

# Comparing Clinician-Collected and Self-Collected Tests for Detecting High-Risk HPV Infection among Female-to-Male Transgender Adults

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## What was the research about?

Human papillomavirus, or HPV, is the most common sexually transmitted infection in the United States. Thirteen types of HPV cause almost all cancers of the cervix, or the lower part of the uterus. Testing for high-risk HPV infection can help detect cervical cancer early.

Anyone who has a cervix can get cervical cancer, including transmasculine adults, or transgender people assigned a female sex at birth but who identify as male.

The study looked at two ways to test for high-risk HPV infection in transmasculine adults:

- The clinician-collected test is like a Pap test. A doctor, nurse practitioner, or other clinician takes a swab of the cervix to collect cells, and a laboratory tests the cells.
- The self-collected test is a way for people to do the test themselves. They insert a swab a short distance into the vagina to collect cells. Because they don't need to go to the doctor, more people may be willing to test for high-risk HPV infection this way.

In people who had both tests, the research team compared the accuracy of the self-collected test with the clinician-collected test. The team also asked people their views on the tests.

## What were the results?

**Accuracy.** For 71 percent of people with high-risk HPV, the self-collected test found the same results as the clinician-collected test.

- The self-collected test worked well to confirm that there was no infection. When the clinician-collected test reported no infection, the self-collected test usually showed the same result.
- The self-collected test was less accurate for detecting an infection. It detected high-risk HPV in only 15 of 21 people who had an infection, according to the clinician-collected test.

**Views of the tests.** More than 90 percent of people preferred the self-collected test to the clinician-collected test. They said the self-collected test was easy, private, and gave them a sense of being in control of their health care. However, some weren't sure if they did the test correctly. Also, some felt physical and emotional discomfort during the self-collected test.

## Who was in the study?

The study included 131 transmasculine adults with a cervix who were sexually active in the past three years. All people in the study lived in or near Boston, Massachusetts. Their ages ranged from 21 to 50. The average age was 27, and 74 percent were taking male

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hormones. Among participants in the study, 76 percent were white, 10 percent were Hispanic, 5 percent were Asian, and 3 percent were African American.

### **What did the research team do?**

The research team obtained two swabs from each person during a clinic visit. One was from the self-collected test. The other was from the clinician-collected test. The team tested the swabs for high-risk HPV and compared the results of both tests.

### **What were the limits of the study?**

Most adults in the study were young and white. The results may be different for people who are older or of other races. People in the study agreed to have cervical exams done by clinicians. They may differ from transmasculine adults who avoid these exams.

The study took place at one clinic, which specializes in caring for lesbian, gay, bisexual, and transgender people. The results may not apply to people who live in other areas or receive health care at other places.

Future research could include transmasculine adults who are older, of different races, or live in different regions.

### **How can people use the results?**

Clinicians who provide care for transmasculine adults may consider offering the self-collected test to check for high-risk HPV infection. This test may be a good alternative for those who prefer it, although it doesn't detect high-risk HPV infection as well as the clinician-collected test.

*To learn more about this project, visit [pcori.org/Reisner080](http://pcori.org/Reisner080).*