



Cervical cancer prevention

UAE Experience

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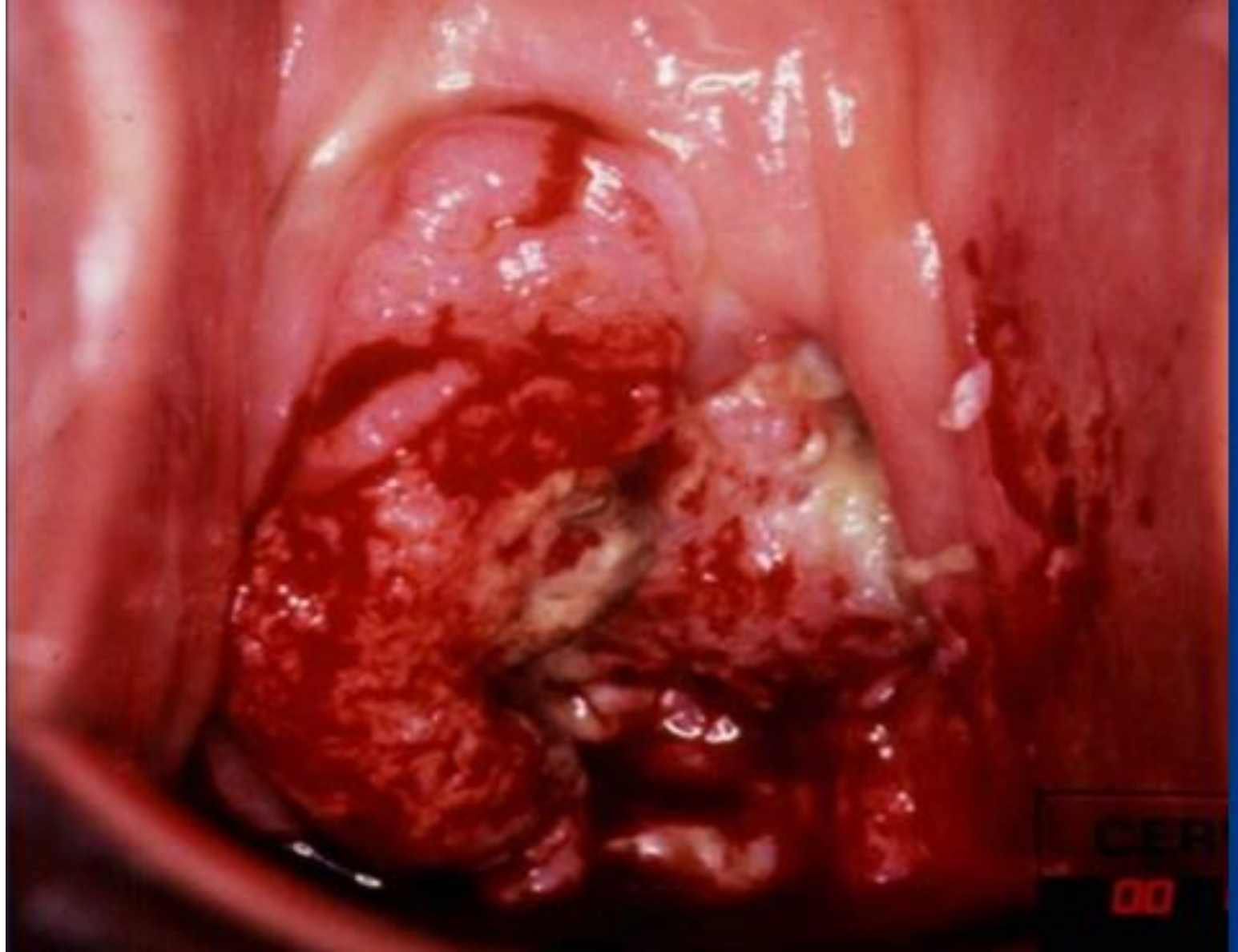


Objective

- The cervical cancer screening and HPV vaccination program in UAE

Case :

- 43 years old , para 4, c/o history of post coital bleeding started 2 years back,then continuous irregular vaginal bleeding of 2 months duration
- LMP ...??
- Contraception...tubal ligation
- Previous pap smears...not done



**PREVENTION Concept originated from China since
2600 BC**

Superior doctors **PREVENT** the disease;

Mediocre doctors treat the disease **BEFORE** clinical evidence;

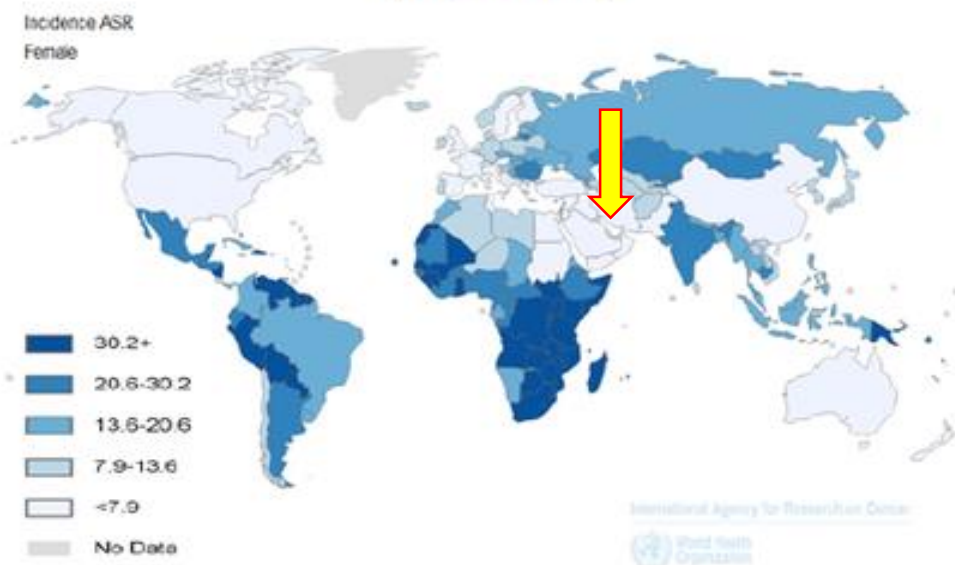
Inferior doctors treat the disease **AFTER** clinical evidence



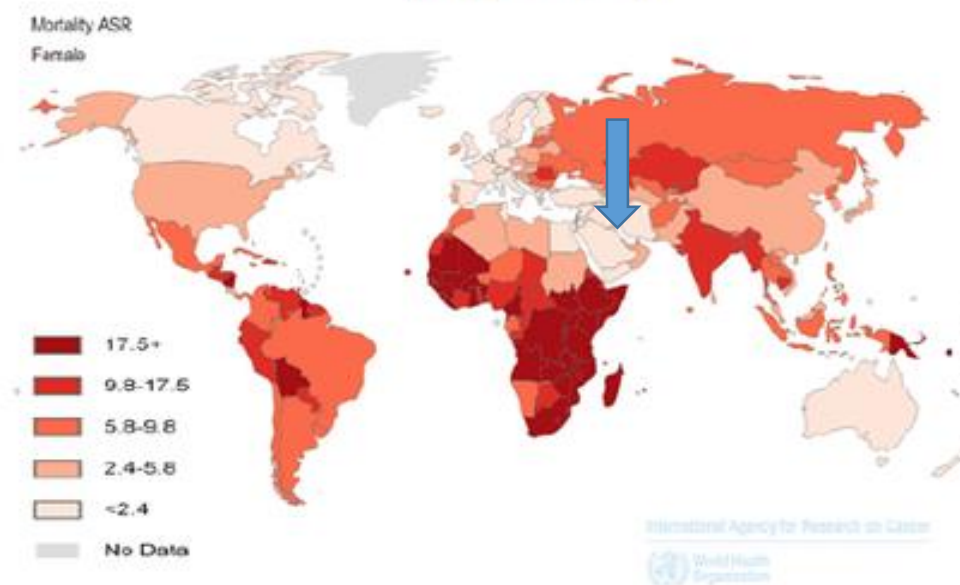
Cervical cancer

- Cervical cancer is the fourth most frequent cancer in women with an estimated 570,000 new cases in 2018 representing 6.6% of all female cancers
- Approximately 90% of deaths from cervical cancer occurred in low- and middle-income countries

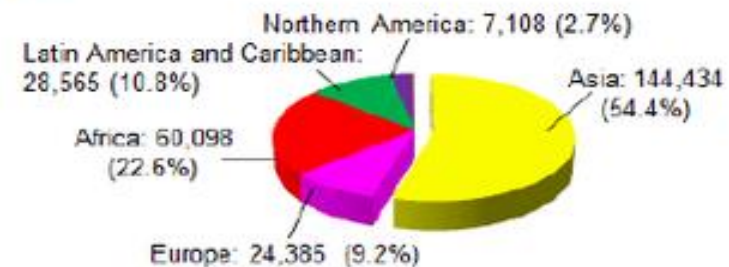
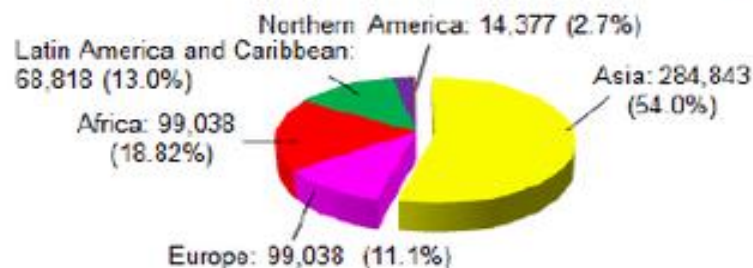
Cervical cancer incidence (527,624 cases)



Cervical cancer mortality (265,653 cases)



Mortality: Incidence ratio: 50%

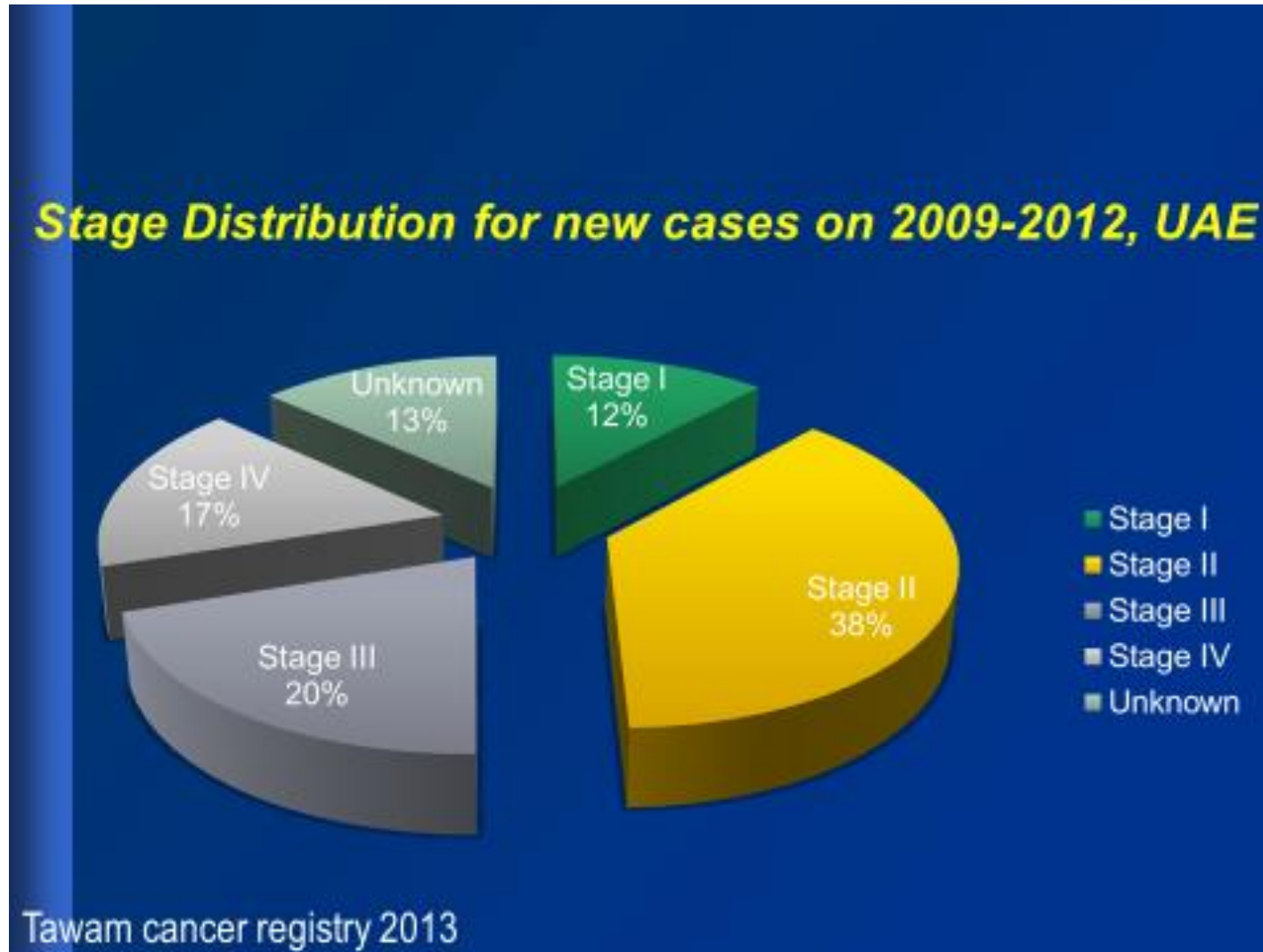


Worldwide cervical cancer incidence and mortality in 2012. Geographical distribution of cervical cancer incidence (left) and mortality (right) worldwide. Approximately 85% of cases occur in developing countries. Mortality: incidence rate ratios for cervical cancer were obtained from GLOBCAN

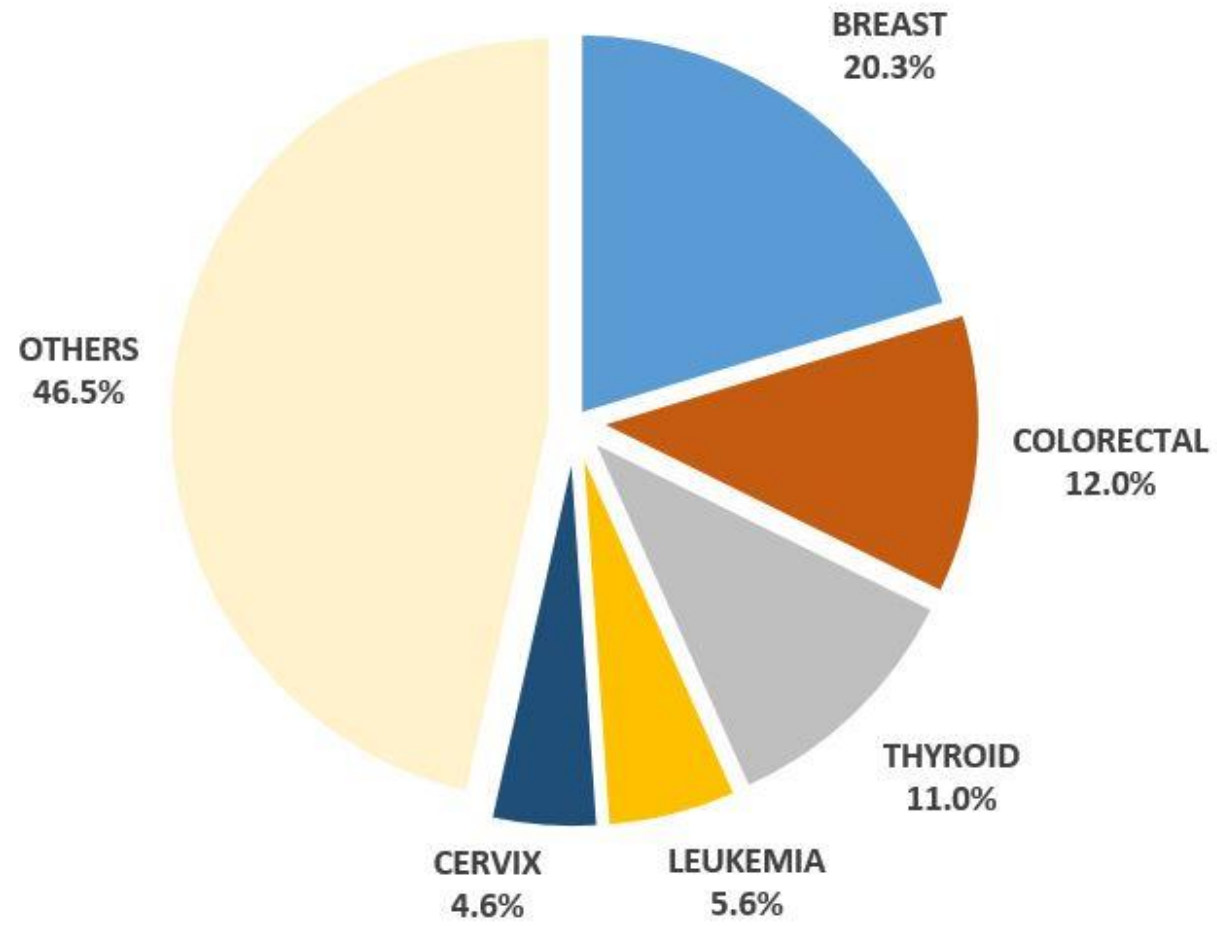
Burden of cx ca in UAE

- Cervical cancer is the second most common cancer in women , after breast cancer (breast 44.7%, cervical 7.2%) on 2010.
- The Incidence rate is 6 per 100,000 women on 2010

Stage Distribution for new cases on 2009-2012, UAE



5 Most common Cancers in Abu Dhabi - 2014



Metastatic cancers and skin cancers excluded in Abu Dhabi Central Cancer Registry Database

Principles for screening programs

Principle

Important health problem

Recognizable latent stage

Natural history understood

Test is easy to perform and interpret, acceptable

Test is accurate, reliable, sensitive and specific

Accepted treatment

Early treatment more effective

Policy on who to treat

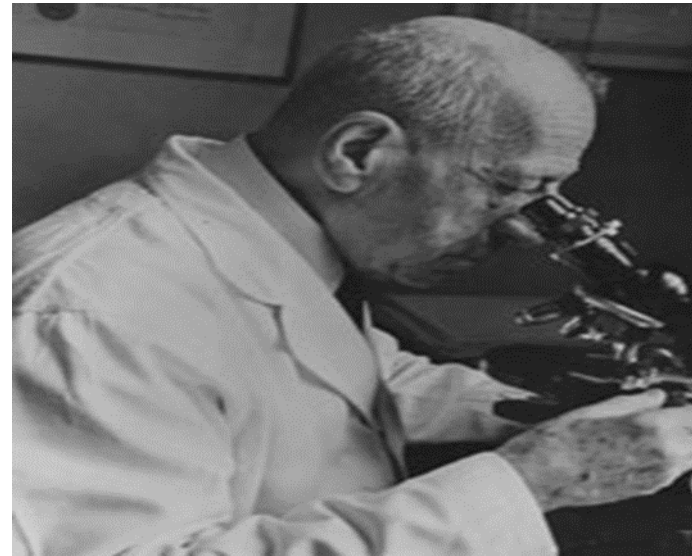
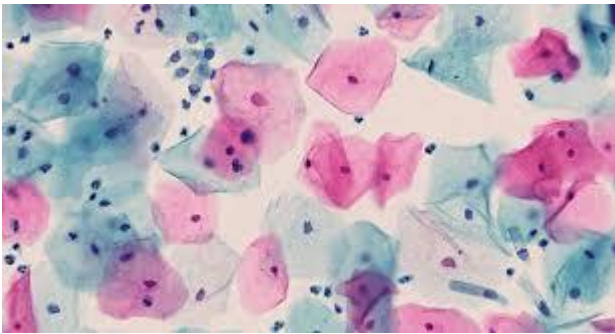
Cost effective

Ongoing case finding

Primary Prevention

SCREENING – Pap Smear

- The Pap test examines a cellular sample derived from exfoliated or mechanically dislodged cells of the cervix, vagina, and in some cases, endometrium.
- These cells are then examined by light microscopy.



- The Nobel Assembly at Karolinska Institute has decided on 6 October 2008 to award The Nobel Prize in Physiology or Medicine for 2008 with one half to Harald zur Hausen for his discovery of "human papilloma viruses causing cervical cancer"



- HPV “STD” and Cervical cancer is preventable disease

Vaccine implementation Recommendation

As Primary Prevention in Cervical Cancer

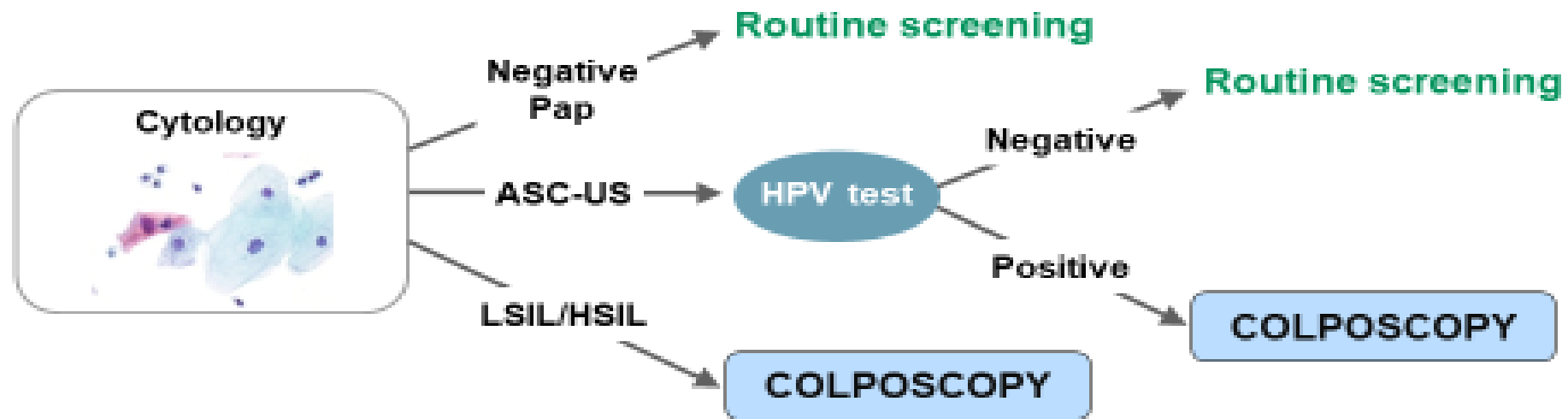
HPV testing as a part of the screening programs

WHO recommendation



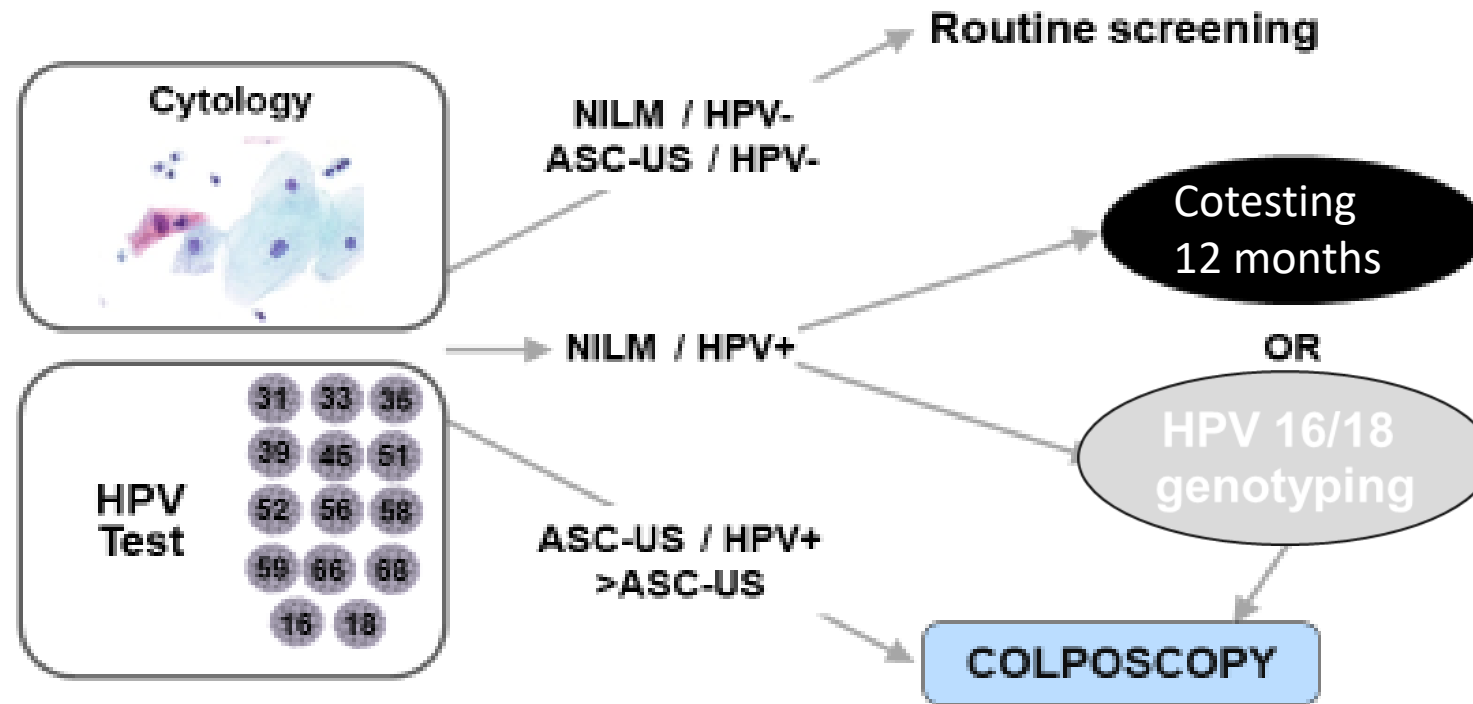
Almost all of cervical cancer deaths could be **avoided** if known effective interventions were available to all women and implemented, including immunizing adolescent girls against human papilloma virus (HPV) and cervical screening and treatment of pre-cancerous lesions.

ASC-US Triage Strategy



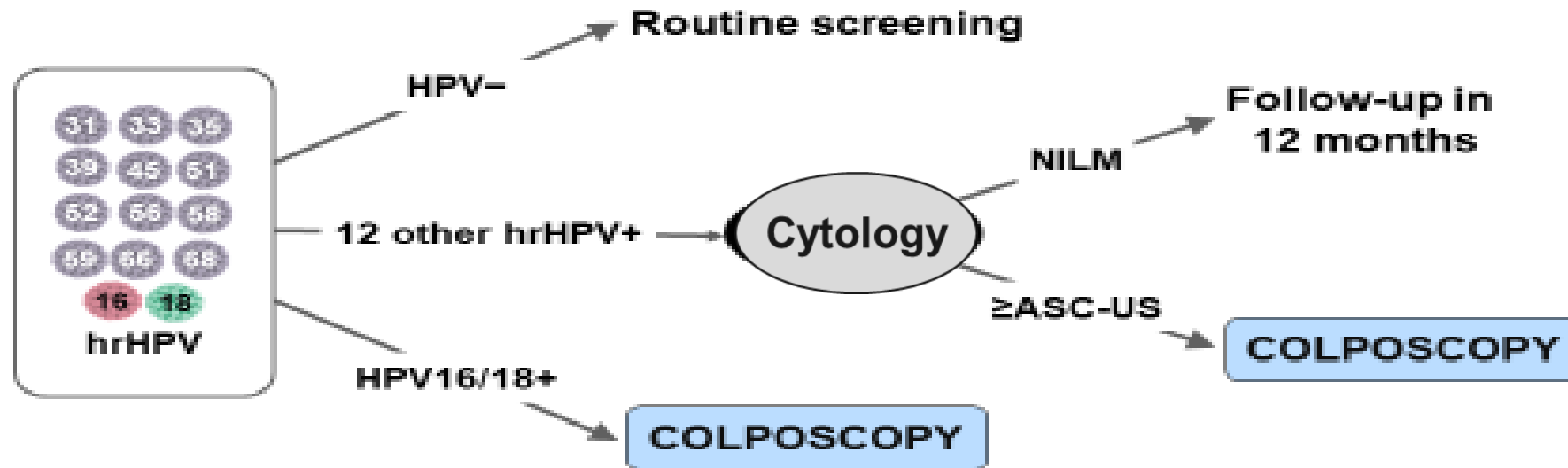
This strategy is a recommended in US Guidelines for women 21+ every three years

Cotesting Strategy



This strategy is recommended in US Guidelines for women 30+ every five years as the preferred option

HPV with Genotyping and Reflex Cytology Strategy



hrHPV=high risk HPV



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challenges



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Recent studies document knowledge gaps about HPV at all levels :

- Among policy makers
- Healthcare providers
- General population – in both the industrialized and developing worlds.

We may have the money, but unless there is political will, there will be no proper screening program implemented!



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Reaching health-policy makers

- Professional meetings
- Guidelines and technical updates from key global agencies, including the World Health Organization (WHO)
- The pharmaceutical industry, provide a range of information on issues key to introducing cervical cancer screening and vaccine

Reaching healthcare providers

- Training, education, and communication tools to facilitate effective discussions with their patients, such as simple talking points and visual aids.
- In-service trainings or Continuing Medical Education courses for credit,
- Medical journals and other publications
- Panel discussions during conferences and meetings.

Reaching the general public

- Provide accurate, clear and simple information to educate the public about HPV, cervical cancer, and vaccine programs
- Educational programs that deliver information through multiple media
- Parents and caregivers – the decision makers , an important primary audience for communication about HPV vaccine

Prevent Cervical Cancer

with the **Right Test at the Right Time**



Screening tests can find abnormal cells so they can be treated before they turn into cancer.

- ④ The Pap test looks for changes in cells on the cervix that could turn into cancer if left untreated.
- ④ The human papillomavirus (HPV) test looks for the virus that causes these cell changes.

The only cancer the Pap test screens for is cervical.



HPV is the main cause of cervical cancer.



- ④ HPV is a very common virus, passed from one person to another during sex.
- ④ Most people get it, but it usually goes away on its own.
- ④ If HPV doesn't go away, it can cause cancer.

Most women don't need a Pap test every year!

Have your 1st Pap test when you're

21

If your test results are normal, you can wait **3 years** for your next Pap test.



HPV tests aren't recommended for screening women under 30.



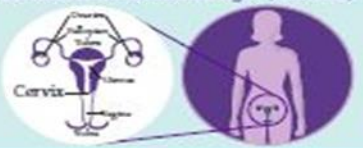
When you turn **30** you have a choice:

If your test results are normal, get a Pap test every **3 years**, OR

Get both a Pap test and an HPV test every **5 years**.



The cervix is the lower, narrow end of the uterus (womb) that connects the uterus to the vagina (birth canal).



You can stop getting screened if:

- ④ You're older than 65 and have had normal Pap test results for many years.
- ④ Your cervix was removed during surgery for a non-cancerous condition like fibroids.

No insurance? You may be able to get free or low-cost screening through CDC's National Breast and Cervical Cancer Early Detection Program. Call (800) CDC-INFO or scan this QR code.



National Center for Chronic Disease Prevention and Health Promotion
Division of Cancer Prevention and Control



CERVICAL CANCER FACTS

It's the 2nd Most Common



④ Each year, approximately 13,300 women in the United States get Cervical Cancer.

④ Sadly, Cervical Cancer generally produces no signs or symptoms.

④ The Pap test only screens for cervical cancer. It does not screen for any other gynecologic conditions.

SYMPTOMS

Pelvic pain or pain during intercourse



**Spread the word...
Knowing the symptoms of cervical cancer could save your life**

Do you have?

- Abnormal bleeding: during or after sexual intercourse, or between periods
- Postmenopausal bleeding
- Unusual and/or unpleasant vaginal discharge
- Discomfort or pain during sex
- Lower back pain.

These are health care symptoms with



CERVICAL CANCER

quick facts

FACTS

IT IS THE 2ND MOST COMMON CANCER AFFECTING WOMEN

CERVICAL CANCER IS CAUSED BY A COMMON VIRUS KNOWN AS HUMAN PAPILLOMAVIRUS (HPV)

EACH YEAR, ABOUT 300,000 WOMEN WORLD-WIDE ARE DIAGNOSED WITH CERVICAL CANCER AND MORE THAN 270,000 DIE FROM IT

MAJOR RISK FACTORS

SMOKING

WEAKENED IMMUNE SYSTEM

OVERWEIGHT OR OBESE

RELATIVES WITH CERVICAL CANCER HISTORY

SYMPTOMS

ABNORMAL VAGINAL BLEEDING OR DISCHARGE

BLEEDING BETWEEN REGULAR MENSTRUAL PERIODS, AFTER MENOPAUSE OR AFTER SEXUAL INTERCOURSE

PELVIC PAIN, PAIN DURING SEXUAL INTERCOURSE OR URINATION



HEALTH IS A HUMAN RIGHT



FAMILY
PLANNING



SKILLED BIRTH
ATTENDANTS



ANTENATAL
VISITS



VACCINES



ANTI-RETROVIRAL
TREATMENT



TUBERCULOSIS
TREATMENT



INSECTICIDE-
TREATED BED NETS

THAT 400 MILLION ARE WAITING FOR

SOURCE: WORLD HEALTH ORGANIZATION / WORLD BANK GROUP (2015)

HEALTH FOR ALL: RIGHT. SMART. OVERDUE.

Annual national campaign for early detection of breast and cervical cancers

- The campaign aims to raise awareness; educate and provide information on the importance of early detection of breast and cervical cancers; highlight prevention methods and risk factors; underscore the significance of early detection, diagnosis, treatment, and rehabilitation; and identify local health centers and hospitals that provide diagnosis and treatment for all women citizens and residents.



CERVICAL CANCER
AWARENESS

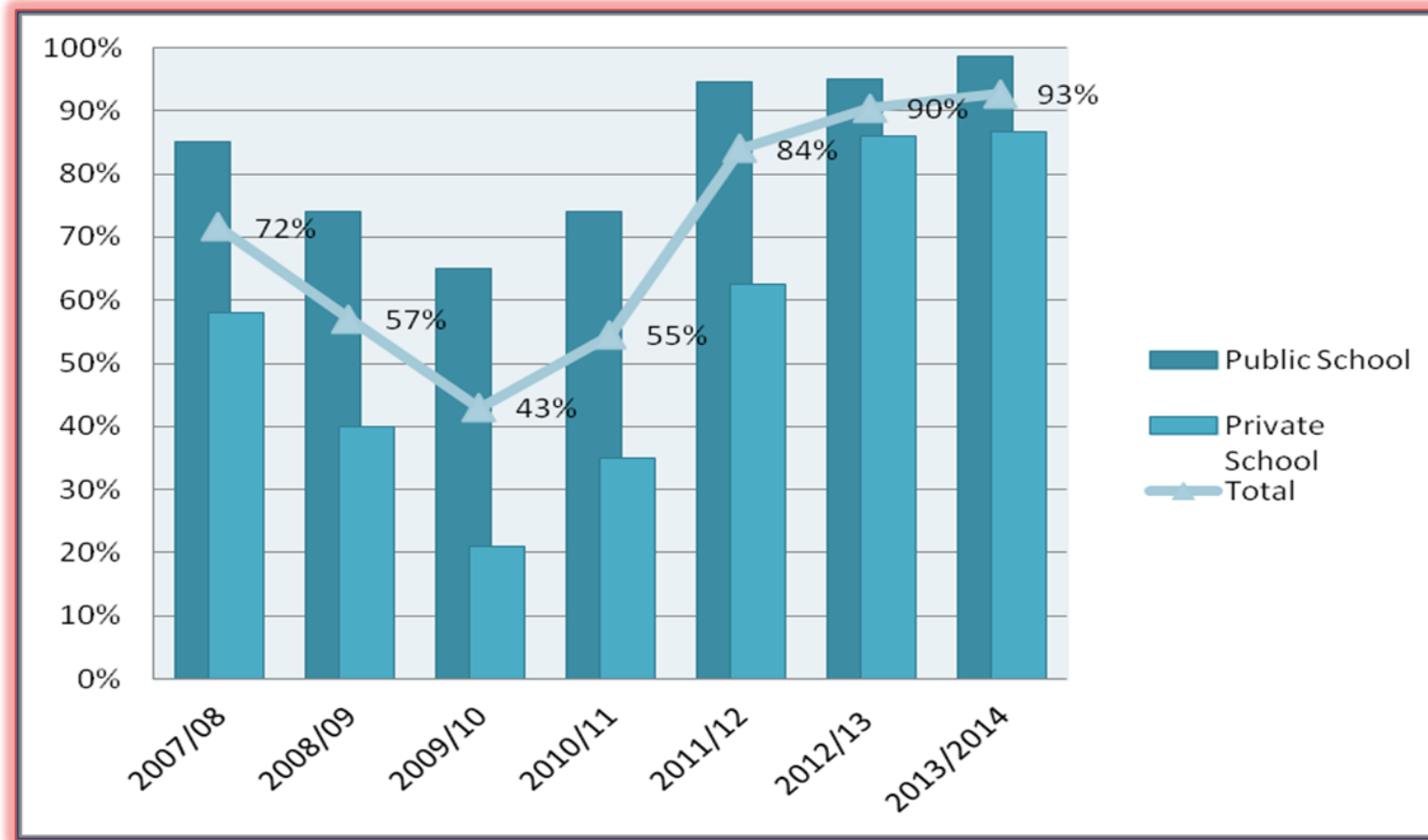


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Abu Dhabi HPV vaccination Program implementation

- Date: Initiated in March 2008
- Delivery: whole Abu Dhabi , School-based Program, utilizing the existing school vaccination program
- Target population: all female students in Grade 11 enrolled in government or private schools (mean age 16-17 years)
- Free of charge for nationals , with small copayment for non-nationals (50 Dhs./ about 15 USD for the three doses), cuerrently free of charge for all
- Quadrivalent HPV vaccine adopted initially
- Catch up vaccination for female up to age of 26 years.

Achievements-HPV Vaccine Uptake, School-based Program



Introduction of Cervical Cancer Screening in ABU DHABI 2013

Applies to: All women aged 25- 65 years old who are sexually active (married, divorced, widowed) residing in the Emirate of Abu Dhabi
First Pap test should be taken at the age of 25 or 3 years after marriage (whichever comes first)

Subsequent screening :

Women 25-49 years every 3 years

Women 50-65 years every 5 years

Immunocompromised =ANNUAL screening

The new cervical cancer screening guidelines in Abu Dhabi, approved on May 2018:

- women 25-29 years with cytology,
- women 30—69 years with cytology and HPV as co-testing
- Rescreening interval for 25- 29 every 3 years, for 30-65 every 5 years
HPV test is done as triage for women ≥ 25 and co-testing for women ≥ 30
- Women with suspicious visible lesions should be refer immediately to Gyna/oncologists
- All negative cytology with positive HPV test refer to colposcopy specialized centers

All sexually active women (past or present), symptom free, aged 25- 65 years residing in the Emirate of Abu Dhabi, except where exclusion criteria for screening apply.

Exclusion criteria from screening if:

- They have received a total hysterectomy for benign indications.
- They are over 65 years, (if the last three previous smears were negative).

Women who have had subtotal hysterectomy (preserving the cervix) or hysterectomy due to cervical cancer or precancerous condition should continue to have cervical screening.



- A well organized program depends on screening a sufficiently wide age range, at an interval between three and five years.
- It requires adequate population registers, an effective call-recall system, a reliable safe procedure, and good quality control.
- Though we have seen improvements, more work needs to be done to encourage a greater volume of women to participate in regular gynecological checkups. This will require an ongoing collaborative effort from all stakeholders including Government, primary healthcare providers, specialists and laboratories



DUBAI



ABU DHABI

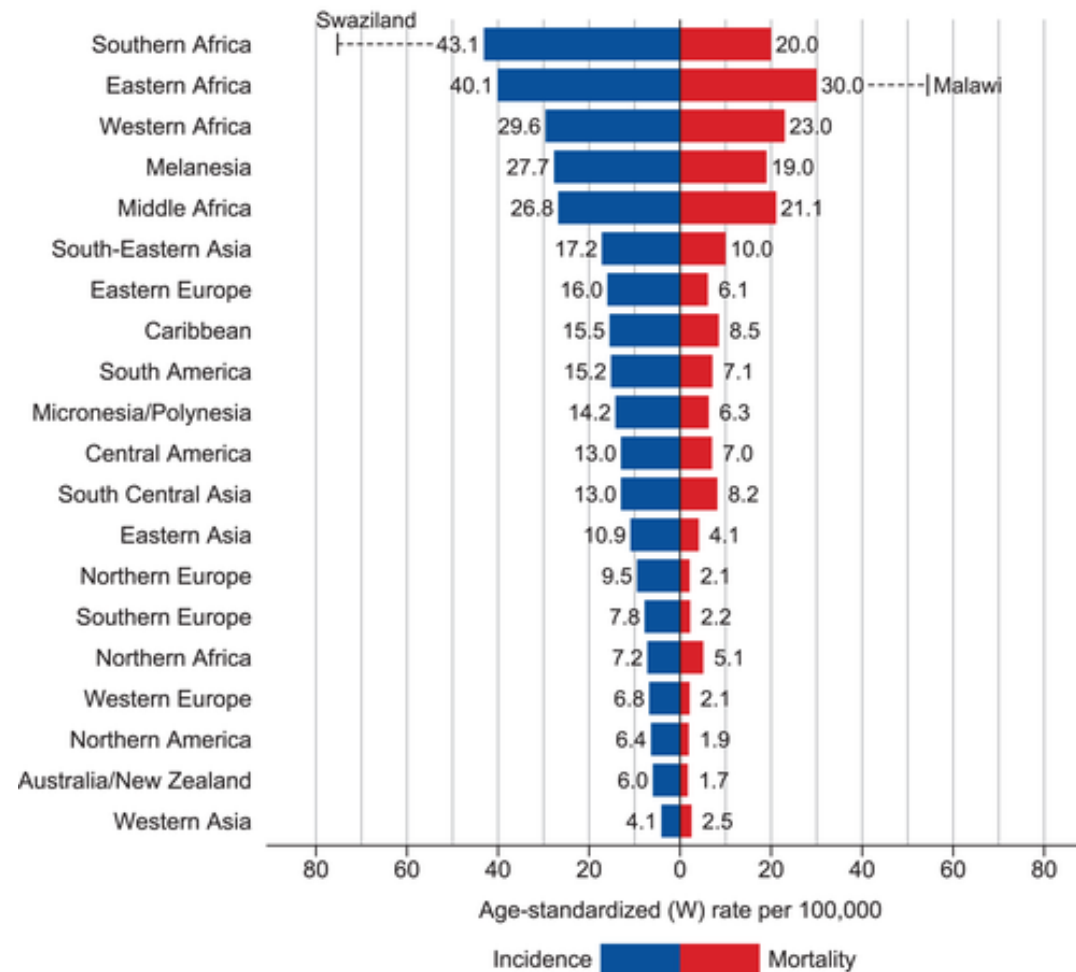


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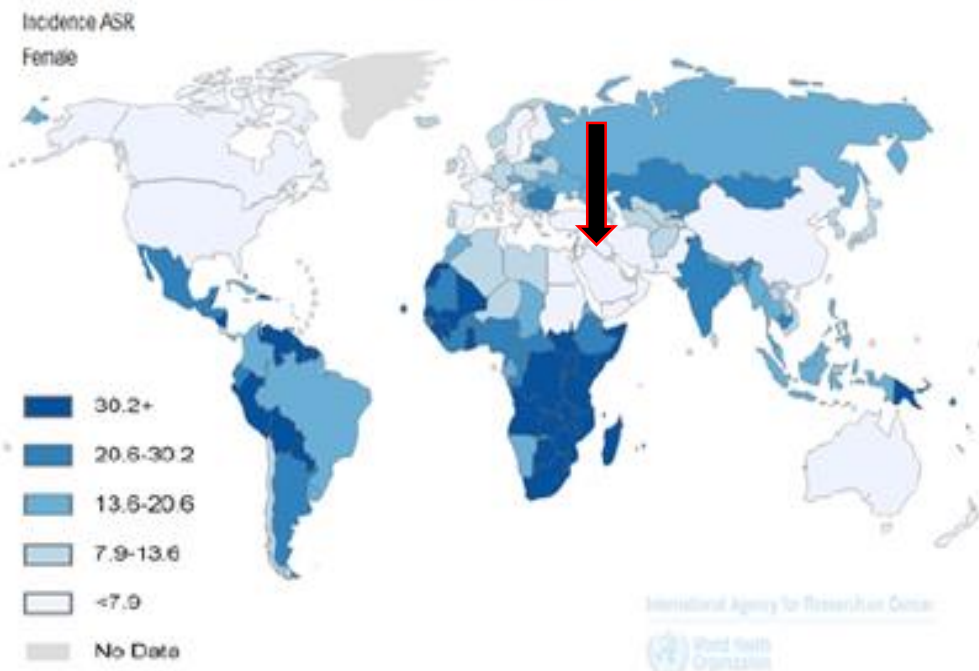
Cervix uteri



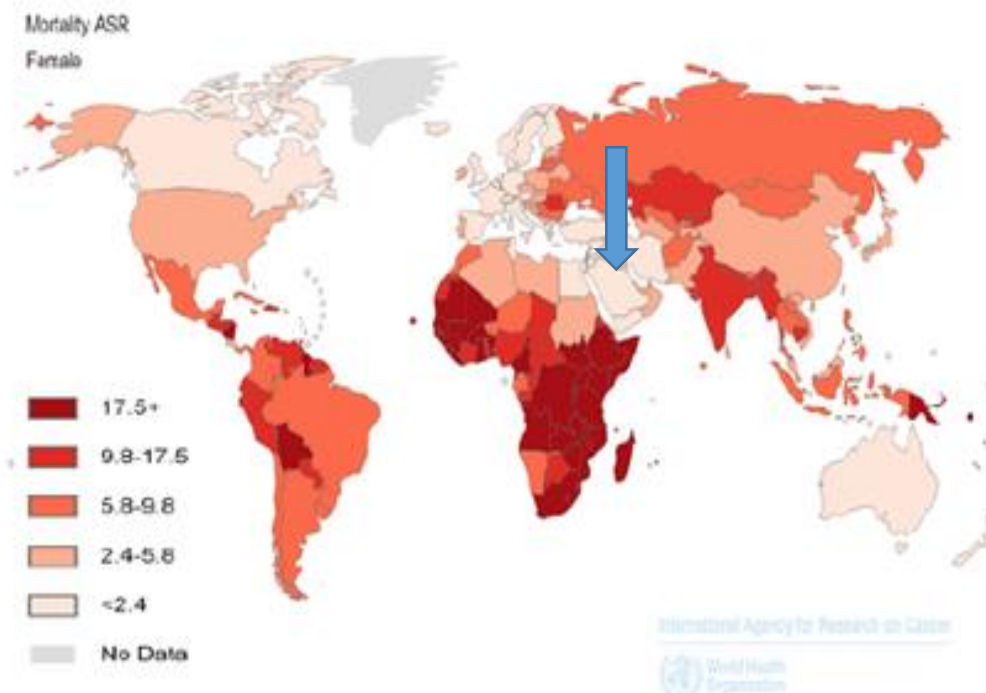
Screening and treatment process:

- Call / recall System
- Collecting smear (Doctors KAP)
- Processing and reading / reporting (Cytology & pathology)
- Management of abnormal smear / colposcopy
- Management of cervical cancer (facilities)
- Audit and quality control
- Prevalence of pre-cancer & cancer of Cx.

Cervical cancer incidence (527,624 cases)



Cervical cancer mortality (265,653 cases)



Mortality: Incidence ratio: 50%

