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Advocacy statement on Prevention and Elimination of Cervical Cancer.

It is estimated that approximately 123,907 cases of invasive cervical cancer will occur every year in India, with about 77,348 deaths from this cancer (GLOBOCAN 2020). India contributes more than one-fifth of the global burden and it is unacceptable that a cancer that can be prevented and treated well is still a major burden in India. The estimated new cases of cervical cancer, India stands 2nd to China.

As of now, cervical cancer incidence varies in India, with the highest being in North East states. This is almost at par with maternal mortality in many states of India. India has been an important stakeholder with regards to cervical cancer in view of its large contribution towards cervical cancer deaths in the world. The WHO global strategy, endorsed by all Member States including India, has identified interventions that are feasible and scalable and have been shown to be of success in many countries.

Most of the cervical cancer and precancer cases can be detected in the reproductive age group. When cervical cancer is detected and managed at an early stage, it has over 93% cure rate. Cervical cancer can be prevented through HPV vaccination of girls, women can be screened and treated to prevent cancer occurrence, and when cancer is detected, prompt treatment can cure most women. **FOGSI believes that cervical cancer is a completely preventable disease with vaccination, screenings & early detection.**

Actions for cervical cancer elimination in India

FOGSI promotes a pragmatic approach for elimination of cervical cancer in India aligned to the global strategy.

- 90% of girls fully vaccinated with HPV vaccine by 15 years of age
 - Vaccinate girls aged 10-14 years with two doses of HPV vaccine at 6-months interval
 - 90% of eligible girls should receive the vaccination by 2030
 - If vaccine is not received between 10-14 years, then three doses should be administered as per vaccine schedule.
- 70% of women screened using a high-performance test at 35 years of age and again by 45 years of age
 - Provide a single HPV screen or Pap smear or VIA test at ages 35-40 years to begin with
 - Repeat HPV screen at 10 years intervals or repeat Pap smear / VIA test every 3-5 years may be considered depending on availability of resources/ settings
 - 70% of eligible women should be screened by 2030
 - Ensure that all screen positive women are managed without delay employing a triage to identify those who need interventions
- Ensure 90% of women identified with cervical disease are treated
 - Ensure that cervical precancers are treated, using a screen and treat approach whenever feasible, using thermal ablation or cryotherapy
 - Ensure that cervical cancer is managed in early stages and treated without delay and with financial protection.
 - Provide palliative care as needed.
- These efforts to be supported by adequate monitoring and evaluation through technical working groups and in collaboration with the national cancer registry programme.

FEDERATION OF OBSTETRIC AND GYNAECOLOGICAL SOCIETIES OF INDIA

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How can FOGSI help?

FOGSI organizes community connect programs for mass awareness of the people and to sensitise them. FOGSI also organizes dedicated CMEs and training programmes for gynaecologists to update them for the recent advances specially in preventive and curative Gynaecology- Oncology. They can be trained for vaccines and simple screening measurers such as VIA/ thermal ablation and pap smear or HPV test where the facility is available as per the FOGSI's useful GCPR for the same. Nursing & paramedical staff and public health workers such as ASHA & Anganwadi workers who hold a good rapport with the local population should also be involved for the program. FOGSI believes these three pillars: training, screening and treatment go hand in hand, we can beat this monstrosity sooner than we can imagine.

FOGSI proposes for escalation of cervical cancer screening programme under NPCDCS – The National Programme for Prevention and Control of NCDs (Cancer, Diabetes, Cardiovascular Diseases and Stroke).

FOGSI advocates for HPV vaccine to be included in our National immunization program by the Government of India and state immunization programme by different states, which is the important part of the preventive oncology. This needs to be tackled with awareness, education for the HPV vaccine and making it easily assessable and affordable.

FOGSI advocates to National medical council of India (NMC) to make Preventing Gynaecology - Oncology (Mainly Vaccine, and Cervical & Brest cancer screening) clinic/facility mandatory for a permission to start a medical college in India, dedicated one month posting of PG students to such facilities and to start specialized fellowship courses or DNB in Gynaecology - Oncology. These facilities would be dedicated to the task of HPV vaccination, along with Cervical & Breast cancer screening and treatment of detected lesions. They would also be involved in counselling and providing palliative care.

FOGSI is committed to eliminate cervical cancer as a public health problem in India. FOGSI reiterates its commitment to fight cervical cancer and unequivocally confirms the role of HPV vaccination and its screening for prevention of cervical cancer for women of India irrespective of any caste, religion, economic status, and education status. **FOGSI believes** prevention and elimination of cervical cancer should be taken up on priority. **FOGSI also supports** WHO, GOI and FIGO call for the same. Let us fight against these preventable cancers of women and eliminate cervical cancer from India by 2030.

Team FOGSI

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