LESSONS FROM INTEGRATING CERVICAL CANCER SCREENING AND PREVENTATIVE THERAPY INTO EXISTING REPRODUCTIVE HEALTH PLATFORMS



BACKGROUND





Reproductive cancers

Cervical cancer is the leading cause of death from cancer among women in developing countries, where over 80% of global deaths from cervical cancer occur. There were an estimated 266,000 deaths from cervical cancer worldwide in 2012. Cervical cancer amongst women of reproductive age can be prevented through access to screening and treatment of pre-cancerous lesions.

PROBLEM



Currently less than 5% of women in developing countries have access to cervical cancer screening. Tools for the prevention of cervical cancer are in place, yet sadly every two minutes a woman dies of this disease. Most cervical cancer deaths occur in Low-and-Middle-Income Countries where advanced cancer care is severely limited.

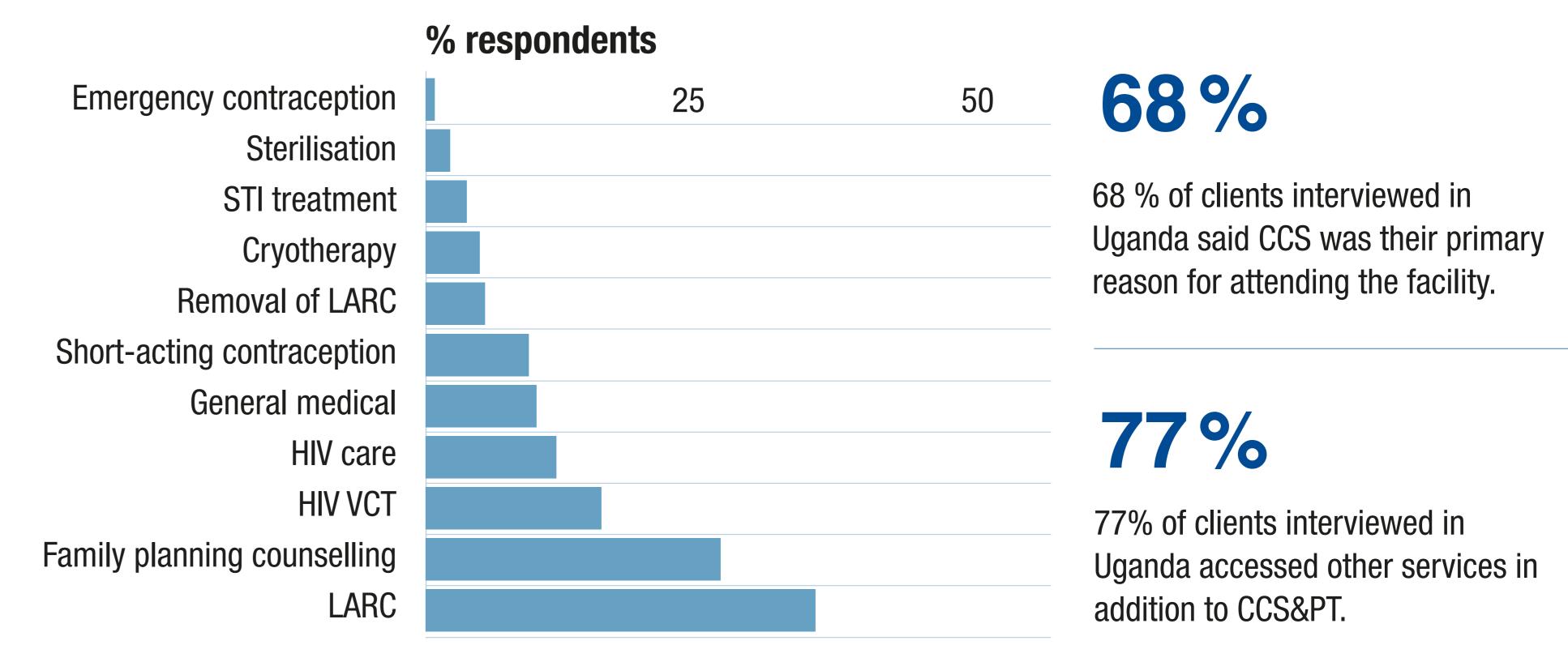
LESSONS LEARNED

- It is feasible for reproductive health organisations to integrate CCS&PT within their basket of services.
- Cervical cancer screening provided to women aged 30-49 years and delivered in a screen and treat model results in a high treatment rate.
- CCS&PT services provide an effective entry point to family planning and lead to an increase in FP uptake, especially IUDs.

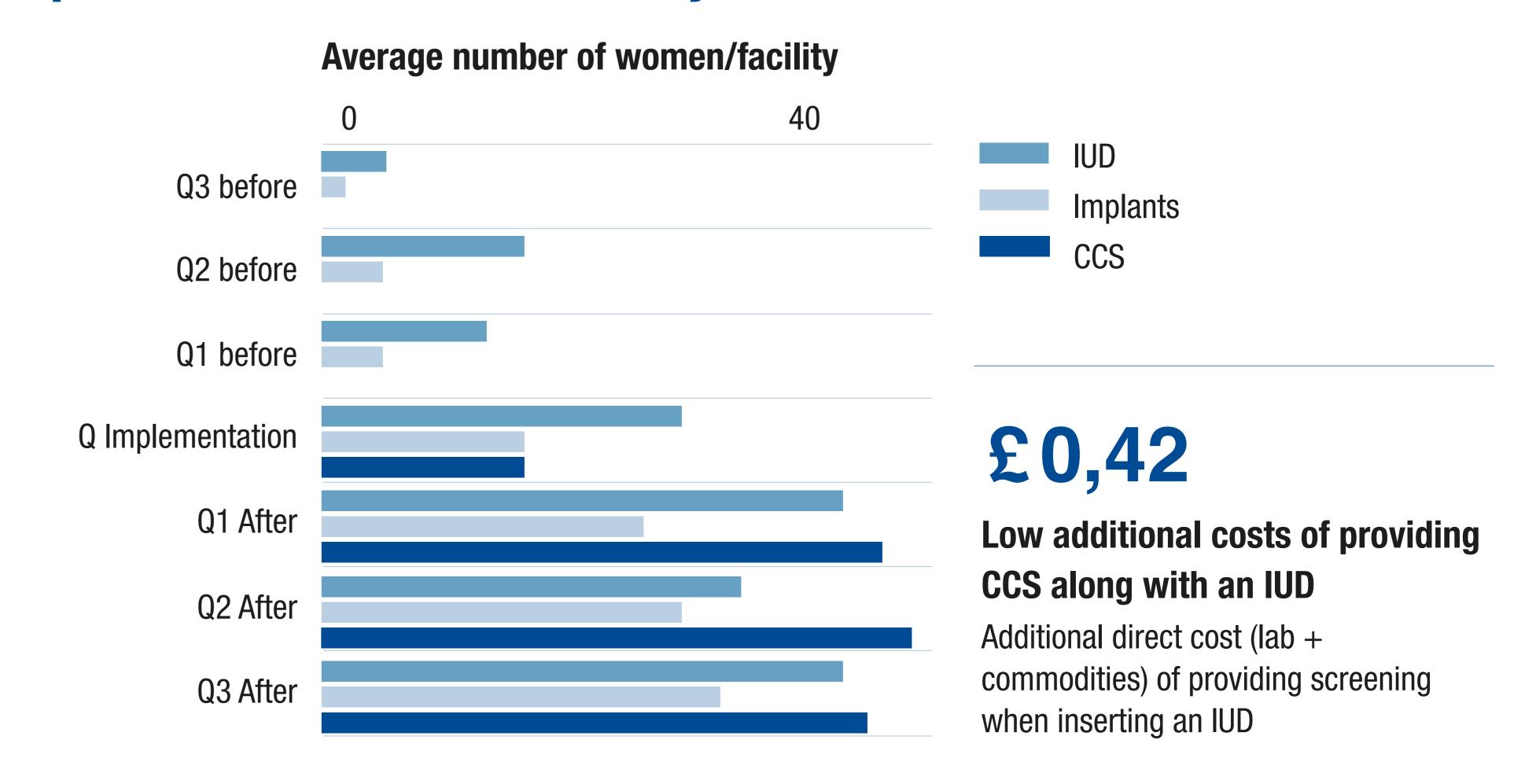
APPROACH

- Marie Stopes International (MSI) formed the Cervical Cancer Screening & Preventative Therapy (CCS&PT) partnership to integrate cervical cancer screenings and cryotherapy treatments within their existing sexual and reproductive health (SRH) platforms.
- Services were provided using varied models and channels.
- Three main channels of service delivery were used to provide services: urban static centres, rural mobile outreaches and social franchises.

CCS provision increases uptake of other services



LARC provision increases markedly after CCS&PT is introduced



RESULTS

From November 2012 to October 2017, the initiative provided 2.1 million screenings and 34,000 treatments. Programme data also indicated an increase in family planning service uptake with the introduction of CCS&PT. Women who received a screening were 33% more likely to receive an IUD.

FUTURE DIRECTION



Currently MSI provides CCS&PT services in 18 countries. In the future MSI aims to integrate CCS&PT within its basket of services across all countries in the partnership.



MSI will continue to play an important global advocacy role for cervical cancer, for example as an integral service in UHC packages.



MSI will also continue to help build a body of evidence in support of integrated SRH service delivery.