

United Nations agencies launch joint global programme to prevent and control cervical cancer

By Aabha Dixit



Brachytherapy forms an important part of radiotherapy treatment in cervical cancer.

(Photo: D. Calma/IAEA)

In 2012, more than 260 000 women worldwide died of cervical cancer — the equivalent of one woman dying every two minutes. Over 90% of these deaths occurred in developing countries. In response to this health crisis of global proportions, seven United Nations agencies last year launched the five-year United Nations Joint Global Programme on Cervical Cancer Prevention and Control.

Earlier this year, expert teams reviewed the cervical cancer prevention and control programmes of Mongolia, Morocco and Myanmar, the first three pilot countries in the project. The recommendations made for these countries included specific efforts to improve cervical cancer prevention, screening, early diagnosis and access to treatment, including radiotherapy and palliative care. Reviews of three other countries — Bolivia, Kyrgyzstan and Tanzania — will follow later this year.

“The choice of cancer of the cervix as the focus for this global effort reflects the significant economic and human dimensions surrounding a cancer that occurs in women at the height of their productive years,” said May Abdel-Wahab, Director of the

IAEA Division of Human Health. The goal of the project is to achieve a 25% reduction in cervical cancer mortality by 2025 in participating countries, by reducing the number of cervical cancer cases and improving survival rates, she added.

Imparting knowledge and training are core components of support to improve the quality and safety of radiotherapy. For instance, in Myanmar, the United Nations team’s recommendations identified the need for more training for radiation oncologists, medical physicists and radiotherapy technicians at public radiotherapy centres, supporting skills upgrade and training in the safe and efficient use of radiotherapy machines, said Rajiv Prasad, a radiation oncologist at the IAEA who was part of the UN team who visited the country.

The importance of developing national treatment guidelines for cervical cancer and establishing a robust referral mechanism for cervical cancer patients were identified during the visit. “Developing a pool of trained staff to support radiotherapy services is critical to cancer assessment and treatment,” Prasad said.

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The Joint Programme’s efforts also include the development of comprehensive national cervical cancer control plans to increase the capacity of health systems to diagnose and treat cervical cancer, and provide palliative care.

“The IAEA has a significant role in this initiative, as radiation therapy — both as external beam radiation therapy and brachytherapy — is an important element in the treatment of cervical cancer. Over 70% of women with cervical cancer need radiation therapy for cure or palliation,” said Abdel-Wahab, adding that radiotherapy improves control of the cancer locally in the pelvis and leads to greater survival rates.

Cervical cancer can also potentially be prevented through vaccination against human papilloma virus (HPV) and early detection through screening. It is estimated that a cervical cancer-specific vaccination for girls today would prevent around 600 000 of them developing cervical cancer later in life — and 400 000 from dying from this preventable disease. In this context, the importance of immunizing all adolescent girls against HPV and the critical need for effective treatment of pre-cancerous lesions for all women are key goals of the Programme.

Enhancing cancer care for women

International experts will work with the six selected low-and middle-income countries to mobilize the necessary resources to widen awareness through domestic, bilateral and multilateral channels and reduce morbidity and mortality from this disease. The goal is to ensure that at the end of five years, each participating country has in place a functioning and sustainable high-quality national cervical cancer control programme.

Cervical cancer is a potentially curable cancer that in too many cases is discovered too late to prevent morbidity or death, said Abdel-Wahab. Proactive actions can therefore significantly reduce cervical cancer deaths.

The IAEA’s unique mandate and role in radiation medicine, encompassing nuclear medicine, diagnostic radiology and radiotherapy, is an important factor in attaining the objectives of this global effort against cervical cancer.

It is important to have well-structured national capabilities in the areas of radiation

medicine, explained Prasad. Capacities vary widely and access to quality radiotherapy, for example, is severely limited in low-and middle-income countries, which make up 85% of the global population yet only have about one third of the world’s radiotherapy facilities, he added.

Nicholas Banatvala, Senior Advisor at the World Health Organization and at the United Nations Interagency Task Force on noncommunicable diseases (NCDs) described the role of the Interagency Task Force in facilitating collaboration of United Nations agencies for a more comprehensive solution to address the challenge of NCDs. “On cervical cancer, our goal is to work with global and national partners to ensure that each participating country has a functioning and sustainable, high-quality national cervical cancer control programme in place at the end of five years,” he said.

The IAEA and six other United Nations agencies are part of the UN Interagency Task Force on NCDs working to prevent and control cervical cancer: the World Health Organization, the International Agency for Research on Cancer, the Joint United Nations Programme on HIV/AIDS, the United Nations Population Fund, the United Nations International Children’s Emergency Fund (UNICEF) and United Nations Women.

The international expert team of the United Nations Joint Global Programme visits Mongolia to provide guidance and recommendations to help enhance the country’s cervical cancer programme.

(Photo: World Health Organization Country Office, Mongolia)

