

# Cervical Cancer Screening and Prevention

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# Why Cervical Cancer

- ▶ 2<sup>nd</sup> Highest cause of cancer deaths in women in Fiji and Pacific.
- ▶ Preventable
- ▶ Trend and Mortality

# Cervical Cancer Screening -Why ?

- ▶ Saves Lives-Early Detection
- ▶ Pre Cancer -Slow Growing
- ▶ Culprit Human Papilloma Virus

# Cervical Cancer Screening

- ▶ What is Cervical Cancer Screening: History
- ▶ Can the cancer be prevented
- ▶ When a woman gets post coital bleeding -  
What stage of cervical cancer is she?
- ▶ What is the transformation zone of the cervix.
- ▶ Patient comes with Paps Smear report saying she has cancer in Situ or CIN 3-What will you say?

# Cervical Cancer screening

- ▶ Guidelines
- ▶ Create Awareness, STI, Preventable
- ▶ Education and Motivation
- ▶ Universal Screening vs Opportunistic screening
- ▶ Women Friendly Environment
- ▶ Paps in entire Population.

# Cervical Cancer Screening

- ▶ Types of Screening

- ▶ Conventional Paps

- ▶ Visual Inspection with acetic acid(VIA)

- ▶ Sure Path

- ▶ HPV test,

# Cervical Cancer Screening

- ▶ Benefits
  - ▶ Early Detection
  - ▶ Early management and treatment
  - ▶ Prevent Cancer of Cervix
  - ▶ Human cost, Economic cost

# Cervical Cancer Screening

- ▶ Monitoring and Evaluation

- ▶ Register

- ▶ Results and correlations with colposcopy

- ▶ Audits

- ▶ Research



# Cervical Cancer Screening

- ▶ TZ Zone
- ▶ What is it?
- ▶ How often to do
- ▶ Abnormality -How to manage

# Cervical Cancer Screening Limitations

- ▶ Limitations of Paps Smears
  - ▶ High False Negative Rates
  - ▶ 20 to 40 percent had new cancer despite regular paps
  - ▶ Failure to acquire adequate specimen, interobserver bias and misrepresentations.
- ▶ HPV test less likely to miss CIN2 or CIN 3. Negative HPV test is more reassuring than negative Paps.

# Cervical Cancer Screening

- ▶ Sensitivity of Paps Smear -55%
- ▶ HPV test -94.6%
  
- ▶ Specificity Paps -96.8%
- ▶ HPV -94.1%
- ▶ Negative predictive value is 99%
  
- ▶ Rec 3years for Paps and 5 years for HPV

# Cervical Cancer Screening

- ▶ Effective Screening
- ▶ specificity
  - ▶ Balance between high sensitivity and acceptable
  - ▶ Screening interval appropriate (cost,morbidity)
  - ▶ Optimal screening=need for examination and regular
- ▶ follow ups
- ▶ High negative Predictive Value.

# Cervical Cancer Screening Paps Smear Reporting

- ▶ Bethesda System (TBS)
- ▶ Terminology must communicate clinically relevant information from lab to patients health care provider
- ▶ Uniform, adaptable , Reasonably reproducible
- ▶ Reflects on current understanding of cervical neoplasia

# Cervical Cancer Screening Bethesda System

- ▶ Specimen Type
- ▶ Specimen Adequacy
- ▶ General Category
- ▶ Interpretation of results

# Cervical Cancer Screening

- ▶ Epithelial cell abnormalities
  - ▶ Squamous cells
  - ▶ Low grade,
  - ▶ High grade
  - ▶ Squamous Cell Ca.
- ▶ Glandular Cells
- ▶ Interpretation of Results.

# Cervical Cancer Screening

- ▶ National Policy on Cervical Cancer Screening and Prevention