Providing Cervical Screening in Primary Care for Trans Men and Non-binary People with A Cervix

Trans men assigned female at birth who are registered with a GP as male, are not invited by, or included in the national cervical screening programme. Cervical screening for this population falls to gender clinics and general practice. An awareness of barriers and sensitive provision of cervical screening for trans men and non-binary people are important considerations in endeavours to reduce screening inequality and improve patient experience.

**The national cervical screening programme**

Public Health England outline screening cover for transgender and non-binary people in the document; Cervical Screening Guidance for Call and Recall Best Practice. ‘Every person with a cervix between the ages of 25 and 64 is eligible for cervical screening. However current cervical screening systems do not have the facility to include individuals registered with the NHS as male and current registration systems are unable to record the gender category of non-binary. People registered as female are invited for cervical screening as part of the national screening programme. For eligible people not registered as ‘female’ or ‘indeterminate’, screening should be offered by the person’s GP practice or, where appropriate, a gender clinic healthcare team.’ 1.

**Changing Gender on Patient Records**

Patients may request to change gender on their patient record at any time and do not need to have undergone any form of gender reassignment treatment to do so. 2. Following gender change, a new NHS record is created with a new NHS number. Screening invitations are sent accordingly. Supporting information is available to help counsel patients on how changing their gender will affect screening. 3.4.

**Barriers to screening uptake**

A study in the BJGP in 2020, exploring attitudes of trans men and non-binary people towards cervical screening, found trans men and non-binary people face barriers at personal, inter-personal and institutional levels including gender identity, genital dysphoria, anticipated and experienced stigma. The study concludes that cervical screening uptake and patient experience could be improved by adopting trans men and non-binary people appropriate screening invitations, providing options for self-sampling, improving cultural sensitivity in health literature, and improving access to trans-specific or trans-aware health services.5.

Access to self-sampling and gender clinics is not widespread. Awareness and sensitivity of the findings in this study are important for effective and sympathetic service provision within general practice.

Excellent practical top tips on how to prepare for and perform cervical screening for trans men and non-binary people are available on the PCWHF website, summarised from the Eve’s Appeal.6.

**Provision of cervical screening in general practice: Suggestions for service design**

Eligible patient numbers are likely to be low for individual practices, sharing policy allows efficient service set-up. A suggested practice policy includes the following:

* Create a register of patients eligible for cervical screening not included in the national cervical screening programme (this is often the tricky bit and will depend on clinical record systems and coding practices)
* Provide age-appropriate diary and recall system, 3 yearly from 25-49 years and 5 yearly from 50-64 years
* Communicate results and recall interval to patients
* Action abnormal results- <https://cks.nice.org.uk/topics/cervical-screening/management/managing-hpv-cervical-cytology-results/>
* Ensure follow up of abnormal test results takes place
* Default reminders for overdue diary entries, with option to cease e.g., if hysterectomy

**Practical tips**

For labs to process the sample, it must be clearly labelled as a sample from a male patient, outside the national screening programme.

Patients who change their gender are allocated a new NHS number, therefore the labs are unable to access their screening history and it is important to include this information with the request.

It is a good idea to call the lab ahead to ensure they do not reject the sample.

Androgen therapy can increase the likelihood of an inadequate smear result.5.

**Example practice policy**

1. Quarterly search\* for patients eligible for cervical screening, not included in the national screening programme, between the age of 25 and 65 to create a register of patients. Add cervical screening due date to patient record diary.
2. Quarterly check of the register:
3. Cervical screening up to date - no action
4. Cervical screening due – send initial invite or recall letter as appropriate
5. Overdue cervical screening – send reminder letter
6. Patient registered as male attending for cervical screening
7. Explain entitled to cervical screening, outside the national programme, GP practice co-ordinating
8. Record that the sample is taken from a male and is outside the national screening programme
9. Complete cervical screening template
10. Task to Admin to await result/chase if needed

4. Processing results

1. Task to co-ordinating GP to action result and inform patient (follow up if treatment required)
2. Update template and add diary entry for next recall date

\*Searches may vary depending on clinical systems and coding e.g. search for the clinical code transgender (including children codes), then manual review of records to identify patients with a cervix not included in the national screening programme. Patients who request gender change can also be proactively added to the register.

References

* <https://www.gov.uk/government/publications/cervical-screening-call-and-recall-administration-best-practice/cervical-screening-call-and-recall>
* <https://pcse.england.nhs.uk/help/patient-registrations/adoption-and-gender-re-assignment-processes/>
* <https://www.gov.uk/government/publications/nhs-population-screening-information-for-transgender-people/nhs-population-screening-information-for-trans-people#cervical-screening>
* <https://www.jostrust.org.uk/information/cervical-screening/trans-non-binary>
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