Test of Cure after treatment

Test of Cure checks that treatment for high-grade cell changes (HSIL) has worked. It is a simple yearly HPV test, starting 12 months after your treatment.

KEY POINTS

- Test of Cure is an HPV test once a year, starting 12 months after treatment.
- When HPV is not found on two tests in a row, you return to screening every 5 years.
- You can usually collect your own sample.
- If HPV 16 or 18 is found, or your cells show high-grade or glandular changes, you will be referred for colposcopy.
- This applies after treatment for HSIL. Adenocarcinoma in situ (AIS) has a different follow-up.

Why Test of Cure matters

Treatment such as LLETZ removes the abnormal cells for most people. A small number of people still have HPV afterwards, and they are more likely to develop new cell changes. Yearly HPV testing finds this early.

Test of Cure changed in April 2025. It used to be an HPV test and a cell test together (a co-test). It is now an HPV test alone. If you started Test of Cure before then, your pathway may have been updated, and you may already have completed it.

12 MONTHS	24 MONTHS	COMPLETE	AT ANY TEST
First HPV test	**Second HPV test**	**Routine screening**	**If HPV is found**
HPV not found: test again in 12 months.	HPV not found again: Test of Cure is complete.	Your next test is in 5 years.	Your next step depends on the type. See below.

Figure 1. The Test of Cure pathway after treatment for HSIL. Simplified from the National Cervical Screening Program guidelines.

If HPV is found

HPV 16 or 18	You will be referred for colposcopy.
Other types of HPV	Your cells are checked. If they show high-grade or glandular changes, you will be referred for colposcopy. Otherwise, you will have another HPV test in 12 months.
Found three years in a row	If HPV (not 16/18) is found at three yearly tests in a row, you will be referred for colposcopy.
Self-collected sample	A self-collected sample cannot be checked for cells. If HPV is found, a clinician will take a sample from your cervix, or it will be taken at colposcopy.

Common questions

Who does the test?
Your GP can do it, or I can. The National Cancer Screening Register usually sends a reminder when it is due.

I have had a hysterectomy since my treatment.
You still need yearly HPV tests, taken from the top of the vagina, until HPV is not found on two tests in a row.

Do I need a colposcopy every year?
No. Only if your Test of Cure result shows it is needed.

I am pregnant. Can I still have the test?
Yes. It is safe in pregnancy and should not be delayed.

Questions to ask your doctor

- When is my first Test of Cure due?
- Does any part of my history change this plan?
- Can I collect my own sample?

When to seek help

Please do not wait for your next test if you have bleeding after sex, between periods or after menopause, or ongoing unusual discharge or pelvic pain. See your GP or contact the rooms.

Rooms	03 8400 6193 — appointments and non-urgent questions, business hours
Urgent, after hours	Dr James Aridas, 0459 706 061 — urgent gynaecology concerns, and pregnancy concerns before 20 weeks
From 20 weeks pregnant	The birth suite at your booked hospital: Epworth Freemasons 03 9483 3833 · Cabrini Malvern 03 9508 6000 · Jessie McPherson 03 9594 2776
Emergency	Call 000 or go to your nearest emergency department

SOURCES AND FURTHER READING

1. Cancer Council Australia. National Cervical Screening Program Guidelines, updated April 2025. cancer.org.au/health-professionals/clinical-practice-guidelines/cervical-cancer-screening
2. Department of Health, Disability and Ageing. National Cervical Screening Program: a summary guide for healthcare providers, February 2025. health.gov.au/ncsp
3. Department of Health, Disability and Ageing. Understanding the National Cervical Screening Program management pathway, 2025. health.gov.au/ncsp
4. Australian Centre for the Prevention of Cervical Cancer. 2025 updates to the National Cervical Screening Program guidelines. acpcc.org.au
5. National Cancer Screening Register: 1800 627 701 · ncsr.gov.au
6. Cancer Council information and support: 13 11 20

This information is general and does not replace individual medical advice. If your circumstances differ from what is described here, please discuss them with Dr Aridas.

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