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# Pap smear rates among Australian lesbian and bisexual women: some good news but disparities persist

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#### INTRODUCTION

Cervical cancer is the second most prevalent cancer among women worldwide. 1, 2 The Papanicolaou (Papsmear) test detects pre-cancerous changes on the cervix before cancer evolves. Since its advance 50 years ago there has been a dramatic decrease in the incidence and mortality of cervical cancer. 2

In Australia, current guidelines advise women to have a Pap smear test every 2 years between 18-70 years.<sup>5</sup>

HPV is spread during sexual contact and is present in women who have sex with women.<sup>15, 16</sup> This is partly attributable to a sexual history with men,<sup>17</sup> studies have also found HPV in women with no sexual history with men.<sup>15, 17, 18</sup>

### AIM

To look at Pap smear testing rates among community-attached lesbian, bisexual and queer (LBQ) women.

#### **METHODS**

Data taken from the Sydney Women and Sexual Health (SWASH) study 2002-2012, a self-complete biennial questionnaire of LBQ women's health and wellbeing.

Analysis conducted on surveys from non-heterosexual women, aged 18 years and older, living in NSW.

### **RESULTS**

- 79% lesbian, 11% bisexual and 10% queer/other
- Median age 32 years
- 81% sexually active with a woman < 6 months
- 65% ever sexually active with a man
- 36% current smokers

### Pap smear testing rates among LBQ women have <u>not</u> changed over time

Analysis of SWASH surveys 2002-2012 (N 3974):

- 73% timely screening (< 3 years)
- 11% under-screened (>3 years)
- 17% never screened

No significant variation in the proportion of women who had:

- ever attended for a pap smear test (range 83-85%)
- never had a pap smear test (range 15-17%)

Pap smear testing rate among LBQ women compares favourably to general population

Compared 3-yr participation rate for NSW women 2009-2010,<sup>22</sup> with 3-yr participation rate for SWASH 2010 respondents aged 20-69 (N 746).

NSW population = 70% SWASH sample = 76%

## Five characteristics predicted whether LBQ women had ever had a Pap smear test

MLR of 2012 SWASH data (N 648) for characteristics significantly associated with ever having a Pap smear test:

- ever having had an STI test
   (OR 3.46; 95% CI 2.12-5.63)
- ever having had sex with men (OR 2.49; 95% CI 1.53-4.05)
- being out to a regular doctor relative to not having a regular doctor (OR 2.35, 95% CI 1.37-4.04)
- education past year 12
   (OR 2.00, 95% CI 1.19-3.37)
- age
   (OR 1.12 per 1yr increase, 95% CI 1.08-1.16)

### Two findings of concern for public health

- 1. Significant and consistent proportion of LBQ women never had a Pap smear test
- 2. Never having had sex with men a significant predictor of never having had a Pap smear test

### Possible Explanations:

- Belief that HPV is only transmitted during sex with men.
- Screening programs and health promotion materials not explicitly addressing irrelevance of sexual history with men and persistent perception of lower HPV risk for lesbian women.<sup>1,16</sup>
- LBQ women being dissuaded by health practitioners, 14, 24-27 or incorrect past advice not subsequently corrected. Or women unsure how to deal with conflicting advice. 16
- Association between STI testing and Pap smear testing suggests sexual and reproductive health not part of the health care experience for a significant minority of LBQ women. Pap smear testing may need to be promoted instead as part of regular health and wellbeing check-ups, like a regular blood pressure test.

### CONCLUSION

Good news: no evidence of the significant disparities between LBQ women and general population seen in other similar countries. <sup>2, 11-14</sup>

Cause for concern: LBQ women with no sexual history with men are significantly less likely to have ever had a Pap smear test. The vast majority of women diagnosed with invasive cervical cancer had not had regular pap smear tests/were neverscreened; under-screening among this group needs to addressed.

Information on the Sydney Women and Sexual Health (SWASH) survey, copies of reports, as well as references and analysis tables available from Julie.MooneySomers@sydney.edu.au