

**Information  
for lesbian &  
bisexual women**

**When did you  
last have a  
Smear Test?**

**Yes, you DO  
need one!**

**A leaflet for women who  
have sex with women about  
smear tests and important  
stuff about coming out to  
health care workers**



**The greatest risk  
factor for cervical  
cancer is not  
being screened\***

\*Lesbians and Cervical Screening  
by Fish and Wilkinson 2000

# Introduction

**All women who have ever had penetrative sex e.g. fingers, sex-toys or with men need regular cervical smears. This includes most lesbian and bisexual women.**

For an individual who has never had penetration of any sort, it may not be necessary. If you have any doubts, discuss this with your doctor. In Scotland, all women between 20 and 60 years are routinely invited to have a free cervical smear test every three years. If it is more than three years since you last had a smear and you have not received a recent invitation, please contact your doctor.

Remember, it is still important to see a doctor as soon as possible if you have any unusual discharge or bleeding, including bleeding after sex, between periods or after the menopause.

## Why do we need a leaflet on this?

There is growing evidence that many lesbians, bisexual women and health care professionals are unclear about whether lesbian and bisexual women need smear tests.

There is evidence that lesbian and bisexual women are being informed by some health care workers that they do not need smear tests.

The consequence of this is that lesbian and bisexual women may tell each other they don't need a test. Many are happy to believe this, since having a smear test may be perceived as an uncomfortable experience.

Some still do attend smear test appointments only to be told a smear test is not needed. This creates a vicious circle whereby fewer and fewer lesbian and bisexual women come forward for a smear test and therefore cases of cervical cancer may be missed.

# So you do need a smear test

Why then do lesbians and health care workers think that lesbians don't need a smear test?

Bisexual women may fear 'coming-out' as bisexual and present themselves to services as heterosexual or lesbian.

## The Myths

The notion that lesbians do not need a smear test comes from two main sources:

- 1 **Lesbians have never had sex with a man.**
- 2 **Women who have not had sex with a man are not at risk of cervical cancer.**

## The Facts

Data collected from the AudreLorde and Bernhard Sexual Health Clinics for lesbians showed that:

- 1 in 10 lesbians had smear abnormalities
- 4 out of 5 lesbians had had penetrative sex with a man. 10.9% of this group had smear abnormalities
- 1 in 20 lesbians who had never had penetrative sex with a man had an abnormality on their cervical smear



## **Can lesbian and bisexual women get sexually transmitted infections?**

Yes, lesbian and bisexual women are at risk of sexually transmitted infections.

Information about exactly how infections are passed from one woman to another during sex is not readily available. However we do know that all sexually transmitted infections and vaginal infections can affect lesbians and women who have sex with women. All sexually transmitted infections can be passed on between women, through oral sex, through transferring vaginal fluids on hands and fingers and through sharing sex toys.

Remember: Most sexually transmitted infections can be treated easily.

## **What's the link between cervical cancer and HPV (Human Papilloma Virus)?**

Cervical cancer is usually the result of a sexually transmissible infection caused by some strains of the Human Papilloma Virus (HPV). HPV in the genital area is spread through skin contact, mainly during sexual contact. The virus can affect both men and women. Many people do not have any symptoms and are unaware that they have HPV. Because it is easily spread, approximately two thirds of all people who have had sexual contact with an infected partner will develop an HPV infection within an incubation period of three months.



## **What is a smear test and what is it looking for?**

A cervical smear test detects abnormal cells on the cervix before these cells become cancerous. This enables any abnormal cells to be treated early and to prevent cervical cancer. 97% of smears are negative (normal).

### **WHO DOES IT?**

Usually the practice nurse at your doctor's surgery, but Family Planning Clinics and Well Women Services also offer smear tests, usually as part of a general sexual health check. Make sure you make an appointment for a day when you will not have your period, as the nurse or doctor who takes the smear needs to see the cervix clearly.

## What happens during a smear test?

When you have your smear you will be asked to remove your underwear from the waist down, lie on your back on a couch, and to bend your knees upwards. The doctor or nurse will then gently insert a tube, called a speculum, into your vagina to hold it open so that the cervix can be seen. The doctor or nurse will gently brush cells from the cervix.

The whole procedure only takes a few minutes.

These cells will then be sent to the laboratory where they will be examined in detail under a microscope. You will be sent the results of your smear test.

## What about my result?

For 90% of women, the smear test confirms that the cells that make up the cervix are normal. If this is the case you will automatically be invited to have another smear in three years.

Sometimes the laboratory finds that there are not enough cells present for them to examine your sample under the microscope. This is called an unsatisfactory result and happens in 2% (1 in 50) smears. If abnormalities have been detected in the cells, this is called an 'non routine' result and may be referred to as mild, moderate or severe dyskaryosis.

Some smear tests show very mild changes in the cells. This is called a borderline result. Regardless of your smear test result, the person who took your smear will advise you on what needs to happen next. Please contact them if you are at all anxious about your result.

## How to have a good smear experience

If you are feeling anxious or embarrassed when you go for your smear test it might help if you try some of the following:

- 1 If you specifically want a woman to do the test explain this when you make the appointment.
- 2 Take a friend or a partner into the room with you if it helps.
- 3 Ask the nurse or doctor doing the smear to explain exactly what will happen before he/she begins.
- 4 Raise any questions or concerns with the nurse or doctor before he/she begins.
- 5 Tell the doctor or nurse if you are feeling nervous and he/she will help you relax.

- 6** If you have never seen a speculum you can ask to have a look at it to see how it works.
- 7** Try to breathe slowly and to relax your body fully as this will make the procedure more comfortable.
- 8** A smear test may feel uncomfortable but should not be painful. If any part of the procedure is painful, say so.
- 9** Remember that your body is yours and you have the right to stop the procedure if you are in pain or feel upset for whatever reason. A sensitive nurse will be able to listen to what you are saying if this happens. If this does happen, you may find some of the numbers at the end of this leaflet helpful if you need to talk to someone about your feelings.

# Safer sex

If you are concerned about passing on or getting sexually transmitted infections during sex with another woman, be aware of the following safer sex advice:

1

**Avoid the transfer of vaginal fluid from yourself to your partner on fingers and hands i.e. avoid touching your own genitals then your partner's and vice versa.**

2

**If you use a sex toy (e.g. vibrator/dildo) wash it thoroughly before sharing it with your partner, or cover it with a fresh condom each time you or your partner use it. Alternatively each of you use your own sex toys.**



**3** If you wish to make oral sex safer, cover your partner's vulva or anus with a 'dental dam' (square of latex) before oral sex. Your local GUM/Sexual Health Clinic will usually be able to provide you with these or advise you on where to get them. Alternatively you can use a cut-up condom or non-microwaveable (non-porous) cling film.

**4** Using a water-based (not oil-based) lubricant on sex toys, condoms or latex is a good idea for reducing soreness or friction during penetrative sex e.g. use KY jelly and not massage oil.

**5** If blood is present during sex (e.g. during menstruation, or through sexual practice) be aware that there is a risk of HIV, Hepatitis B, Hepatitis C and syphilis transmission.

# Coming Out to Health Care Workers

You may be unsure about whether or not to tell a health care worker that you are a lesbian or bisexual woman. You may wonder why bother? It can be useful in a range of different ways. For example:

## Why would you come out?

**1** You will no longer have to deal with those questions about what kind of contraception you are using or when you last had sexual intercourse.

**2** If you can be open about who you're having sex with, you are more likely to get sexual health care that is relevant to you and meets your needs. For example, if you have thrush, you will be able to find out whether you can pass it on to your girlfriend or not.

**3**

If you are feeling depressed due to difficulties in your relationship or problems coming out at work or to family, you will be able to explain your situation more fully. This may be a relief after years of avoiding questions and saying you don't know why you are feeling a certain way.

**4**

You may feel more comfortable and relaxed generally because you are able to be more open and more yourself.

**5**

If you are bringing up children with your partner it may be important to you to have this recognised rather than appearing to be either a single parent or a single person without children.

6

**You may also want health care professionals to recognise your partner as next of kin. This can be extremely important during medical care in order to enable your partner to visit you at times reserved for partners or to be involved in decisions about your care. If you have registered your civil partnership, your partner is recognized as next of kin. If you are in a relationship, but you have not registered, your partner is also recognised as your next of kin.**



## **Coming Out to Health Care Workers - how do you decide?**

Obviously we all have worries about 'coming out' to health care workers. You may be anxious about the reaction you will receive, such as hostility or misunderstanding. You may have concerns about confidentiality. These concerns are understandable as they are, sadly, based on experiences many of us have had. It is wise, therefore, to give yourself time to make your decision.

Your decision about whether to come out to your doctor or not may depend on how understanding your GP or practice nurse is generally. It may depend on how confidential you feel your GP practice is or the way you are treated when you go there.

Before you come out to any health care worker you may wish to ask questions about how sexual orientation is recorded in patient notes.

You have the right to view notes written about you after November 1991. If you wish to do this contact your GP or your local Health Board.

If you are very worried about confidentiality and feel you cannot come out to your GP, be aware that if you visit a GUM/Sexual Health Clinic, all the information about you that is recorded by the service will remain strictly confidential. This means that it will not be passed on to any other agency including your GP.

If you decide not to come out to any health workers, you may be able to get lesbian health information from some of the contacts at the back of this leaflet. It may also be a good idea to think through how you can answer the awkward questions you may be asked by a health care worker, to reduce your stress as much as possible.

# Contacts

## **The Sappho Service, Glasgow**

6 Sandyford Place, Sauchiehall Street, Glasgow,  
G3 7NB, Tel: 0141 211 8146

The Sappho Service provides clinical and counselling services to lesbians, bisexual women and women who have sex with women.

*Below is a list of agencies, which may be able to provide you with support, information or advice.*

## **Lothian Lesbian and Gay Switchboard**

[www.lgls.co.uk](http://www.lgls.co.uk)

0131 556 4049 (Daily, 19:30-22:00)

## **Lothian Lesbian Line**

0131 557 0751

(Monday and Thursdays 19.30-22.00)

## **Strathclyde Gay and Lesbian Switchboard**

[www.sglis.co.uk](http://www.sglis.co.uk)

0141 847 0447 (Daily, 19:00-22:00)

## **Strathclyde Lesbian Line**

0141 847 0547 (Wed. 19:30-22:00)

## **Granite Sisters (Aberdeen)**

[www.13.clara.co.uk](http://www.13.clara.co.uk)

01224 71 3336

## **Diversity LGBT Switchboard Dundee**

01382 20 2620 (Mon. 19.00-21.30)

## **NHS Helpline**

0800 22 44 88 (free)

*Please check your local phone directory for health services in your area.*

**September 2007**

This leaflet was written by the LGBT Centre for Health & Wellbeing, Edinburgh, and funded by Health Scotland.

With thanks to Bolton Primary Care Trust NHS from which this leaflet was adapted, and Health Scotland for its support.



[www.lgbthealth.org.uk](http://www.lgbthealth.org.uk)



Supported by

**The National Lottery**<sup>®</sup>

through the Big Lottery Fund

BIG  
LOTTERY  
FUND



**When did you  
last have a  
Smear Test?**