A cluster randomised trial of strategies to increase cervical screening uptake at first invitation (STRATEGIC)

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Plain English summary

Strategies to increase cervical screening uptake

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The STRATEGIC trial tested new methods (interventions) to encourage young women to attend their first cervical screen.

The trial involved two groups of women registered with a general practitioner: one group aged 24.75 years in Greater Manchester and one group aged 20 years in the Grampian region of Scotland, all of whom had been offered the human papillomavirus vaccination on the national programme. The trial allocated general practices by chance (randomised) to different interventions and was performed in two phases. The first phase involved all women invited for their first cervical screen and the second phase involved women who had not attended within 6 months. Phase 1 tested a specially designed pre-invitation leaflet and online booking. In phase 2, self-sampling kits (SSKs) were sent and offered, and a nurse navigator (NN), timed appointments and a choice between SSKs and NNs were tested. In both phases a number of general practices did not test any new interventions, and these were the control practices. Phase 1 involved 20,879 women and phase 2 involved 10,126 women. The effectiveness of the new methods was demonstrated by comparing screening uptake with that in the control practices.

Neither the pre-invitation leaflet nor online booking had any impact on uptake of cervical screening coverage after 3 and 6 months. In phase 2, both SSK sent and timed appointments interventions did achieve a small but significant increase in the uptake of screening, and economic analysis indicated that these methods were likely to be cost-effective. Women who had chosen not to attend for screening indicated a preference for SSKs being sent.

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