Restoration and recovery of paused screening programmes

The following population screening programmes in Northern Ireland were temporarily paused from the second week in March 2020:

- Abdominal aortic aneurysm screening and surveillance monitoring.
- Routine breast screening.
- Bowel cancer screening.
- Cervical screening.
- Routine diabetic eye screening and surveillance monitoring.

This was in response to COVID-19 so that Health and Social Care (HSC) staff and resources could be redeployed and to reduce the risk of exposure to the corona virus for the public and HSC staff.

In its Strategic Framework for Rebuilding HSC Services, the Department of Health has now called for the phased restoration of these paused programmes. This has begun and the current position is as follows:

- Abdominal aortic aneurysm screening remains paused for initial screening appointments and surveillance of men with a small AAA. Treatment of men with a large AAA has recommenced, but is delayed due to current resources. Surveillance scanning of men with medium AAAs has restarted.
- Routine breast screening restarted from 20 July 2020.
- Bowel cancer screening backlogs in follow up tests are being cleared and screening invites will recommence from mid-August 2020.
- Cervical screening invitations recommenced from end June 2020.
- Routine diabetic eye screening and surveillance monitoring to recommence in a phased manner, initially focusing on patients at higher risk of sight threatening retinopathy, from August 2020.

The four month pause to date has resulted in a backlog of people awaiting screening. In addition the screening programmes will not be able to screen the same number of people as they did before the Covid-19 pandemic. This is due to the need for social distancing and appropriate infection control measures. It will therefore take many months to get population screening programmes up and running at normal levels.

While the above programmes were paused due to Covid-19, screening continued to be offered to people who required:
• Higher risk breast screening - all eligible women continued, and are continuing, to be screened at the higher risk screening unit in Antrim Area Hospital. Prior to Covid-19 women who required mammography only were able to have their screening at their local breast screening unit. This option was paused as part of the response to Covid-19 and has not yet been reinstated.

• Diabetic eye screening for pregnant women (sight saving laser treatments and urgent intravitreal injections continued, and are continuing, to be provided).

• Infectious diseases in pregnancy screening

• Newborn blood spot screening

• Newborn hearing screening

These programmes were not paused and continue to be provided.

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FAQs

When will I receive my screening invitation?

From end June 2020, the programme is initially inviting those women who may be at higher risk of cervical changes. This includes those who had a previous abnormal result, or those who were waiting to have their test repeated.

Routine invitations will start again from August 2020, beginning with those who were due a test in April 2020. All routine invites will continued to be delayed by several months until the programme has the opportunity to catch up.

Is it safe to attend for a screening test?

When you make your appointment, your GP practice will be able to advise you on all the steps they are taking to keep you and their staff safe at this time. You will be asked to wear a face covering when you attend, they may limit the number of people in the waiting area or you may have to wait outside until the time of your appointment. Your actual screening test will be carried out exactly as before.

If you have symptoms of coronavirus, or have been in contact with someone who does, you must not go to your cervical screening appointment. Contact your GP practice and let them know you have coronavirus symptoms. Your appointment can be rearranged for a time after you have isolated.

What should I do as I wait for my screening invite?
While you wait for your invite it is important to be symptom aware.

You should report any symptoms such as unusual discharge or bleeding to your doctor as soon as possible. This includes bleeding after sex, between periods or after the menopause. These are usually caused by something other than cancer but it’s important to have them checked.

**I have an appointment at colposcopy for further assessment or treatment. Should I attend?**

Colposcopy clinics have continued to be held where possible. The Trust will advise you on any special measures they are taking to keep you and their staff safe from coronavirus. You will need to wear a face covering when you attend for your appointment.

**Are there risks associated with delaying my cervical screening test?**

Cervical screening is not a test for cancer, but for changes to cells in your cervix which, without treatment, can sometimes develop into cervical cancer. These cell changes usually take many years to develop, so it is unlikely that a short delay in having a cervical screening test will affect most individual outcomes.

However if you have any symptoms, such as;

• vaginal bleeding after sex, between periods or after the menopause

• vaginal discharge that is not normal for you

• persistent back or tummy pains, or pain during sex

Please speak to someone at your GP surgery, even if you have had a normal screening test.

The aim of the cervical cancer screening programme is to reduce the number of
women who develop cervical cancer and the number of women who die from it. It tries to do this by testing as many women as possible, examining the test results and referring the women for further treatment if any early warning signs are present.

Although a cervical screening programme has been in place in Northern Ireland for over 20 years, we are constantly working to improve the quality of the programme and ensure it is as effective as possible. During this time, women aged 20-64 have been invited for screening every five years. However, as further research has been carried out, it has become increasingly evident that screening women under the age of 25 is likely to do more harm than good.

The screening test (often known as a smear test) looks for abnormal changes in the cells which line the cervix. These abnormal changes may go on to develop into cancer if left untreated. However, in some cases, particularly young women, the body’s immune system will return the cells to normal by themselves, rendering them harmless.

Cervical cancer is very rare in women under 25, with only one or two cases occurring each year in Northern Ireland. Young women who are screened are more likely to have an abnormal screening test result and undergo further tests and treatments that they do not need. Unnecessary treatment can cause significant anxiety and, in some cases, lead to a higher risk of premature birth in future pregnancies.

In light of this evidence, the Department of Health, Social Services and Public Safety announced in July 2010 that the age range and interval for the cervical screening programme would change from January 2011. The new policy means that women aged 25-49 will be invited for screening every three years, and those aged 50-64 every five years.