3%	0.8%	0.1%	0.0%	98.8%	
TARGET AGE GROUP (25-64)	493331	5.4%	72.6%	6.1%	0.5%	10.2%	5.1%	
TOTAL ALL AGES	939845	4.8%	43.3%	5.1%	0.3%	9.1%	37.5%	

KC53 Parts A2 and A3

Table 3 NI Cervical screening programme: number of women invited in the year by type of invitation and age, 2009-10

			Туре	of invitation		
Age at 31/3/2010	TOTAL	Call	Routine recall	Repe	at in < 3 years for	reasons of:
	TOTAL	Call	Houtine recail	Surveillance	Abnormality	Inadequate Sample
						_
Under 20	993	852	0	20	101	20
20-24	13620	10347	188	1157	1643	285
25-29	12700	5068	1723	3697	1605	607
30-34	11016	2600	2171	4645	1031	569
35-39	10130	1942	2180	4627	727	654
40-44	9682	1693	2458	4313	616	602
45-49	8916	1814	2425	3545	539	593
50-54	7119	1569	2325	2440	285	500
55-59	5789	1298	2319	1561	147	464
60-64	3242	325	1509	915	77	416
65-69	934	164	235	354	42	139
70-74	218	0	13	139	11	55
75 & over	80	0	5	54	7	14
Target age group (25-64)	68594	16309	17110	25743	5027	4405
	_			_		
Total all ages	84439	27672	17551	27467	6831	4918

KC53 Part B

Table 4 NI Cervical screening programme: number of women tested in the year by type of invitation and age, 2009-10

		Type of inv	itation						
Age at	Total			Repeat in <	3 years for re	asons of:	While recall	While recall	
31/3/2010	Total	Call	Routine recall	Surveillance	Abnormality	Inadequate Sample	suspended	ceased	Outside programme
Under 20	860	0	0	6	37	4	17	0	732
20-24	14161	3606	116	717	919	144	820	0	7839
25-29	18582	1777	1037	2461	999	307	1700	0	10301
30-34	17172	583	1263	3151	632	340	1373	0	9830
35-39	17051	399	1293	3281	461	331	969	0	10317
40-44	16895	304	1418	3066	352	301	712	0	10742
45-49	15068	238	1380	2459	305	246	549	1	9890
50-54	11245	172	1322	1666	162	222	346	0	7355
55-59	8092	103	1457	1029	105	242	190	0	4966
60-64	6685	86	1260	582	54	173	126	420	3984
65-69	1609	59	209	150	15	50	57	249	820
70-74	195	0	4	34	2	3	21	42	89
75 & over	85	0	0	11	0	1	15	8	50
Target age group (25-64)	115240	3786	10877	18561	3119	2189	6132	443	70133
Total all women	132839	7658	11215	19513	4115	2397	7090	754	80097

KC 53 Part C1

Table 5 NI Cervical screening programme: number of women aged 25-64 tested in the year by type of invitation and result, 2009-10

Result		Number of	women aged 2	25 - 64 tested ir	the year - 2009	)/2010			
of test				Repea	t in < 3 years for	reasons of:			
	TOTAL	Call	Routine recall	Surveillance	Abnormality	Inadequate Sample	While recall suspended	While recall ceased	Outside programme
Inadequate	4177	141	470	501	67	265	151	32	2550
Negative	103052	3264	9957	16781	1971	1817	4864	405	63993
Borderline	4382	156	260	878	525	60	524	6	1973
Mild dyskaryosis	2103	104	94	283	386	23	357	0	856
Moderate dyskaryosis	733	56	46	65	96	12	118	0	340
Severe dyskaryosis	735	61	43	44	73	12	111	0	391
Severe dyskaryosis ? invasive	25	2	2	3	1	0	5	0	12
?Glandular neoplasia	33	2	5	6	0	0	2	0	18
Total women tested aged 25- 64	115240	3786	10877	18561	3119	2189	6132	443	70133

### Source NI KC53 Part C2

Table 6 NI Cervical screening programme: number and percentage of tests in the year by type of invitation and result, 2009-10

Result of test	TOTAL	as a r	anult of						
Inadequate	TOTAL		as a result of:		eat in < 3 years for	reasons of:			T
Inadequate		Call	Routine recall	Surveillance	Abnormality	Inadequate Sample	While recall suspended	While recall ceased	Outside programme
	5005	040	400	F70	100	F00	004		0000
	5305 124817	240 6337	493 10260	576 19521	129 3652	580 3459	231 6973	54 735	3002 73880
Negative							979		
Borderline	6999 3983	502	262	1132 374	1144	131	760	10	2839
Mild dyskaryosis		369	100		889	47		0	1444
Moderate dyskaryosis	1249	116	48	91	217	18	241	1	517
Severe dyskaryosis	1078	91	45	54	130	16	248	0	494
?invasive Carcinoma	30	2	2	3	1	1	8	1	12
?Glandular neoplasia	46	2	5	6	0	0	8	0	25
Total	143507	7659	11215	21757	6162	4252	9448	801	82213
of tests by r	esult 5305	4.52%	9.29%	10.86%	2.43%	10.93%	4.35%	1.02%	56.59%
Negative	124817	5.08%	8.22%	15.64%	2.43%	2.77%	5.59%	0.59%	59.19%
Borderline	6999	7.17%	3.74%	16.17%	16.35%	1.87%	13.99%	0.39%	40.56%
Mild dyskaryosis	3983	9.26%	2.51%	9.39%	22.32%	1.18%	19.08%	0.00%	36.25%
Moderate dyskaryosis	1249	9.29%	3.84%	7.29%	17.37%	1.44%	19.30%	0.00%	41.39%
Severe dyskaryosis	1078	8.44%	4.17%	5.01%	12.06%	1.48%	23.01%	0.00%	45.83%
?invasive Carcinoma	30	6.67%	6.67%	10.00%	3.33%	3.33%	26.67%	3.33%	40.00%
?Glandular neoplasia	46	4.35%	10.87%	13.04%	0.00%	0.00%	17.39%	0.00%	54.35%
Total	143507	5.34%	7.81%	15.16%	4.29%	2.96%	6.58%	0.56%	57.29%
of tests by in	vitation				•		•	•	•
Inadequate	5305	3.13%	4.40%	2.65%	2.09%	13.64%	2.44%	6.74%	3.65%
Negative	124817	82.74%	91.48%	89.72%	59.27%	81.35%	73.80%	91.76%	89.86%
Borderline	6999	6.55%	2.34%	5.20%	18.57%	3.08%	10.36%	1.25%	3.45%
Mild dyskaryosis	3983	4.82%	0.89%	1.72%	14.43%	1.11%	8.04%	0.00%	1.76%
Moderate dyskaryosis	1249	1.51%	0.43%	0.42%	3.52%	0.42%	2.55%	0.12%	0.63%
Severe dyskaryosis	1078	1.19%	0.40%	0.25%	2.11%	0.38%	2.62%	0.00%	0.60%
?Invasive Carcinoma	30	0.03%	0.02%	0.01%	0.02%	0.02%	0.08%	0.12%	0.01%
?Glandular neoplasia	46	0.03%	0.04%	0.03%	0.00%	0.00%	0.08%	0.00%	0.03%
Total	143507	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%

Table 7 NI Cervical screening programme: results of adequate tests by age, 2009-10

Age of		Results (2)						
woman at	TOTAL(1)	Negative	Borderline	Mild	Moderate	Severe	Severe/	?Glandular
31/03/2010		(cat. 2)	(cat. 8)	dyskaryosis	dyskaryosis	dyskaryosis	?invasive	neoplasia
		<u> </u>		(cat. 3)	(cat. 7)	(cat. 4)	(cat. 5)	(cat. 6)
Under 20	846	636	103	86	16	5	0	0
20-24	14650	11617	1364	1156	328	183	1	1
25-29	19085	16265	1246	901	357	310	4	2
30-34	17631	15895	829	494	182	225	4	2
35-39	17416	16191	680	297	128	106	5	9
40-44	17275	16257	612	240	58	93	5	10
45-49	15427	14625	527	180	42	47	3	3
50-54	13057	12582	308	105	27	28	2	5
55-59	8143	7938	142	39	9	8	5	2
60-64	6675	6544	86	30	9	5	0	1
65-69	1573	1543	19	4	3	2	0	2
70-74	193	180	8	1	0	2	1	1
75 & over	85	81	1	0	0	0	0	3
Target (25-64)	114709	106297	4430	2286	812	822	28	34
Total all ages	132056	120354	5925	3533	1159	1014	30	41

Percentages

centages								
Under 20	100%	75.18%	12.17%	10.17%	1.89%	0.59%	0.00%	0.00%
20-24	100%	79.30%	9.31%	7.89%	2.24%	1.25%	0.01%	0.01%
25-29	100%	85.22%	6.53%	4.72%	1.87%	1.62%	0.02%	0.01%
30-34	100%	90.15%	4.70%	2.80%	1.03%	1.28%	0.02%	0.01%
35-39	100%	92.97%	3.90%	1.71%	0.73%	0.61%	0.03%	0.05%
40-44	100%	94.11%	3.54%	1.39%	0.34%	0.54%	0.03%	0.06%
45-49	100%	94.80%	3.42%	1.17%	0.27%	0.30%	0.02%	0.02%
50-54	100%	96.36%	2.36%	0.80%	0.21%	0.21%	0.02%	0.04%
55-59	100%	97.48%	1.74%	0.48%	0.11%	0.10%	0.06%	0.02%
60-64	100%	98.04%	1.29%	0.45%	0.13%	0.07%	0.00%	0.01%
65-69	100%	98.09%	1.21%	0.25%	0.19%	0.13%	0.00%	0.13%
70-74	100%	93.26%	4.15%	0.52%	0.00%	1.04%	0.52%	0.52%
75 & over	100%	95.29%	1.18%	0.00%	0.00%	0.00%	0.00%	3.53%
Target (25-64)	100%	92.67%	3.86%	1.99%	0.71%	0.72%	0.02%	0.03%
								•
Total all ages	100.00%	91.14%	4.49%	2.68%	0.88%	0.77%	0.02%	0.03%

Source NI KC53 Part D (1) Excludes women all of whose tests during the year were classified as "inadequate" (2) Most severe result in the year

### Table 8 NI Cervical screening programme: Time from screening test to recording of the result on the central call/recall system by HSC Trusts, 2009-10

1 APR 2009 - 31-MAR 2010	Northern Ireland	Belfast & South East HSC Trusts	Northern HSC Trust	Southern HSC Trust	Western HSC Trust
Less than or equal to 2 weeks	35.50%	6.3%	68.2%	46.6%	35.8%
>2 weeks up to 4 weeks	42.72%	55.6%	25.3%	40.4%	45.7%
>4 weeks up to 6 weeks	16.59%	27.6%	4.9%	8.8%	17.8%
>6 weeks up to 8 weeks	4.45%	9.3%	1.2%	3.1%	0.5%
>8 weeks up to 10 weeks	0.44%	0.7%	0.2%	0.6%	0.0%
>10 weeks up to 12 weeks	0.08%	0.1%	0.1%	0.2%	0.0%
Over 12 weeks	0.22%	0.4%	0.2%	0.3%	0.1%
otal:- number of results logged by Screening	140953	52901	32288	29761	26003

Source NI KC53 Part E

Table 9 NI Cervical screening programme: Recall status by most severe screening result and HSC Trusts, 2009-10

				<u> </u>		
result of test	recall status	Northern Ireland	Belfast & South East HSC Trusts	Northern HSC Trust	Southern HSC Trust	Western HSC Trusts
	Total	4164	1558	694	1249	663
Inadequate	Suspend	4.1%	3.7%	1.3%	4.0%	8.3%
	Repeat	95.9%	96.3%	98.7%	96.0%	91.7%
	Total	102610	39187	24211	20563	18635
Negative	Normal	76.3%	73.9%	87.4%	62.7%	82.2%
	Suspend	2.1%	2.3%	0.3%	1.1%	5.1%
	Repeat	21.6%	23.9%	12.3%	36.3%	12.7%
	Total	4430	1503	1122	1072	733
Borderline	Normal	0.0%	0.0%	0.0%	0.0%	0.0%
Borderline	Suspend	21.6%	22.7%	11.0%	32.3%	19.8%
	Repeat	78.4%	77.3%	89.0%	67.7%	80.2%
	Total	2286	917	406	483	480
Mild dyakaryania	Normal	0.0%	0.0%	0.0%	0.0%	0.0%
Mild dyskaryosis	Suspend	63.6%	61.5%	96.3%	59.2%	44.4%
	Repeat	36.4%	38.5%	3.7%	40.8%	55.6%
	Total	812	307	124	214	167
Moderate dyskaryosis	Suspend	100.0%	100.0%	100.0%	100.0%	100.0%
	Repeat	0.0%	0.0%	0.0%	0.0%	0.0%
	Total	822	287	130	214	191
Severe dyskaryosis	Suspend	100.0%	100.0%	100.0%	100.0%	100.0%
	Repeat	0.0%	0.0%	0.0%	0.0%	0.0%
	Total	28	11	5	8	4
Severe/? Invasive Carcinoma	Suspend	100.0%	100.0%	100.0%	100.0%	100.0%
	Repeat	0.0%	0.0%	0.0%	0.0%	0.0%
	Total	34	12	6	11	5
? Glandular Neoplasia	Suspend	100.0%	100.0%	100.0%	100.0%	100.0%
	Repeat	0.0%	0.0%	0.0%	0.0%	0.0%

Source NI KC53 Part F

Table 10 NI Cerv	vical screening p	orogramme: Ta	arget age grou	ıp (25-64), re	sults of tests by I	HSC Trusts 2009/10	)
HSC TRUST	Eligible Population	Number of women screened	Negative%	Borderline changes%	Mild dyskaryosis%	Moderate dyskaryosis%	Severe dyskaryosis or worse%
Northern Ireland	466725	114709	92.7%	3.9%	2.0%	0.7%	0.8%
BELFAST & SE HSC Trusts	185598	44538	93.2%	3.4%	2.1%	0.7%	0.7%
Northern HSC Trust	108520	26402	93.2%	4.2%	1.5%	0.5%	0.5%
Southern HSC Trust	93000	23167	91.4%	4.6%	2.1%	0.9%	1.0%
Western HSC Trust	79607	20601	92.3%	3.6%	2.3%	0.8%	1.0%

KC53 Parts A2 & D

Table 11 NI Cervical Screening Programme: Coverage by age group (25-64), and HSC Trusts 2008/09 and 2009/10											
200 <b>8</b> -09 2009-10											
HSC Trust ELIGIBLE POPULATION COVERAGE % ELIGIBLE POPULATION COVERAGE %											
NORTHERN IRELAND	461696	75.39%		466725	76.79%						
BELFAST & SE HSC Trusts	183829	72.63%		185598	74.19%						
Northern HSC Trust	107457	79.61%		108520	80.59%						
Southern HSC Trust	91378	75.88%		93000	77.05%						
Western HSC Trust         79032         75.53%         79607         77.37%											

KC53 Part A2 2008-09 & KC53 Part A2 2009-10

Table 12 NI Cervical screening programme Samples examined by pathology laboratories by source of sample and result of test 2009-10

Numbers	TOTAL	GP	NHSCC	GUM	NHS HOSP	PRIVATE	COLP	OTHER
	146785	129845	4559	265	6449	1048	3051	1568
Inadequate	5426	4653	151	13	396	39	131	43
Negative	127639	114282	3921	194	5183	839	2137	1083
Borderline Changes	7161	5869	228	27	462	87	324	164
Mild Dyskaryosis	4079	3159	153	21	255	60	278	153
Moderate Dyskaryosis	1288	995	55	4	73	13	96	52
Severe Dyskaryosis	1100	824	49	4	63	9	83	68
?Invasive Carcinoma	31	19	1	0	7	0	1	2
?Glandular Neoplasia	48	33	1	0	10	1	1	2
Unknown	13	11	0	1	0	0	0	1

Percentage by result	TOTAL	GP	NHSCC	GUM	NHS HOSP	PRIVATE	COLP	OTHER
Inadequate	3.7%	3.2%	3.3%	4.9%	6.1%	3.7%	4.3%	2.7%
Negative	87.0%	88.0%	86.0%	73.2%	80.4%	80.1%	70.0%	69.1%
Borderline Changes	4.9%	4.5%	5.0%	10.2%	7.2%	8.3%	10.6%	10.5%
Mild Dyskaryosis	2.8%	2.4%	3.4%	7.9%	4.0%	5.7%	9.1%	9.8%
Moderate Dyskaryosis	0.9%	0.8%	1.2%	1.5%	1.1%	1.2%	3.1%	3.3%
Severe Dyskaryosis	0.7%	0.6%	1.1%	1.5%	1.0%	0.9%	2.7%	4.3%
?Invasive Carcinoma	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%
?Glandular Neoplasia	0.0%	0.0%	0.0%	0.0%	0.2%	0.1%	0.0%	0.1%
Unknown	0.0%	0.0%	0.0%	0.4%	0.0%	0.0%	0.0%	0.1%

Percentage by source	TOTAL	GP	NHSCC	GUM	NHS HOSP	PRIVATE	COLP	OTHER
Inadequate	100.0%	85.8%	2.8%	0.2%	7.3%	0.7%	2.4%	0.8%
Negative	100.0%	89.5%	3.1%	0.2%	4.1%	0.7%	1.7%	0.8%
Borderline Changes	100.0%	82.0%	3.2%	0.4%	6.5%	1.2%	4.5%	2.3%
Mild Dyskaryosis	100.0%	77.4%	3.8%	0.5%	6.3%	1.5%	6.8%	3.8%
Moderate Dyskaryosis	100.0%	77.3%	4.3%	0.3%	5.7%	1.0%	7.5%	4.0%
Severe Dyskaryosis	100.0%	74.9%	4.5%	0.4%	5.7%	0.8%	7.5%	6.2%
?Invasive Carcinoma	100.0%	61.3%	3.2%	0.2%	22.6%	0.0%	3.2%	6.5%
?Glandular Neoplasia	100.0%	68.8%	2.1%	0.0%	20.8%	2.1%	2.1%	4.2%
Unknown	100.0%	84.6%	0.0%	7.7%	0.0%	0.0%	0.0%	7.7%

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Table 13 NI Cervical screening programme GP & HSC Trust Community Clinic samples examined by pathology laboratories, by result and age of women, 2009-10

Numbers				Borderline	Mild	Moderate	Severe	?Invasive	?Glandular	
	Total	Inadequate	Negative	Changes	Dyskaryosis	Dyskaryosis	Dyskaryosis	Carcinoma	Neoplasia	Unknown
Under 20	5,940	136	4,539	606	523	93	43	0	0	0
20-24	12,660	281	9,954	1,151	835	279	158	1	1	0
25-29	19,563	460	16,436	1,270	815	309	268	2	2	1
30-34	17,514	458	15,534	784	392	159	178	5	4	0
35-39	17,882	602	16,169	647	266	97	91	2	7	1
40-44	17,576	547	16,091	600	208	46	74	3	7	0
45-49	15,229	504	13,988	519	148	34	29	2	5	0
50-54	11,309	541	10,358	289	78	19	22	1	1	0
55-59	8,477	592	7,708	132	28	8	3	3	2	1
60-64	6,914	568	6,235	83	17	4	5	0	2	0
65-69	1,116	91	1,008	12	2	2	0	0	1	0
70-74	169	21	142	3	0	0	2	1	0	0
75 and over	49	3	41	1	0	0	0	0	2	2

Percentages				Borderline	Mild	Moderate	Severe	?Invasive	?Glandular	
-	Total	Inadequate	Negative	Changes	Dyskaryosis	Dyskaryosis	Dyskaryosis	Carcinoma	Neoplasia	Unknown
Under 20	5,940	2.3%	76.4%	10.2%	8.8%	1.6%	0.7%	0.0%	0.0%	0.0%
20-24	12,660	2.2%	78.6%	9.1%	6.6%	2.2%	1.2%	0.0%	0.0%	0.0%
25-29	19,563	2.4%	84.0%	6.5%	4.2%	1.6%	1.4%	0.0%	0.0%	0.0%
30-34	17,514	2.6%	88.7%	4.5%	2.2%	0.9%	1.0%	0.0%	0.0%	0.0%
35-39	17,882	3.4%	90.4%	3.6%	1.5%	0.5%	0.5%	0.0%	0.0%	0.0%
40-44	17,576	3.1%	91.6%	3.4%	1.2%	0.3%	0.4%	0.0%	0.0%	0.0%
45-49	15,229	3.3%	91.9%	3.4%	1.0%	0.2%	0.2%	0.0%	0.0%	0.0%
50-54	11,309	4.8%	91.6%	2.6%	0.7%	0.2%	0.2%	0.0%	0.0%	0.0%
55-59	8,477	7.0%	90.9%	1.6%	0.3%	0.1%	0.0%	0.0%	0.0%	0.0%
60-64	6,914	8.2%	90.2%	1.2%	0.2%	0.1%	0.1%	0.0%	0.0%	0.0%
65-69	1,116	8.2%	90.3%	1.1%	0.2%	0.2%	0.0%	0.0%	0.1%	0.0%
70-74	169	12.4%	84.0%	1.8%	0.0%	0.0%	1.2%	0.6%	0.0%	0.0%
75 and over	49	6.1%	83.7%	2.0%	0.0%	0.0%	0.0%	0.0%	4.1%	4.1%

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Table 14 NI Cervical screening programme, Samples examined by pathology laboratories: Time from receipt of sample to authorisation of report by region, 2009-10

**Percentages** 

	Northern Ireland	Belfast & South East HSC Trusts	Northern HSC Trust	Southern HSC Trust	Western HSC Trust
Total	146788	57993	31590	30107	27098
Up to 2 weeks	68.6%	55.7%	88.7%	78.3%	62.1%
>2 weeks up to 4 weeks	24.1%	35.6%	9.3%	13.6%	28.6%
>4 weeks up to 6 weeks	6.7%	8.5%	1.6%	6.3%	9.2%
>6 weeks up to 8 weeks	0.5%	0.2%	0.3%	1.5%	0.0%
>8 weeks up to 10 weeks	0.1%	0.0%	0.1%	0.3%	0.0%
Over 10 weeks	0.0%	0.0%	0.0%	0.0%	0.0%

Source NI KC61 Part A2