
THE ROLE OF GOVERNMENTS IN CERVICAL CANCER:

State-of-the-art

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Cervical Cancer Prevention

- Cervical cancer often slow growing, with progressive generalised wasting for several months that creates difficult home care in low resources.
- Primary prevention
 - HPV vaccination (Merck covers HPV types 6,11,16 and 18 and GSK covers types 16 and 18).
 - Other: Early marriage; Early first sexual intercourse; Multiple sexual partners; Multiparity; Link with AIDS; STI; Tobacco smoking; Vitamin deficiency; ...
- Secondary prevention
 - Pap smear
 - Visual Inspection with acetic acid or Lugol's iodine “see and treat”
 - HPV DNA tests
- Tertiary prevention: Surgery; Radiotherapy; Chemotherapy



Cervical cancer plan delivery

- **Building capacity** of local government and NGO staff: clinical, managerial and other training as relevant.
- **Strengthening systems and quality assurance** including training and management systems to improve feedback systems.
- **Community engagement:** raising awareness and in the health sector, enrolment of volunteers in outreach programmes,
- **Infrastructure:** where possible, existing buildings and hospitals would be used.



Cervical cancer plan delivery

- **Monitoring and evaluation:** establish systems that collect and analyse data contributing to a better understanding of the cost effectiveness of interventions.
- **Supply-chain management:** government systems for supply-chain management of drugs, laboratory supplies and other essentials to be strengthened and improved.
- **Policy and sustainability:** involve the relevant departments of the MoH, professional associations and key opinion leaders in developing appropriate policies, based as far as possible on high-quality evidence.



Governments roles & responsibilities

- Collaborate with partners in developing and reinforcing comprehensive cervical cancer control programmes tailored to the socioeconomic context;
- Adopt regulations and legislation aimed at reducing avoidable exposure to cancer risk factors and strengthen clinical practices;
- Set priorities based on national burden of cervical cancer, resource availability and health system capacity for prevention, control and palliative-care programmes;
- Consider an approach in the planning, implementation and evaluation phases of cervical cancer control that involves all key stakeholders representing governmental, nongovernmental and community-based organizations, including those representing patients and their families;
- Integrate national cervical cancer-control programmes in existing health systems that set out outcome-oriented and measurable goals and objectives for the short, medium and long term,



Governments roles & responsibilities

- Mobilize and allocate resources for cancer control programmes;
- Encourage and frame policies for procurement, strengthening and maintaining technical equipment for diagnosis and treatment in hospitals providing oncology and other relevant services;
- Increase the knowledge and skills of health workers and non-health care providers in cervical cancer prevention and control.
- Pay special attention to avoidable exposure causing cervical cancer, particularly exposure to infectious agents and tobacco smoke in the workplace and the environment;
- Encourage the scientific research necessary to increase knowledge about the burden and causes of cervical cancer, early detection and management strategies, including, when appropriate, traditional medicines and therapies, including for palliative care;



Governments roles & responsibilities

- Ensure access to appropriate information in relation to preventive, diagnostic and treatment procedures and options, especially by cancer patients, and to palliative care; Create public awareness of prevention methods.
- Develop appropriate information systems, including outcome and process indicators, that support planning, monitoring and evaluation of cervical cancer prevention, control and palliative care programmes;
- Assess periodically the performance of cervical cancer prevention and control interventions, for improving the effectiveness and efficiency of the programme;
- Determine cost-effective minimum standards, adapted to local situations, for cervical cancer treatment and palliative care that use WHO's strategies for nationwide provision of essential drugs, technologies, diagnostics and vaccines;



Governments roles & responsibilities

Table 18: HPV vaccine licensure as of March 2009

HPV vaccine	Countries
Bivalent vaccine/Cervarix	Congo, Côte d'Ivoire, Egypt, Gabon, Ghana, Kenya, Morocco, Namibia, Nigeria, Senegal, South Africa, Uganda
Quadrivalent vaccine/Gardasil	Botswana, Burkina Faso, Cameroon, Central African Republic, Chad, Congo, Côte d'Ivoire, DR Congo, Egypt, Equatorial Guinea, Ethiopia, Gabon, Kenya, Malawi, Mauritania, Mauritius, Morocco, South Africa, Togo, Uganda



Governments roles & responsibilities

- Ensure the medical availability of opioid analgesics according to international treaties and recommendations of WHO and the International Narcotics Control Board and subject to an efficient monitoring and control system;
- Develop and strengthen health system infrastructure, particularly related to human resources for health, in order to build adequate capacity for effective implementation of cervical cancer prevention and control programmes, including a cancer registry system;



Take home message

- Cervical cancer services must be coordinated. There should be a synergy between community centers, both private and government with screening and management centers in the larger hospitals
- Governments should commit themselves to reduce cervical cancer morbidity and mortality in the country.
- Governments role and responsibility is to ensure equity and accessibility to the entire population of good standards of primary, secondary and tertiary preventions for cervical cancer.
- Partners and other stakeholders should collaborate with governments and stick to the country needs. All must work together for a common goal: To reduce cervical cancer by immunization against HPV, early detection and effective treatment of cervical intraepithelial neoplasia.

