



COALITION to STRENGTHEN  
the HPV IMMUNIZATION  
COMMUNITY



# Cervical Cancer Screening in Bangladesh

Presented by:  
Professor Dr Jannatul Ferdous  
Dept. of Gynaecological Oncology,  
Bangabandhu Sheikh Mujib Medical University  
Dhaka, Bangladesh



COALITION to STRENGTHEN  
the HPV IMMUNIZATION  
COMMUNITY



## HIGHLIGHTS :

---

- Screening options available in Bangladesh
- Challenges to implement the screening program
- Way forward in implementing national screening program?



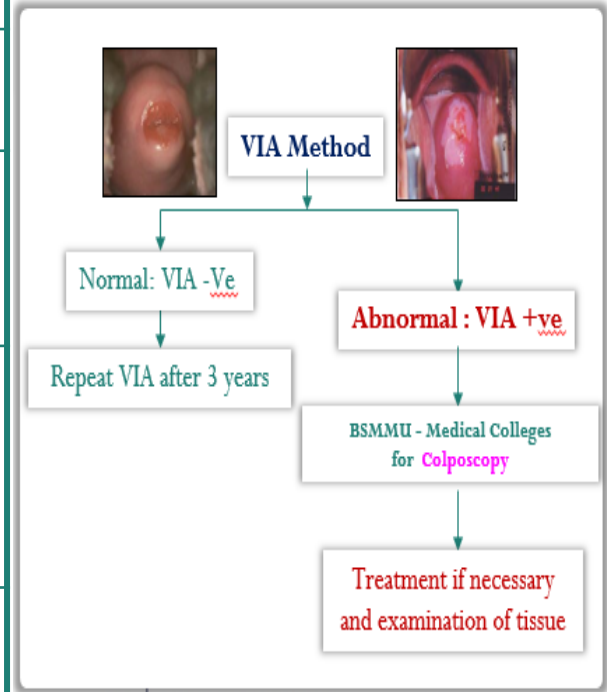
COALITION to STRENGTHEN  
the HPV IMMUNIZATION  
COMMUNITY



# Screening options available in Bangladesh

	Sensitivity to detect CIN 2+ lesion	Specificity
<b>Pap smears:</b> started in 1987 but its use is scattered & limited	Less (53%)	More (96.3%)
<b>LBC</b> (Since the mid-1990s increase sensitivity upto 12% & allows HPV DNA test from the sample)	Less (79.1%)	More 82% - to 91%
<b>HPV DNA :</b> Costly, time-consuming, requires sophisticated lab infrastructure & unaffordable as a mass screening	<b>More (96.1%)</b> <b>(high sensitivity &amp; more NPV)</b>	More (90.7%) Low PPV
<b>VIA:</b> became an alternative method for effective mass screening, reasonably accurate, easy, provide results immediately (point of care) acceptable & inexpensive ]	<b>More (80%)</b>	Less (87%)

All ever-married women aged **30-60 yrs**



COALITION to STRENGTHEN  
the HPV IMMUNIZATION  
COMMUNITY



## Challenges to implement the screening program

### ❑ Challenges in initial set up:VIA as a screening programme:

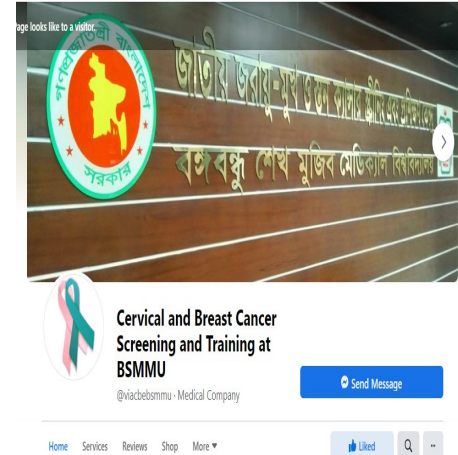
- The initial program was led by the collaboration of the GOB, BSMMU, and UNFPA as a pilot program in **16 districts**.
- Scale up to the district level by 2010.
- “Establishment of National Center for Cervical and Breast Cancer Screening and training” (2012-2018): developed 200 screening centers at **Upazila level**.
- Electronic Data Tracking **with Population Based Cervical and Breast Cancer Screening Programme** (2018-2022).

● Total VIA and CBE Centers in Bangladesh: **570**

● 3215 healthcare provider



COALITION to STRENGTHEN  
the HPV IMMUNIZATION  
COMMUNITY



# Challenges in Sustainability of screening programme

- ✓ The electronic database should play important role for development of population-based screening program management, it's monitoring and quality control.
- ✓ Expansion of the program throughout whole country
- ✓ Community involvement
- ✓ Introduction of HPV test, **upgradation of strategy**
- ✓ Mass awareness creation,
- ✓ Adequate supply of ICT equipment, Good connectivity
- ✓ Research
- ✓ **Management of cervical precancer / cancer**



COALITION to STRENGTHEN  
the HPV IMMUNIZATION  
COMMUNITY

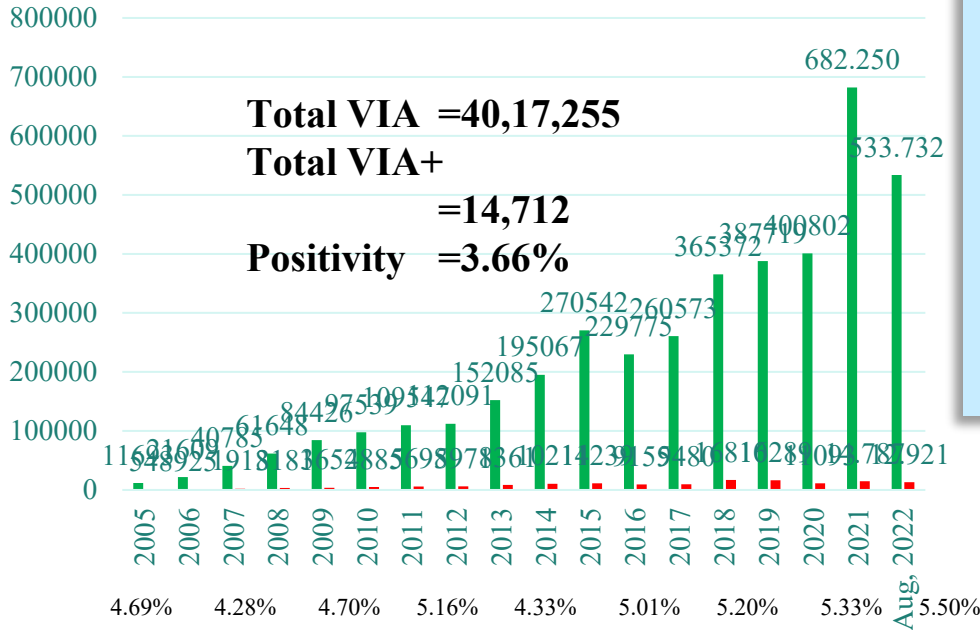


# Challenges in coverage of target population

Performance of VIA  
(2005-Aug, 2022)

Target Population : 30 million.

Coverage= 18.26%



# Challenges in treatment of cervical pre-cancer:

A significant number of screen +ve women from the sub-district can not attend colposcopy clinics (distance, financial crisis, lack of family support and social stigma)

- 43 Colposcopy Clinics in 37 districts
- 20 Colposcopy Clinics- LEEP/TA
- 334 Trained Colposcopist

In Bangladesh, LEEP commonly used Rx for cervical precancers but may not be feasible for large scale

Challenges in hard to reach areas



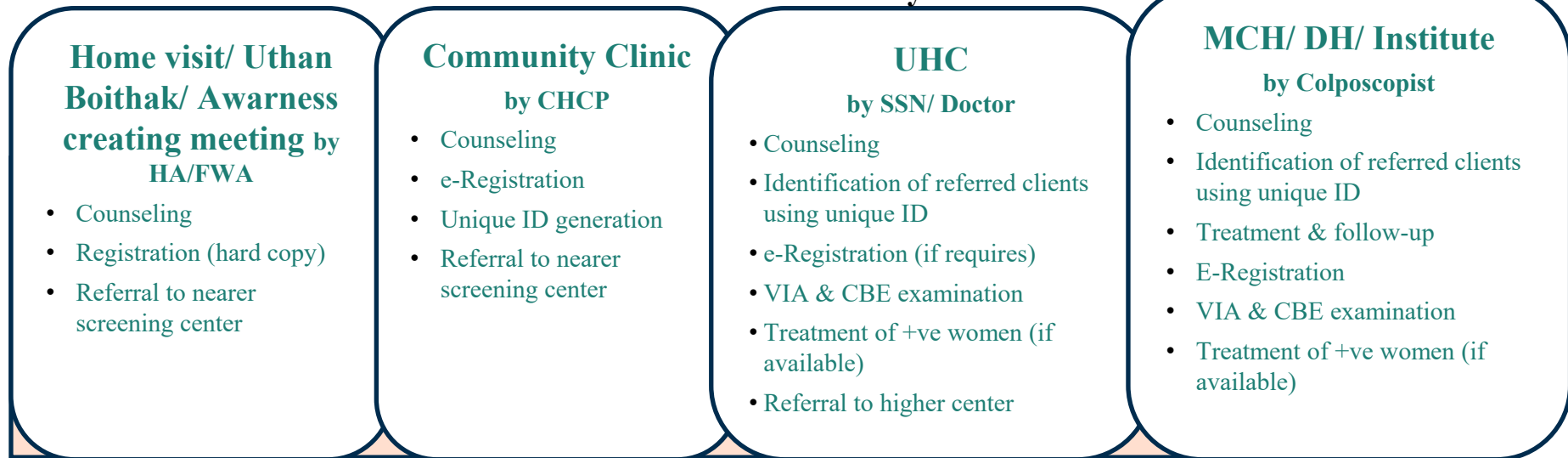
COALITION to STRENGTHEN  
the HPV IMMUNIZATION



HPV Prevention  
and Control Board

# Challenges in Piloting of Electronic Data Tracking with Population based Cervical and Breast Cancer Screening Programme (EPCBCSP): 2018 - 2022

## Flow chart of VIA and CBE Referral System



- ✓ Women's motivation and registration **with NID** are being initiated at the community level
- ✓ One CC serves about 6,000 population, which include about **600 to 800 women** of the target group (30-60 years).
- ✓ Till now about 8 lac women has been registered but only few of them are participating

# National HMIS Under the DGHS

- In Bangladesh, District Health Information System version 2 (DHIS2), has been implemented in all levels of healthcare since 2010 - to collect routine aggregated health data from all levels of health infrastructure
- 'VIA and CBE facilities' - Initiated use of DHIS2- to collect **monthly performance data Since 2013**
- 'VIA and CBE HMIS' has been gradually **customized and upgraded for data collection of each individual woman Since 2018**

Opportunities of tracking of screen-positive individuals

## ***Difficulties and Limitations in Electronic Data Tracking:***

- Lack of human resources
- Most of the private health facilities yet do not report to the national HMIS.



## ***Challenges in implementing HPV DNA test as screening test***

---

- HPV testing: Much higher sensitivity (98-99 %), **specificity** (93%),
- Scarcity of lab/ infrastructure support
- Cost
- Require more than one visit to get the result
- Compliance barrier
- MoU between NCCBCST and Department of Virology of BSMMU has been done to improved research and diagnostic capacity of HPV-DNA test.

# Way forward in implementing a national screening program in Bangladesh

## At the management level (Ministry of Health)

- ✓ Political commitment
- ✓ Budgetary allocation
- ✓ Programme management

## At the healthcare facility level

- ✓ Healthcare infrastructure
- ✓ Accessibility to the test
- ✓ Maintenance of equipment
- ✓ Functional call–recall system

## At the community level

- ✓ ↑ Awareness
- ✓ Information by community leaders
- ✓ Financial support for women for screening by HPV
- ✓ Empowerment of women

## Implementing a national screening program, con'td...

- **Awareness raising activities**
- Development of Guideline for treatment, monitoring & evaluation
- Training to service provider
- Availability of equipment for detection of cervical pre-cancer & management
- Services need to be decentralized
- **One stop services'** ( **See and treat protocol**) along with referral of difficult cases to MCH colposcopy clinics may reduce failure of treatment
- At community out-reach clinics in hard-to reach areas : **VIA Camp**
- **Strengthen health systems and quality assurance mechanism** with particular attention to socioeconomically disadvantaged population groups.
- **Implementation & scaling up organized population based cervical cancer screening program**
- **Encourage convergence** with related health programs
- Initiate and augment **a structured advocacy and educational campaign for CC control**

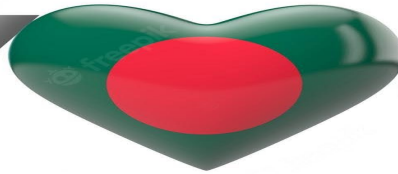
## Conclusion:

---

- ❑ Every cervical cancer death is unfortunate as the cancer can be prevented by systematic screening
- ❑ Understanding & addressing the obstacles of access, acceptability to screening strategy is necessary
- ❑ In Bangladesh, with current capacity of screening < 4,00 000 women /year, the program has a long way to go to achieve 70% coverage of the targeted women
- ❑ There is a need for more broad-based educational campaigns in creating cancer awareness within the community

---

THANK  
YOU



COALITION to STRENGTHEN  
the HPV IMMUNIZATION  
COMMUNITY



HPV Prevention  
and Control Board