



PAHO WORKSHOP ON CERVICAL CANCER PREVENTION STRATEGIES USING VIA SCREENING AND CRYOTHERAPY TREATMENT

As part of the activities for implementing the Regional Strategy and to promote the new approaches for cervical cancer prevention, a workshop was held in Guatemala City on 1-2 June 2011 entitled “*Cervical cancer prevention strategies using VIA screening and cryotherapy treatment*”.

Cervical cancer ranks as the second most frequent cancer among women in Latin America and the Caribbean, and represents a major public health problem in the Region. Cervical cancer is largely preventable, but mortality rates in LAC have not decreased significantly despite the availability of screening programs based in cytology for over 30 years. The failure of screening programs can be characterized by factors related to limitations of cytology in a screening test, as well as the lack of access and health service organization and socio-cultural factors.

VIA technique associated with cryotherapy treatment of precancerous lesions is an alternative to cytology screening and offers the possibility of improving the impact of cervical cancer prevention programs especially in low-resource settings. Numerous studies have shown that the sensitivity of visual inspection with acetic acid performs equal to or better than cervical cytology in identifying precancerous lesions and that cryotherapy is safe and effective for the treatment of precancerous lesions.

The use of VIA and cryotherapy in the region began in a pilot project ran in Peru named TATI (acronym for the Spanish term Tamizaje y Tratamiento inmediato), which was implemented during the period May 2000- December 2004 and performed in the department of San Martin, selected as an area of low resources, limited access to health services, but with well-established health

networks and a high level of community involvement. The TATI project demonstrated that it is safe, feasible and affordable to incorporate VIA testing and cryotherapy into the health services at the primary care and to implement a sustainable cervical cancer screening program in a low resource setting. Since then, several countries in Latin America and the Caribbean are utilizing VIA screening and cryotherapy in their national programs or in specific projects in selected areas of the country.

The main advantages of VIA and cryotherapy are the immediate results and the simplicity and low cost of the test. Precancerous lesions become visible soon after application of acetic acid and that allows them to be treated in the same visit by cryotherapy (“Screen and Treat strategy”). Therefore, such procedures eliminate the need for laboratories and transport of specimens or wait for the reports of results to make a therapeutic decision. VIA Supplies are cheap and readily available; as well as, a few specialized personnel is required, laboratory technicians are not needed and the technique can be performed by mid-level health personnel if they receive adequate training and supervision. These features allow the cervical cancer screening in more health care settings, which can achieve higher coverage and, if precancerous lesions are diagnosed and treated during the same visit, reduces the number of women who may miss out on treatment because they are not able to return to the clinic at another time.

The most important limitation of VIA is that the visual tests are subjective in nature and provider dependency, so it is essential to have a good training and that it’s monitored continuously. Also it’s not the technique of choice in postmenopausal women because VIA is dependent on the full visibility of the transformation zone of the cervix. However, the transformation zone moves into the endocervical canal after menopause and may be totally invisible with aging.

The growing experiences with VIA and cryotherapy in the countries of our Region and the scientific evidence that support, led the organization of this workshop whose purpose was share these experiences, learn from each, share materials and harmonize the approach of training, quality control, monitoring and evaluation of VIA technique and cryotherapy in the context of cervical cancer prevention programs.

Dr. Silvia Palma, Deputy Minister of Hospitals of the Ministry of Public Health and Social Welfare of Guatemala and Dr. Pier Paolo Balladelli, PWR of PAHO/WHO in the country opened the meeting. More than thirty five health professionals of eleven countries of Latin America and the Caribbean (Bolivia, Colombia, El Salvador, Guatemala, Guyana, Honduras, Nicaragua, Paraguay,

Peru, Dominican Republic and Suriname) and 8 international organizations (Basic Health International, Grounds for Health, IPPF, JHPIEGO, PATH, UNFPA, WHO and PAHO) participated in the meeting. The participants were the Cervical Cancer Program managers from the Ministry of Health in the countries where VIA and cryotherapy is being used, or in those countries actively considering incorporating it into their program; as well as, Health professionals/clinicians who are leading VIA screening and cryotherapy treatment efforts in the countries listed above and International organizations involved in providing technical assistance on VIA and cryotherapy treatment for cervical cancer prevention.

Prior the meeting, all the relevant documents as the Regional Strategy for Cervical Cancer, important WHO documents, scientific publications and the speaker's presentations were circulated through a SharePoint site. In addition, as preparatory work, we asked cancer program managers to fill out a survey about the experience of VIA screening and "Screen and Treat" strategy whose analysis was presented in the second day and, once completed will be published and disseminated among the participants.

The workshop was held over two full days in the form of presentations, roundtables and forums for a debate and ended with a plenary session in which the next steps were discussed and several agreements were reached, as creating a community of virtual practice, to share resources and tools available and discuss the major issues of VIA and "Screen and treat" using the share-point of the workshop as an initial platform.

The meeting provided an opportunity to review the current scientific evidence on VIA and see the treatment strategy, sharing the country's experiences in the use of these technologies, and plan collaborative activities that strengthen cervical cancer programs. It also showed that countries value the leadership of PAHO in cervical cancer prevention and control and that there is a clear enthusiasm for the incorporation and / or expansion of VIA screening and "Screen and Treat" by the potential increase coverage, improve the monitoring and facilitating the access of women to the treatment of precancerous lesions.

The meeting report will be available soon through the website.

Guatemala city, June 17, 2011

Event Pictures



