

**Gynecologic Cancer InterGroup
Cervix Cancer Research Network**



Screening & Prevention Central and Eastern Europe - current status

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Cervix Cancer Education Symposium, February 2018

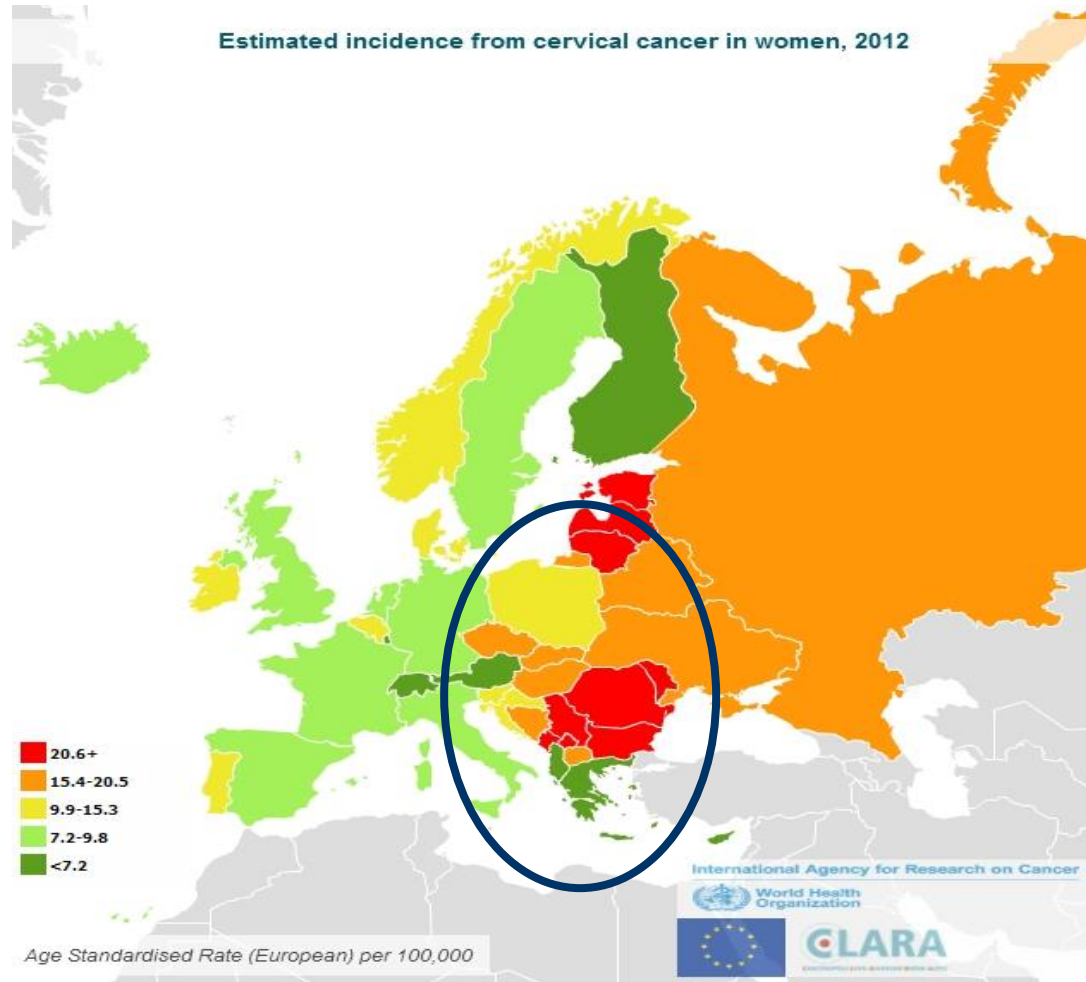
Introduction



- The incidence of cervical cancer in C. and E. Europe has been on the rise or shows stable rates
- In contrast to reduction in incidence in most countries of W. Europe
- Multiple dimensions of inequalities in cervical cancer prevalence and prevention
 - disparities in comparison to other countries
 - due to socioeconomic status, education, residency and ethnicity
 - differential barriers faced by women in access to screening and in relationships with providers

Cervix Cancer Education Symposium, February 2018

Introduction

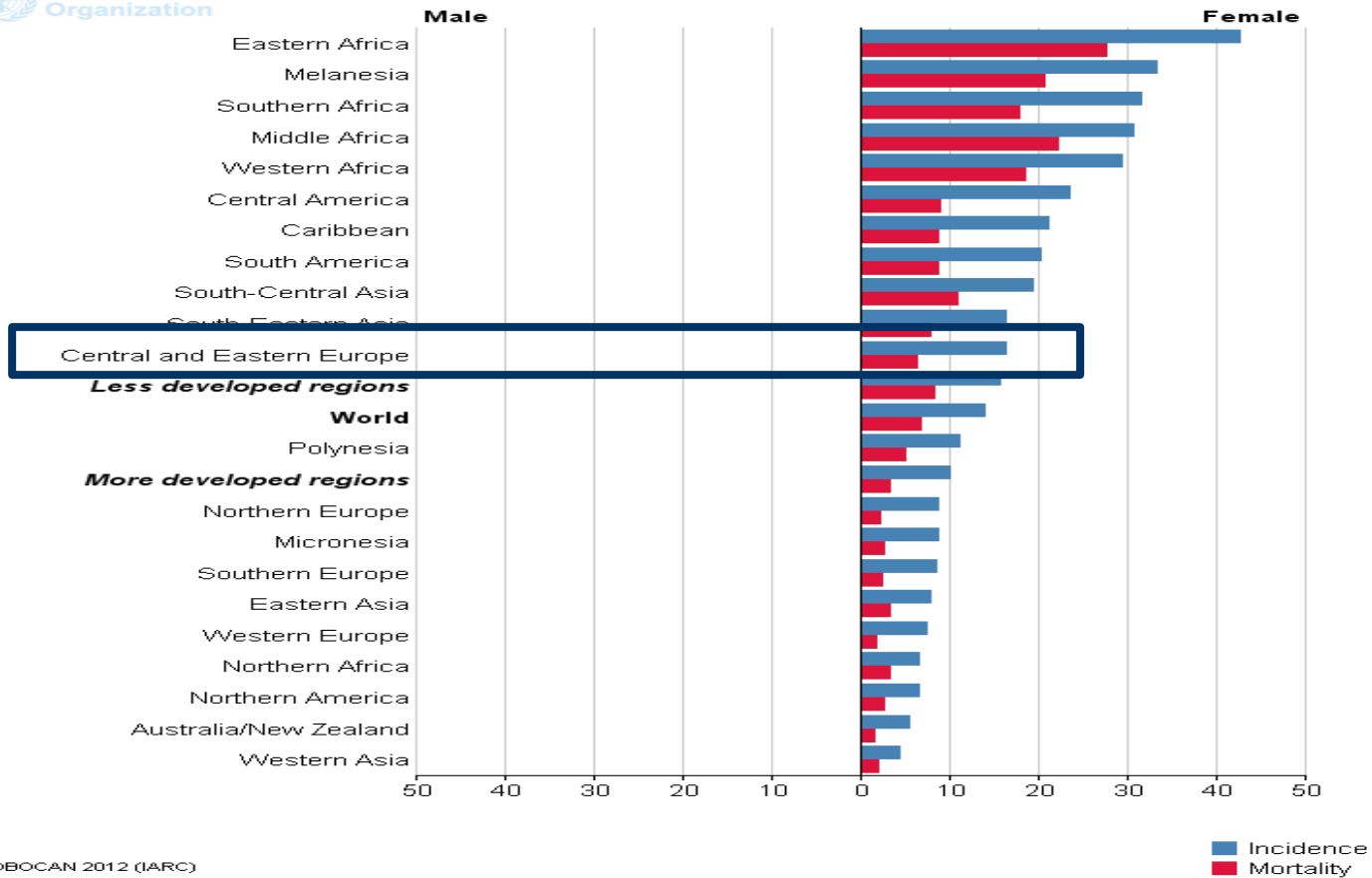


Cervix Cancer Education Symposium, February 2018

Introduction



International Agency for Research on Cancer



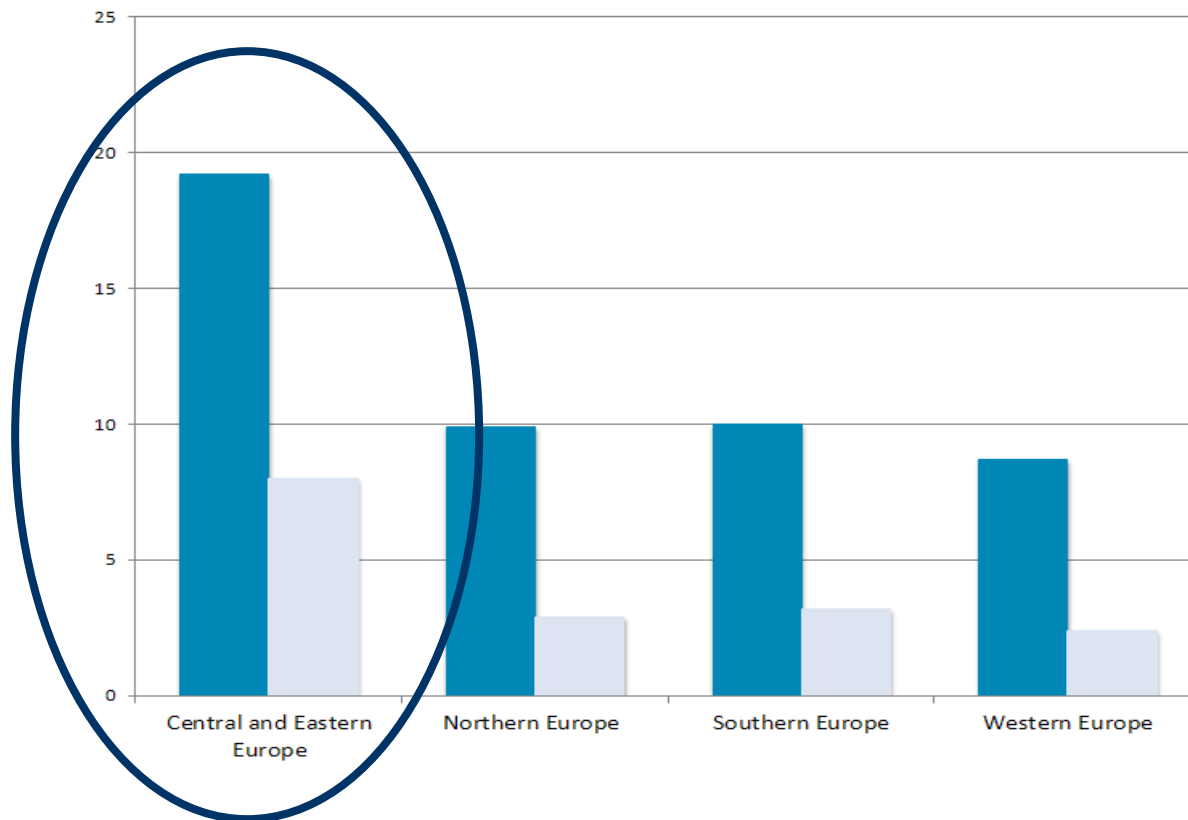
GLOBOCAN 2012 (IARC)

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Introduction



Age-standardised incidence and mortality per 100.000



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Cervical Cancer Incidence



	Population of women at risk (15 y and more)	Incidence	Mortality	New cases per year	Deaths per year
Serbia	3.83 mil.	30.2	12.2	1501	609
Bosnia and Herzegovina	1.66 mil.	18.5	4.6	359	89
Bulgaria	3.18 mil.	32.8	11.4	1254	437
Croatia	1.89 mil.	14.3	6.2	325	140
Czech Republic	4.59 mil.				315
Hungary	4.47 mil.				461
Montenegro	0.26 mil.	23.6	8.1	76	26
Poland	17.13 mil.	17.7	9.4	3513	1858
Romania	8.59 mil.	39.4	17.3	4343	1909
Slovakia	2.4 mil.	21.6	8.2	607	232
Macedonia	0.87 mil.	16.6	7.9	171	81
Slovenia	0.89 mil.	13.4	6.1	139	64

50 mil. women at risk

Cervical Cancer Incidence



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Incidence 13.4 – 39.4
Mortality 4.6 – 17.3

Cervical Cancer Incidence



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Croatia	1.89 mil.	14.3	6.2	325	140
Czech Republic	4.59 mil.	17.7	5.4	815	315
Hungary	4.47 mil.	17.7	5.4	791	361
Montenegro	0.26 mil.	14.3	6.2	376	166
Poland	17.13 mil.	17.7	5.4	3075	1858
Romania	8.59 mil.	39.4	17.3	4343	1909
Slovakia	2.4 mil.	21.6	8.2	607	232
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14 500 new cases / year
6 200 deaths / year

- Well-organised cervical screening programmes or widespread good quality cytology can reduce cervical cancer incidence and mortality.
- The introduction of HPV vaccination could also effectively reduce the burden of cervical cancer in the coming decades.

Cervical Cancer Screening



	Availability of a cervical cancer screening programme	Quality assurance structure	Active invitation to screening	Main screening test used	Screening interval or frequency of screenings
Serbia	Yes	Yes	Yes	Cytology	3 years
Bosnia and Herzegovina	Yes	Yes	No	Cytology	1 year
Bulgaria	Yes	No	No	Cytology	3 years
Croatia	Yes	Yes	No	Cytology	3 years
Czech Republic	Yes	Yes	Yes	Cytology	1 year
Hungary	Yes	Yes	Yes	Cytology	3 years
Montenegro	Yes	Yes	No	Cytology	3 years
Poland	Yes	Yes	Yes	Cytology	3 years
Romania	Yes	Yes	Yes	Cytology	5 years
Slovakia	Yes	No	No	Cytology	3 years
Macedonia	Yes	No	No	Cytology	3 years
Slovenia	Yes	Yes	Yes	Cytology	3 years

Cervical Cancer Screening



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Croatia	Yes	Yes	No	Cytology	3 years
Czech Republic	Yes	Yes	Yes	Cytology	1 year
Hungary	Yes	Yes	Yes	Cytology	3 years
Montenegro	Yes	Yes	No	Cytology	3 years
Poland	Yes	Yes	Yes	Cytology	3 years
Romania	Yes	Yes	Yes	Cytology	5 years
Slovakia	Yes	No	No	Cytology	3 years
Macedonia	Yes	No	No	Cytology	3 years
Slovenia	Yes	Yes	Yes	Cytology	3 years

Cervical Cancer Screening



	Cervical cancer screening coverage %	Screening ages
Serbia	57.1	25 – 65
Bosnia and Herzegovina	39.8	21 – 70
Bulgaria	46.8	30 – 59
Croatia	65.3	25 - 64
Czech Republic	Coverage 33.5 %	
Hungary		
Montenegro	X	25 - 64
Poland	21.2	25 - 59
Romania	8.1	25 - 64
Slovakia	48.0	23 - 64
Macedonia	10.9	30 - 55
Slovenia	71.3	20 - 64

Active invitation



- In 2014, the active invitation programme had been introduced in the Czech republic by insurance companies
- The effect of active invitation was very low compared to invested expenses
- Participation rate for the first invitation was 11.2 %; for the second invitation 7.6 % and for the third invitation only 6 %
- Most resistant population - women > 50 years

Cervical Cancer Vaccination



	National programme	Introduced	Primary target (sex, age)
Serbia	No	-	-
Bosnia and Herzegovina	No	-	-
Bulgaria	Yes	2012	F, 12
Croatia	Yes	2016	F
Czech Republic	Yes	2012	F/M, 13
Hungary	Yes	2014	F, 12-13
Montenegro	No	-	-
Poland	No	-	-
Romania	No	-	-
Slovakia	Yes	2014	F, 12
Macedonia	Yes	2009	F, 12
Slovenia	Yes	2009	F, 11-12

Vaccination



- In 2008, the Romanian Ministry of Health rolled out a schoolbased immunization campaign providing free vaccines for 10- to 11-year-old girls. Coverage statistics revealed that only a 2.57% girls received vaccination.
- In 2009 an information campaign was launched, followed by a second vaccination programme, targeting 12- to 14-year-old girls. A catch-up programme was also launched, where adult women were given the opportunity to get the vaccine free of charge through their health provider.
- Despite the accessibility of the vaccine, initiation remained low and the schoolbased programme was discontinued.

Conclusions



- Incidence of cervical cancer in C. and E. Europe vary between 13.4 and 39.4 per 100.000 women
- Approximately 14 500 new cases are diagnosed per year and 6 200 deaths are related to cervical cancers
- All countries have available cervical cancer screening programme
- The main problem is very low participation rate, irrespective of active invitation, especially in elderly women
- Some countries introduced national HPV-vaccination programme for young females; coverage rates are, however, lower than expected
- Endeavour to change unfavourable outcomes – e.g. Health visitors in Hungary, HPV self-sampling project in Czech republic etc.



Thank you for your attention!