

PACIFIC HEADS OF HEALTH

Réunion des directeurs de la santé du Pacifique



CERVICAL CANCER PREVENTION

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STRENGTHENING CERVICAL CANCER/HPV SCREENING IN PACIFIC ISLAND COUNTRIES

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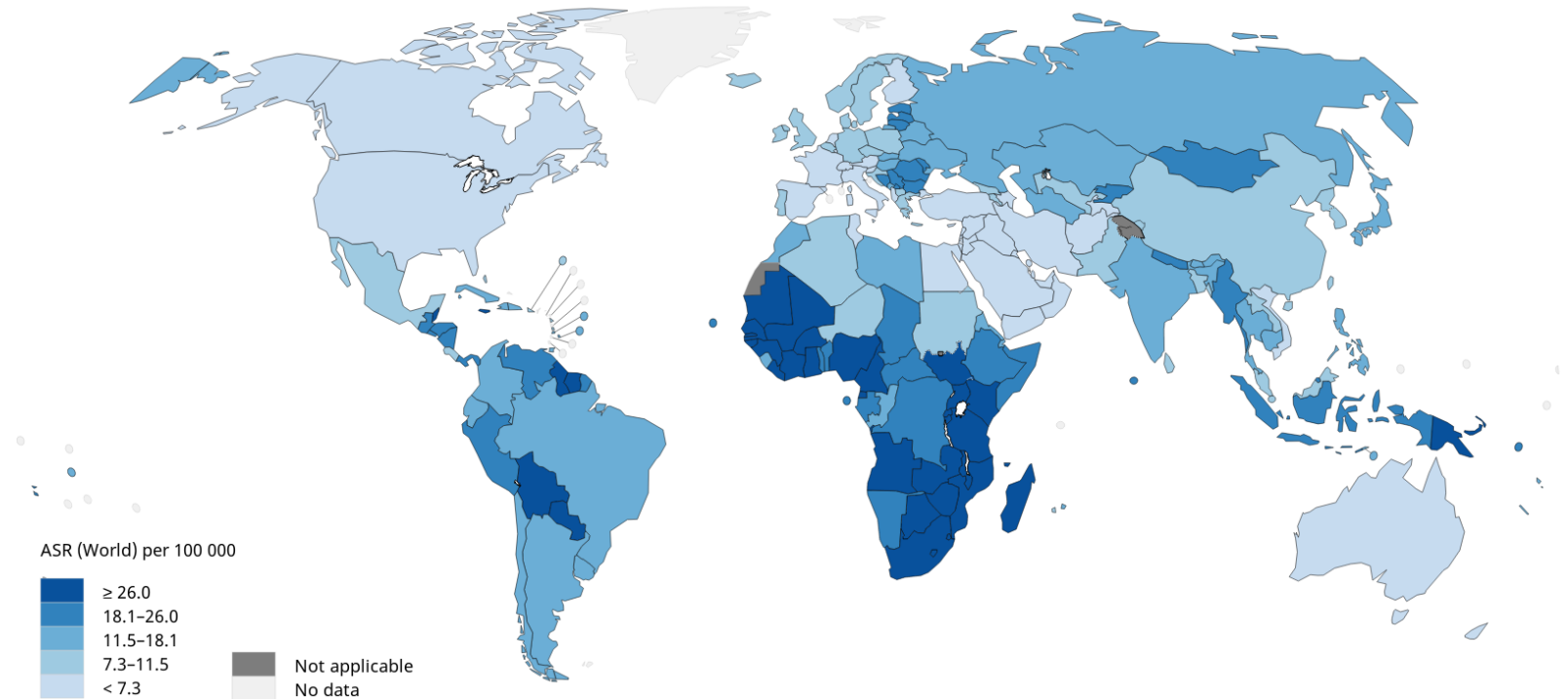
CERVICAL CANCER

- 4th most common form of cancer among women worldwide
- Human Papilloma Virus aetiology
- Preventable
- Global call for action to eliminate cervical cancer in 2018
- Global strategy for cervical cancer elimination in 2020

Cervical Cancer Global Estimates

Estimated age-standardized incidence rates (World) in 2018, cervix uteri, all ages

PICT ESTIMATES OF > 26.0 HAS NOT CHANGED



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Data source: GLOBOCAN 2018
Graph production: IARC
(<http://gco.iarc.fr/today>)
World Health Organization

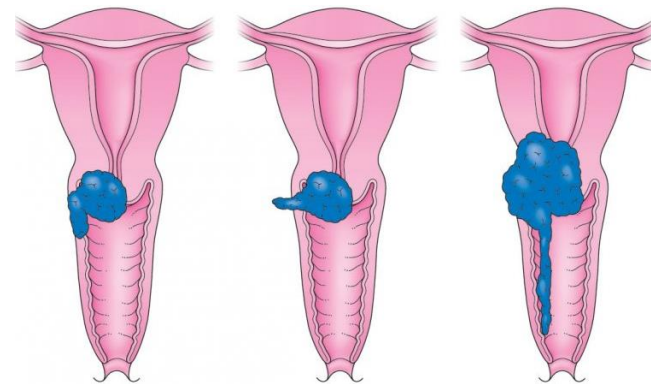
CERVICAL CANCER IN THE PACIFIC

- 2nd most common cancer causing death in women in the region.
- 7.7-9% of women in the reproductive age group are estimated to live with cervical cancer
- DALY for women living with cervical cancer in the Pacific is amongst the highest globally
- Estimated case fatality ratio of 0.7 (70% death rate)
- Cervical cancer mortality in PICTs is estimated to be 9 times the mortality rate in Australasia

HIGH CERVICAL CANCER MORBIDITY AND MORTALITY IN PICT

REASONS:

- Poor access to public health system
- Weak cervical screening program
- Late presentation
- Inadequate clinical management
- No HPV Vaccination



Cervical Cancer Elimination; WHO global strategy and Target

Global Strategy

All countries to implement cervical cancer elimination program and meet the 90-70-90 target by 2030

Global target

- . Vaccination: 90% of girls fully vaccinated with HPV vaccine by the age of 15
- Screening: 70% of women screened using high precision HPV molecular test by the age of 35 and again by the age of 45.
- Treatment: 90% of women with precancer treated and 90% of women with invasive cancer managed



CERVICAL CANCER IN THE PACIFIC

**PACIFIC REGIONAL
COMPREHENSIVE CANCER
CONTROL PROGRAM**



Cervical Cancer (29.1.2016 PIF Paper)

- In response to the Forum Leaders' decision on cervical cancer, the Pacific Community, which is mandated to work on regional health issues, is coordinating a study on the feasibility of carrying out a regional programme to address cervical cancer. This study will weigh the benefits of resourcing and conducting a regional program addressing cervical cancer, in light of the current prioritisation of addressing non-communicable diseases across the region. With guidance from the CROP Health & Population Working Group, the study will be conducted in the first half of 2016. Key recommendations will then be presented to Forum Leaders in 2016.

Cervical cancer prevention in the Pacific

[Dr Roy Watson](#)

Head of Unit Gynaecology, Central Adelaide Local Health Network; SA&NT Councillor, RANZCOG (Global Health Vol 4, 2020)

STRENGTHENING CERVICAL CANCER SCREENING IN THE PACIFIC (SPC contribution)

- HPV risk communication
- HPV screening/testing



Acknowledge Partner's contribution to HPV screen & treat in some PICT (Kirby Institute, Daffodil Centre, Family planning NSW etc)

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HPV Screening

- Situational analysis 2 countries so far (Tonga & Kiribati)



- HPV GeneXpert molecular tests
- HPV Screen & Treat in collaboration with Kirby Institute/Daffodil Centre and ACPCC

Cervical cancer HPV Screen & Treat in PICT

- SPC/Kirby assistant for Tonga will start soon, followed by Kiribati and Fiji
- Multi-partner collaboration to be able to reach more countries

Recommendations to HOH and Government

- Countries Proactive approach to Cervical cancer Elimination
- All countries to implement Cervical Cancer Elimination Program by 2030.
- HOH support to the program.

Recommendation to Development Partners

PICTs can-not do it alone

- Continuous support from Development partners is required
- Collaborative effort between partners and PICT is needed to ensure PICTs reach Global Target by 2030.

THANKYOU