CERVICAL CANCER PREVENTION IN LOW RESOURCE SETTING JAKARTA-INDONESIAN PERSPECTIVE

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Cervical cancer ranked the second most frequent cancer worldwide among women, next to breast cancer. According to histopathology data (2006) at multicenter throughout Indonesia, cervical cancer shows the first-ranked among cancer in women. It continues to be a worldwide public health burden, especially in low resource setting like Indonesia. There are about 15,000 new cases yearly and 8,000 deaths. Therefore, the estimation of new cases per day is 40 - 45 cases and 20 - 25 deaths/day; meaning 1 woman dies per hour. For this matter, cervical cancer prevention effort needs to be immediately implemented.

To address this burden, it is important to act proactively in preventing the disease. Therefore, ‘See and Treat’ programme was implemented at the community in several Jakarta areas with a comprehensive approach. We created five pillars of foundation 1) Area preparation that was coordinated with local government 2) Training course involving VIA and cryotherapy 3) Promotion to the society especially women to increase the awareness of the disease, 4) Screening and treatment by VIA and cryotherapy, and 5) Referral system. From December 2007 to December 2010, from 22,989 clients that had been screened, there were 970 cases (4.2%) of VIA test positive. Nineteen cases (0.1%) of invasive cervical cancer was found and surprisingly cervicitis incidence rate is also quite high (19.05%).

Pap smear has been proven to reduce the incidence and mortality rates of cervical cancer by 90% and 70-80% respectively, but it has many obstacles to be implemented in low resource setting. Indonesia has a very low screening coverage i.e. less than 5-8 % which ideally should be 80%. Therefore, it is necessary to have an alternative method. Visual inspection with acetic acid (VIA) is the most suitable alternative screening method to be used in a low resource setting.

VIA was chosen because it is cheap, non-invasive and a simple procedure which can be conducted by the general practitioners, midwives or trained nurses and supported by health cadres for awareness to recruit the clients. Besides identifying the lesion, cervical cancer can also be prevented provided the precancerous lesion is followed by an effective treatment. In this case, cryotherapy was selected as the immediate treatment because it has a cure rate comparable to other common outpatient procedures. In conclusion, “See and treat programme” is recommended for cervical cancer in a low resource setting like Jakarta, Indonesia.