

Lesbians need
Pap smears too!
the myths, the facts
and more...



Delivering a **Healthy WA**

‘Setting straight’ the myths about lesbians and Pap smears

Myth: If a woman has never had sex, she is not at risk of developing cervical cancer.

Fact: If a woman has never had sexual contact, the risk of developing cervical cancer is very small. However, if a woman has ever had sexual contact, there is a risk of developing cervical cancer and regular Pap smears are important.

Myth: Lesbians are not at risk of cervical cancer because they don’t have sex with men.

Fact: Cervical cancer is usually caused by the human papilloma virus (HPV) which is commonly spread through genital skin-to-skin contact during sexual activity. This includes female-to-female sex. Also, some lesbians may have either had sex with men at some time in their lives, currently have sex with men or have partners who have had sex with men and women.

Myth: HPV is less common in lesbians.

Fact: There is currently no evidence to suggest that HPV infection rates are lower in lesbians. Anyone who has ever had sex can have HPV - it is so common that four out of five people will have HPV at some time in their lives. International research shows HPV has been found in women who have never had sexual contact with men.

Myth: Lesbians cannot pass HPV to each other.

Fact: Woman to woman transmission of HPV can occur, either through direct genital contact, cuts, abrasions or through shared use of sexual toys.

Myth: Rates of cervical abnormalities for lesbians are less than in heterosexual women.

Fact: Rates of cervical abnormalities for lesbians are similar to heterosexual women. Abnormalities have been found by Pap smears, even in women who reported no sexual history with men. However, lesbians are less likely to have regular Pap smears than other women.



Having a Pap smear is not always easy for lesbians

Community acceptance and recognition of lesbians and lesbian relationships is not always apparent. There are a number of barriers that lesbians may face in relation to seeking health care. We hope that you may find some of the suggestions below useful in overcoming any barriers that you may have experienced.

Barrier: Finding a suitable health care provider.

The best way to find a suitable provider who is knowledgeable and understanding of lesbian health issues is to ask around – have a chat to your friends and colleagues. We have a list of contacts on the back of this brochure which may be able to assist you in finding a suitable provider. Have a look in local gay and lesbian community press advertisements for health care services. Call a health care provider you have in mind and ask questions like “Do you have other lesbian patients?” or “Do you have staff trained in lesbian health?”. Check out the waiting room for gay-friendly symbols or literature.

Barrier: Feeling unsure about ‘coming out’ to health care providers.

The choice to make known your sexuality is yours, so don't feel that you have to. However, being able to disclose this may result in a more appropriate and beneficial health care experience. If you are not comfortable talking

openly, try to think up responses to questions that are as close as possible to your current situation. As rapport is established with your health care provider, you may feel comfortable speaking more openly. A consultation for a Pap smear usually begins with a health care provider asking sexual history questions. It may be useful to prepare some answers to common questions such as:

Q: Do you have a boyfriend?

A: No, I have a girlfriend.

A: No, I see women.

A: I don't have a partner at the moment.

Q: Do you use contraception/are you on the Pill?

A: No, I am not sexually active with men at the moment.

A: No, it is not necessary.

A: Yes, to regulate my cycle.

Q: You are a lesbian – are you sexually active?

A: Is that relevant at the moment?

A: What exactly do you need to know?

Q: Why would you need to have a Pap smear?

A: Because lesbians need Pap smears too.

A: Because all women who have ever had sex need regular Pap smears.

A: Because it is an important part of looking after my health.

Barrier: Feeling uncomfortable about going for a Pap smear alone.

If you need support while having a Pap smear, ask your partner or a friend to come into the consultation room with you. If you would prefer to have a female health care provider, ask about this when you make an appointment. You can also ask the health care provider to have a female present during the examination.





Barrier: Knowing your rights.

Your health records are confidential and information should not be disclosed without your knowledge and consent. If you prefer not to have your sexual orientation recorded on your medical history, ask your health care provider not to record this unless it is relevant to your health care. Your health care provider is required to protect your confidentiality by law. You have a right to take action if you feel this confidentiality has been breached.

Barrier: Past negative experiences or fear of homophobia.

Health care providers are encouraged to take a more sensitive approach to enquiries into sexual history and examinations. Occasionally you may hear of negative experiences during Pap smears. If you have a negative experience or feel uncomfortable, remember that you can stop an examination at any time or leave at any point during the consultation. It may be useful to talk about your experience with a friend or someone who can offer you support.

If you decide to make a discrimination or harassment-based complaint about a health care provider, contact the Equal Opportunity Commission on 9216 3900 or 1800 198 149 (toll-free). If you have a complaint or concern about a health service, contact the Health Consumers' Council on 1800 620 780 (toll-free) or the Office of Health Review on 9323 0600.

Frequently asked questions

What is a Pap smear?

A Pap smear is a quick and simple test used to screen women for changes in the cells of the cervix that may lead to cervical cancer. The cervix is located at the top of the vagina and is the opening to the uterus (womb).

A plastic instrument called a speculum is placed in the vagina so the cervix can be seen clearly. You can ask to insert the speculum yourself if you wish. The health care provider collects a cell sample from the surface of the cervix using a small wooden spatula or a fine nylon brush. These cells are smeared on a slide and sent to a laboratory to be analysed under a microscope for any cell changes.

While some women may find Pap smears uncomfortable, they rarely experience pain. It should only take a few minutes. If it is painful, tell the health care provider so they can try to reduce discomfort. Remember, you can stop the examination at any time or leave at any point during the consultation.

Why are Pap smears important?

The biggest risk factor for cervical cancer is not having a Pap smear every two years! Cervical cancer is one of the most preventable of all cancers. Three out of every four women who develop cervical cancer have either never had a Pap smear or not had one in the last five years. A Pap smear every two years until you are 70 years old, even after menopause, is your best protection against cervical cancer.

Do lesbians need Pap smears too?

YES. Every woman over 18 years of age who has ever had sexual contact should have a regular Pap smear every two years. Sexual contact includes female-to-female sex.

What is the link between cervical cancer and HPV?

HPV is a virus, the human papilloma virus. Anyone who has ever had sex can have HPV – it is so common that four out of five people will have HPV at some time in their lives. In most cases, it clears up by itself in one to two years. In rare cases, if the virus persists and is left undetected, it can lead to cervical cancer. This can take up to ten years to develop. A Pap smear every two years can detect abnormal cell changes caused by HPV, which can then be monitored or treated to prevent cancer.

How can I get HPV?

HPV is spread through genital skin contact during sexual activity. The virus passes through tiny breaks in the skin. HPV is not spread through blood or other bodily fluids. Latex dams, latex gloves, condoms or water-based lubricant can be used to reduce the risk of passing on an infection. There is limited research however, on the effectiveness of these protective methods in preventing HPV from being passed on. Remember, HPV is so common that it can be considered a normal part of being sexually active.

HPV vaccine and regular Pap smears

There are currently two HPV vaccines available in Australia; both of which protect against two types of HPV that cause around 70% of cervical cancers.

The vaccines do not protect against all types of cancer causing HPV, therefore Pap smears are still important. Please see your doctor for more information about these vaccines.

Risk factors for cervical cancer

Certain factors may increase the risk of developing cervical cancer. These include:

- Age: about half of the new cases of cervical cancer diagnosed each year are in women over 50 years of age.
- Smoking: women who smoke are known to be at greater risk of developing cervical cancer than non-smokers.
- Persistent HPV infection
- Not having a Pap smear every two years!

When is the best time to have a Pap smear?

The best time to have a Pap smear is midway between your periods. If you no longer have periods, any time is suitable. If you have symptoms such as unusual bleeding, discharge or pain, see your health care provider as soon as possible – even if your last Pap smear was less than two years ago and was normal.

How much will it cost?

Two costs are involved – the consultation fee and the Pap smear pathology test. Some health care providers ‘bulk bill’ and if so, there are no out of pocket expenses for women. Ask what the cost will be when you make an appointment.

What if I’ve had a hysterectomy?

This depends on the type of hysterectomy you have had. You do not need to have a Pap smear if you have had a total hysterectomy in which the uterus and cervix have both been removed for a non-cancerous condition such as heavy bleeding, fibroids or prolapse. If you did not have your cervix removed or you had a hysterectomy for either cancer or a pre-cancerous condition, you may still need to have a smear. Check with your health care provider to be completely sure.

How long before I get my results?

It usually takes one to two weeks for your health care provider to receive your results from the laboratory. Make sure you contact your health care provider to get your results.

Does an abnormal result mean that I have cancer?

It is important to remember that almost all abnormal Pap smears results are NOT due to cancer. One in every ten Pap smears shows cell changes. Most of these changes are due to HPV infections which usually clear up naturally. In a small number of cases the changes may be more significant and may need further investigation. These changes, if left untreated, may later develop into cervical cancer. Ask your health care provider to explain exactly what your abnormal Pap smear result means. Make sure you understand what happens next and why. This can save you a lot of needless worry.



What if I forget my next Pap smear?

The WA Cervical Cancer Prevention Program's Cervical Cytology Registry maintains and operates the Register – a central computerised confidential database of WA women's Pap smear, cervical biopsy and HPV DNA test results. It has been fully operational since late 1994.

The Registry acts as a safety net for WA women, providing reminder letters when Pap smears and other follow-up cervical screening tests are **overdue**. The confidentiality of the information held by the Registry is protected by law - Health (Cervical Cytology Register) Regulations, 1991 (WA). Only you, your health care provider and the pathology laboratory that examined your Pap smear can access your record.

When you have your next Pap smear or other cervical screening test, your results will be forwarded to the Registry from the laboratory examining your test, as required by law.

Please note: information relating to your sexuality or other medical history is NOT sent to the Registry. If you do not want your cervical screening test results to be forwarded to the Registry, please advise your health care provider at the time of your test.

Where can I have a Pap smear?

Your doctor

FPWA – Formerly Family Planning WA

Phone: 9227 6177

ISHAR Multicultural Centre for Women's Health

Phone: 9345 5335

WOW Clinic for Women with Disabilities

Phone Jane Akerman: 9382 7141

Aboriginal Medical Services

Community Health Centres

Metropolitan Women's Health Centres

Fremantle Phone: 9431 0500

Gosnells Phone: 9490 2258

Halls Head Phone: 9582 7800

Joondalup Phone: 9300 1566

Mandurah Phone: 9550 0900

Midland Phone: 9250 2221

Northbridge Phone: 9227 8122

Rockingham Phone: 9550 0900

Regional Community or Women's Health Centres

Broome Phone: 9194 2340

Derby Phone: 9191 1308

Bunbury Phone: 1800 673 350 or
9791 3350

Carnarvon Phone: 9941 0570

Geraldton Women's Health

Resource Centre Phone: 9964 2742

Kalgoorlie Phone: 9021 8266

Narrogin Phone: 9881 0385

South Hedland Phone: 9140 1124

Karratha Phone: 9143 2221

Useful contacts:

FPWA Sexual Health Services

Offers clinical counselling, education, library and youth services for women and men of all ages.

Phone: 9227 6177

Sexual Health Helpline: 9227 6178

or 1800 198 205 (country callers)

Web: www.fpwa.org.au

Quarry Health Centre for under 25s (run by FPWA)

7 Quarry Street Fremantle

Phone: 9430 4544

Email: quarry@fpwa.org.au

Freedom Centre – Supporting the health and diversity of young people’s sexuality and gender

A safe space for young people (under 26) to hang out, meet other same sex attracted and gender diverse young people, get peer support, information and referrals.

Phone: 9228 0354

Web: www.freedom.org.au

Email: info@freedom.org.au

Gay and Lesbian Community Services of WA (INC)

Phone: 9486 9855

Counselling Line: 9420 7201

Web: www.glcs.org.au

Email: admin@glcs.org.au

This document can be made available in alternative formats on request from a person with a disability.

For more information contact:

WA Cervical Cancer Prevention Program

Phone: 13 15 56

Website: www.health.wa.gov.au/cervical/home

Email: cervicalcancer@health.wa.gov.au

National Cervical Screening Program

A joint Australian, State and Territory Government initiative



Government of **Western Australia**
Department of **Health**

Produced by
WA Cervical Cancer Prevention Program

© Department of Health, 2009