



Eich cyf/Your ref: P-06-1397
Ein cyf/Our ref: EM/00164/24

Jack Sargeant MS
Chair - Petitions Committee
Senedd Cymru
Cardiff
CF99 1SN

11 March 2024

Dear Jack,

Thank you for your letter of 18 January as Chair of the Petitions Committee.

I support the need to improve access and encourage more people to take up the offer of cervical screening when invited. Wales was the first UK nation to implement testing for high-risk human papilloma virus (HPV) as the primary screening test in 2018. This is a more specific test which means that a negative result is more accurate, and it will save more lives by determining a woman's risk of cancer earlier. We also have an HPV vaccination programme which offers vaccination to everyone in school year 8, with catch-up activity undertaken in school year 9 and 10. The HPV vaccine is highly effective at protecting against cancers caused by HPV, including cervical cancer. Through a combination of vaccination and cervical screening we hope to see cases of cervical cancer decline significantly.

Like the rest of the UK, we follow the expert advice from the UK National Screening Committee (UK NSC) on screening matters. The UK NSC is yet to make a recommendation on self-sampling for cervical screening and there is a lot more work to do before it can be implemented. In 2019 the Committee issued a call for more evidence into the use of self-sampling in cervical screening. The Committee is currently considering the available evidence and there are plans for an in-service evaluation that will provide the UK NSC with real world evidence on the effectiveness of offering HPV self-sampling in cervical screening.

This is a very promising development which, if recommended, may encourage more people to take up the offer of screening by enabling them to carry out the test themselves, in the privacy of their own home and at a time of their choosing. However, before self-sampling can be implemented, we need to ensure that it is safe and effective at detecting HPV, as any reduction in the test accuracy that might ensue from this method of sample gathering could outweigh the benefits of better access and put people at greater risk. Our approach will be to wait for these findings and any subsequent UK NSC recommendation.

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

I also think it is important that we recognise improvements in cervical cancer survival and mortality. One and five year unstandardised survival rates have improved to 86% and 71% respectively as of 2016-20. The age standardised mortality rate per 100,000 people has fallen from above 4.1 to 2.9 between 2002 and 2021. We are committed to continuing to improve cancer outcomes in Wales through a combination of prevention, early detection, and improved treatment.

Additionally, our Quality Statement for Women and Girls' Health sets out what health boards are expected to deliver to ensure good quality health services to support women and girls across Wales. We have tasked NHS Wales to develop a comprehensive ten-year women's health plan. This will act as the vehicle for transforming the care received by the women of Wales throughout the course of their lives.

Thank you for writing to me on this matter.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'M. E. Morgan'.

Eluned Morgan AS/MS

Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol
Minister for Health and Social Services