

Question: HPV self-sampling compared to clinician-based sampling and cervical cancer screening services for women aged 30-60

Certainty assessment							No of patients		Effect		Certainty	Importance
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	HPV self-sampling	clinician-based sampling and cervical cancer screening services	Relative (95% CI)	Absolute (95% CI)		

Uptake of cervical cancer screening services - RCTs - overall

29 ^{1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16,17,18,19,20,21,22,23,24,25,26,27,28,29}	randomised trials	not serious ^a	not serious ^b	not serious	not serious	none	64852/182305 (35.6%)	36318/100557 (36.1%)	RR 2.130 (1.891 to 2.399)	408 more per 1,000 (from 322 more to 505 more)	⊕⊕⊕⊕ HIGH	
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Uptake of cervical cancer screening - RCTs - kit directly mailed home

23 ^{1,2,3,4,5,6,7,9,10,13,15,16,17,18,19,20,21,22,23,25,26,27,29}	randomised trials	not serious ^a	serious ^b	not serious	not serious	none	44381/137436 (32.3%)	24469/84728 (28.9%)	RR 2.265 (1.892 to 2.710)	365 more per 1,000 (from 258 more to 494 more)	⊕⊕⊕○ MODERATE	
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Uptake of cervical cancer screening - RCTs - kit offered door to door by health worker

5 ^{8,15,16,21,22}	randomised trials	not serious ^a	serious ^b	not serious	not serious	none	12249/12909 (94.9%)	11837/15798 (74.9%)	RR 2.372 (1.119 to 5.029)	1,000 more per 1,000 (from 89 more to 1,000 more)	⊕⊕⊕○ MODERATE	
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Uptake of cervical cancer screening - RCTs - kit on demand

5 ^{8,11,14,24,28}	randomised trials	not serious ^a	serious ^b	not serious	not serious	none	8200/31897 (25.7%)	2700/20339 (13.3%)	RR 1.280 (0.902 to 1.817)	37 more per 1,000 (from 13 fewer to 108 more)	⊕⊕⊕○ MODERATE	
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Uptake of cervical cancer screening - RCTs - self-sample in clinic

1 ¹²	randomised trials	not serious ^a	not serious ^c	not serious	serious ^d	publication bias strongly suspected ^e	22/63 (34.9%)	12/31 (38.7%)	RR 0.928 (0.509 to 1.690)	28 fewer per 1,000 (from 190 fewer to 267 more)	⊕⊕○○ LOW	
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Uptake of cervical cancer screening - RCTs - high income countries

Certainty assessment							№ of patients		Effect		Certainty	Importance
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	HPV self-sampling	clinician-based sampling and cervical cancer screening services	Relative (95% CI)	Absolute (95% CI)		
26 1,2,3,4,5,6,7,8,9,10,12,15,16,17,18,19,20,21,22,23,24,25,26,27,28,29	randomised trials	not serious ^a	serious ^b	not serious	not serious	none	55217/172484 (32.0%)	25030/87736 (28.5%)	RR 2.244 (1.860 to 2.707)	355 more per 1,000 (from 245 more to 487 more)	 MODERATE	


Uptake of cervical cancer screening - RCTs - low- and middle-income countries

3 11,13,14	randomised trials	not serious ^a	serious ^b	not serious	not serious	none	9635/9821 (98.1%)	11288/12821 (88.0%)	RR 1.539 (1.013 to 2.341)	475 more per 1,000 (from 11 more to 1,000 more)	 MODERATE	
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Uptake of cervical cancer screening - RCTs - urban

13 3,4,5,6,9,10,11,12,13,19,20,27,30	randomised trials	not serious ^a	serious ^b	not serious	not serious	none	25345/78618 (32.2%)	14607/36016 (40.6%)	RR 2.086 (1.537 to 2.831)	440 more per 1,000 (from 218 more to 743 more)	 MODERATE	
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Uptake of cervical cancer screening - RCTs - rural

4 1,14,29,30	randomised trials	not serious ^a	serious ^b	not serious	not serious	none	10272/12837 (80.0%)	11498/14326 (80.3%)	RR 1.401 (1.135 to 1.730)	322 more per 1,000 (from 108 more to 586 more)	 MODERATE	
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Uptake of cervical cancer screening - RCTs - age <50 years old


12 4,5,6,9,10,13,15,17,18,22,25,26	randomised trials	not serious ^a	serious ^b	not serious	not serious	none	18038/51179 (35.2%)	16955/56609 (30.0%)	RR 1.948 (1.609 to 2.360)	284 more per 1,000 (from 182 more to 407 more)	 MODERATE	
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Uptake of cervical cancer screening - RCTs - age 50+ years old


11 4,5,6,9,10,13,15,17,22,25,26	randomised trials	not serious ^a	serious ^b	not serious	not serious	none	6903/26341 (26.2%)	7147/28418 (25.1%)	RR 2.246 (1.440 to 3.504)	313 more per 1,000 (from 111 more to 630 more)	 MODERATE	
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Certainty assessment							No of patients		Effect		Certainty	Importance
No of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	HPV self-sampling	clinician-based sampling and cervical cancer screening services	Relative (95% CI)	Absolute (95% CI)		


Uptake of cervical cancer screening - RCTs - low socioeconomic status

4 ^{13,14,25,30}	randomised trials	not serious ^a	serious ^b	not serious	not serious	none	10042/12859 (78.1%)	11373/14853 (76.6%)	RR 1.622 (1.153 to 2.283)	476 more per 1,000 (from 117 more to 982 more)	 MODERATE	
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Uptake of cervical cancer screening - RCTs - high socioeconomic status

3 ^{13,25,30}	randomised trials	not serious ^a	not serious	not serious	not serious	none	881/2400 (36.7%)	347/1352 (25.7%)	RR 1.400 (1.147 to 1.709)	103 more per 1,000 (from 38 more to 182 more)	 HIGH	
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Uptake of cervical cancer screening - RCTs - supervised

2 ^{14,24}	randomised trials	not serious ^a	serious ^b	not serious	not serious	none	50637/167026 (30.3%)	12868/73229 (17.6%)	RR 2.214 (1.799 to 2.725)	213 more per 1,000 (from 140 more to 303 more)	 MODERATE	
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Uptake of cervical cancer screening - RCTs - unsupervised

27 ^{1,2,3,4,5,6,7,8,9,10,11,12,13,15,16,17,18,19,20,21,22,23,25,26,27,28,29}	randomised trials	not serious ^a	serious ^b	not serious	serious ^d	none	9362/9578 (97.7%)	11111/12553 (88.5%)	RR 1.633 (0.739 to 3.608)	560 more per 1,000 (from 231 fewer to 1,000 more)	 LOW	
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Linkage to clinical assessment or treatment of cervical lesions following a positive result - RCTs

6 ^{3,9,11,18,22,25}	randomised trials	not serious ^f	serious ^b	not serious	not serious	none	724/1162 (62.3%)	245/573 (42.8%)	RR 1.118 (0.797 to 1.569)	50 more per 1,000 (from 87 fewer to 243 more)	 MODERATE	
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Frequency of cervical cancer screening - not reported

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Social harms and adverse events - not reported

Certainty assessment							№ of patients		Effect		Certainty	Importance
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	HPV self-sampling	clinician-based sampling and cervical cancer screening services	Relative (95% CI)	Absolute (95% CI)		
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CI: Confidence interval; RR: Risk ratio

Explanations

- Not downgraded for risk of bias for the uptake of cervical cancer screening outcome. This outcome was measured by lab/medical records (# kits sent in for testing and # patients who got the Pap smear or VIA), not by self-report. Though blinding of participants/personnel nor blinding of outcome assessment occurred, blinding or not blinding should not have made a difference in uptake.
- Downgraded for substantial heterogeneity (I-squared > 80%).
- Single study
- Downgraded because the 95% confidence interval includes both appreciable benefit and harm.
- Publication bias suspected because the single included study for this self-sampling kit method of delivery had a small sample size (and small number of events).
- Not downgraded for lack of blinding because linkage to care was measured by lab/medical records, not by self-report.

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