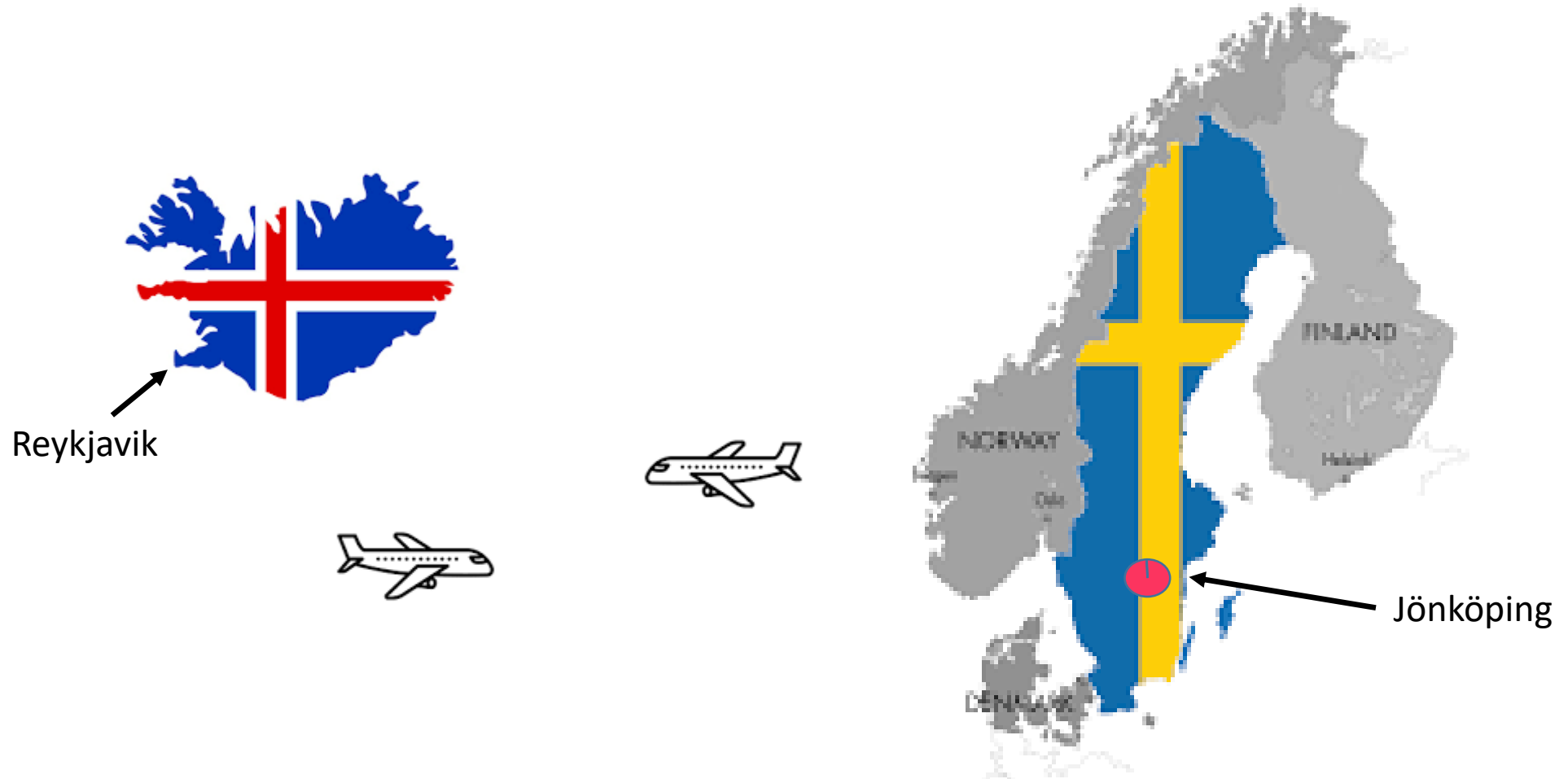


Sweden helping Iceland educating cytotechninicians



Christina Kåbjörn Gustafsson, MD PhD, President Swedish Society of Clinical Cytology

Re-organisation of the screening programme in Iceland

- A private laboratory was responsible for the screening programme in Iceland
- After evaluation of the screening programs for breast and cervical cancer in Iceland, the Icelandic health authorities decided to re-organize both programs in line with European guidelines where both screening programs were moved to the public health sector.
- The Icelandic screening committee recommended formal cooperation with one of the neighbouring countries regarding screening guidelines.

Joint venture with Denmark

- Introduction of primary HPV screening 1 January 2021 lead to the number of cervical smears in Iceland would only be about 8.000 per year, a number much too low to fulfill any quality standards.
- In 2021 a joint venture started with Hvidovre hospital near Copenhagen in Denmark. Behind the partnership lied a desire by the Icelandic health authorities to update the Icelandic screening guidelines.
- Several cytotechnicians working in the private laboratory chose to retire.

Icelandic women protested

- The Icelandic woman protested and demanded that their smear tests should be analysed in Iceland.
- No more joint venture with Denmark.
- No cytotechnicians at Landspítali University hospital in Reykjavik but all the samples to the Pathology and cytology department!



Sweden approached

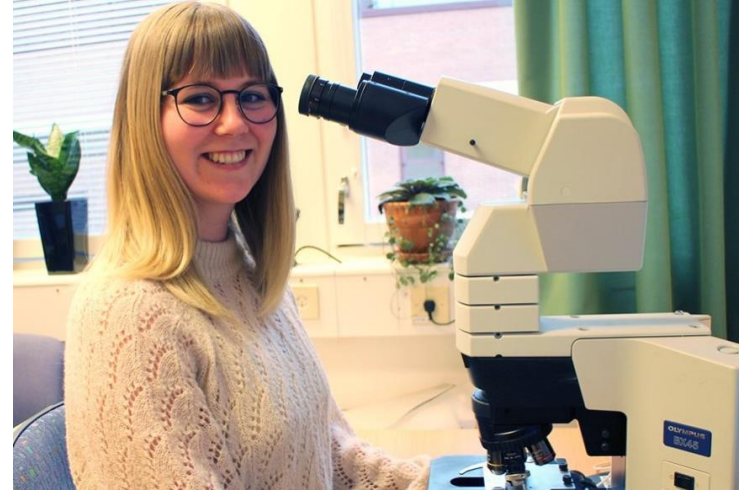
So,

- An icelandic cytopathologist from Reykjavik, Ingibjörg Guðmundsdóttir contacted me. Explained that Iceland was about to build up a screening programme joined to the University hospital.
- They wanted help to educate cytotechnicians, they had 3 bio technicians.
- Lead to a co operation and a declaration of intent between Landspítali and Ryhov hospital in Jönköping.



Two year programme

First trip year 1.



- For 2 months 1 student works with CTs on a daily basis doing side by side screening
- Primarily focus on benign changes like metaplasia, inflammation, infection and true atypical cells.
- Learning about the laboratory, the quality of the method, Thin-prep.
- Learning about diagnostic quality control on a yearly base, false negative, 10 yrs if HISL.

Second trip year 2.

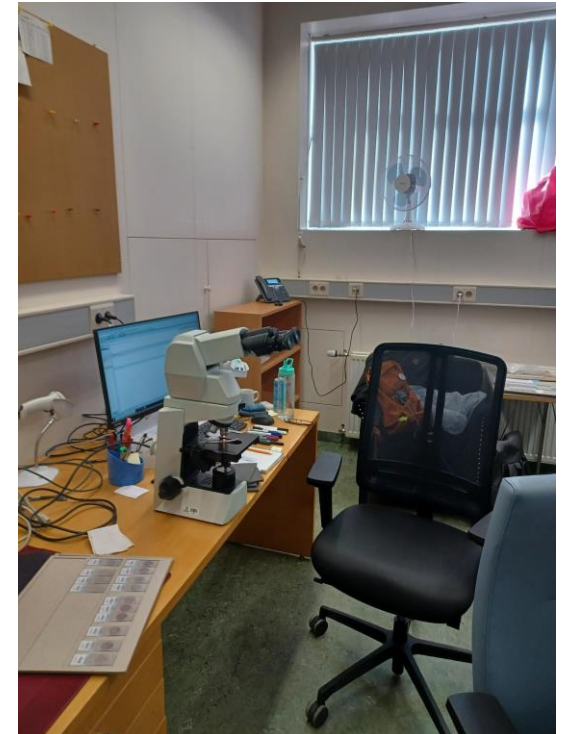
- For 1 month 1 student works with CTs on a daily basis doing side by side screening
- Primarily focusing on atypical changes, squamous and glandular.

First trip year 1

- 1 CT from Jönköping to Landspítali Hospital Reykjavik Iceland for 2 weeks follow up

Second trip year 2

- 1 CT from Jönköping to Landspítali for 1-2 weeks follow up



Goal

Do a Quate examen within 3-4 yrs.

