

# Cervical cancer in Namibia

Dr Laura S Muzingwani  
16 October 2021  
NAMHIVSOC

# Outline

World trends

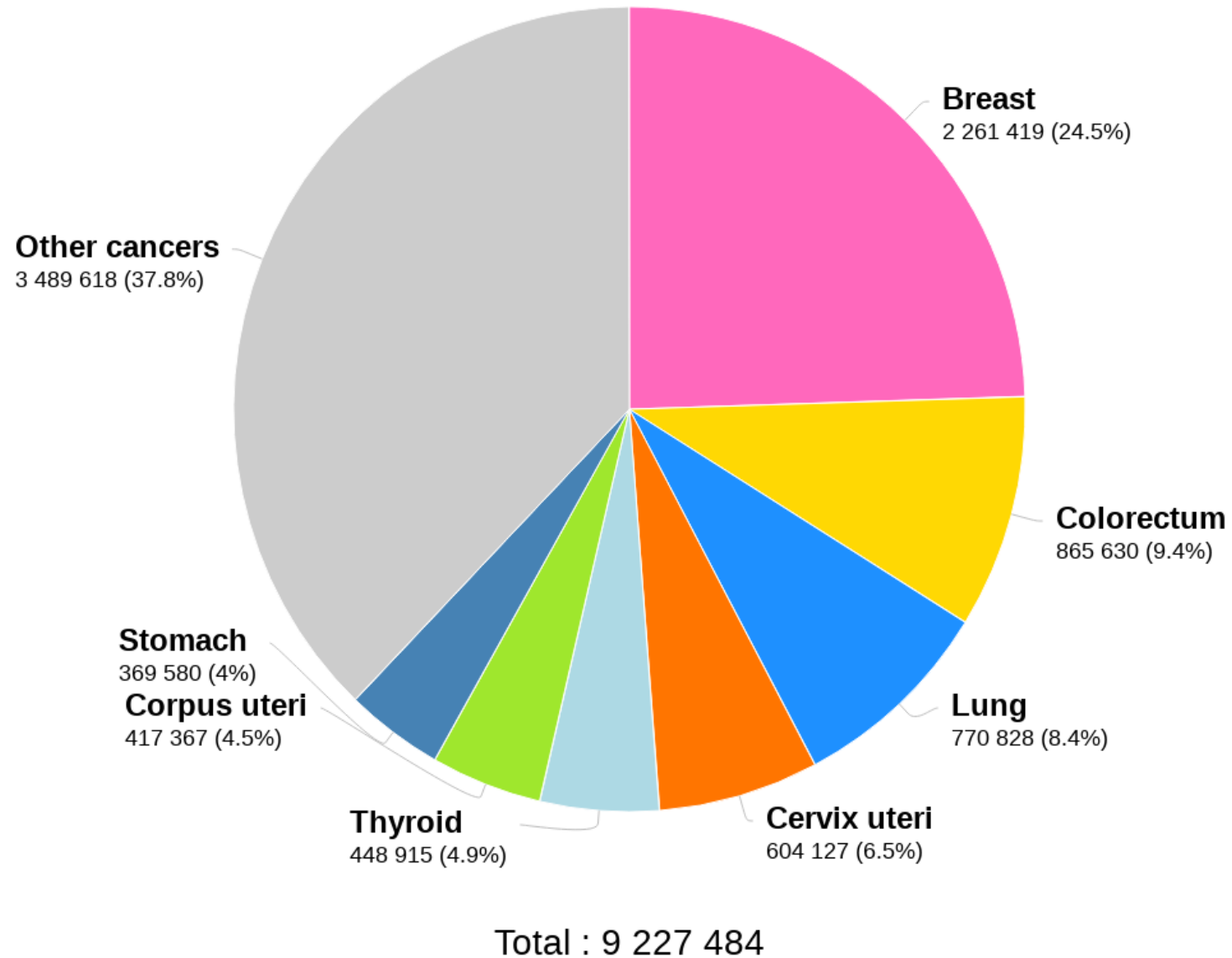
Local trends

Namibia Cervical cancer Prevention Program

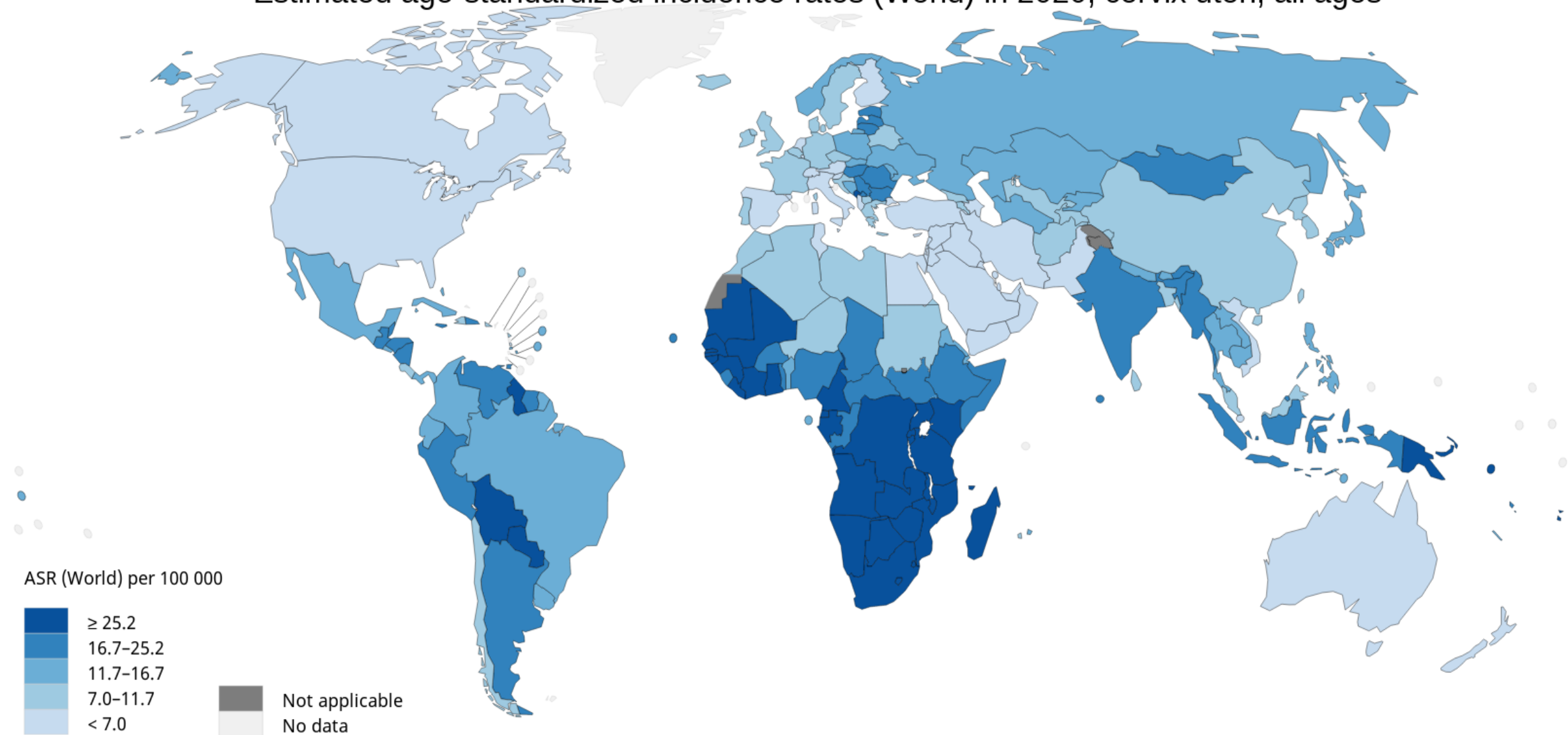
New developments

The future for Namibia CCPP

## Estimated number of new cases in 2020, worldwide, females, all ages



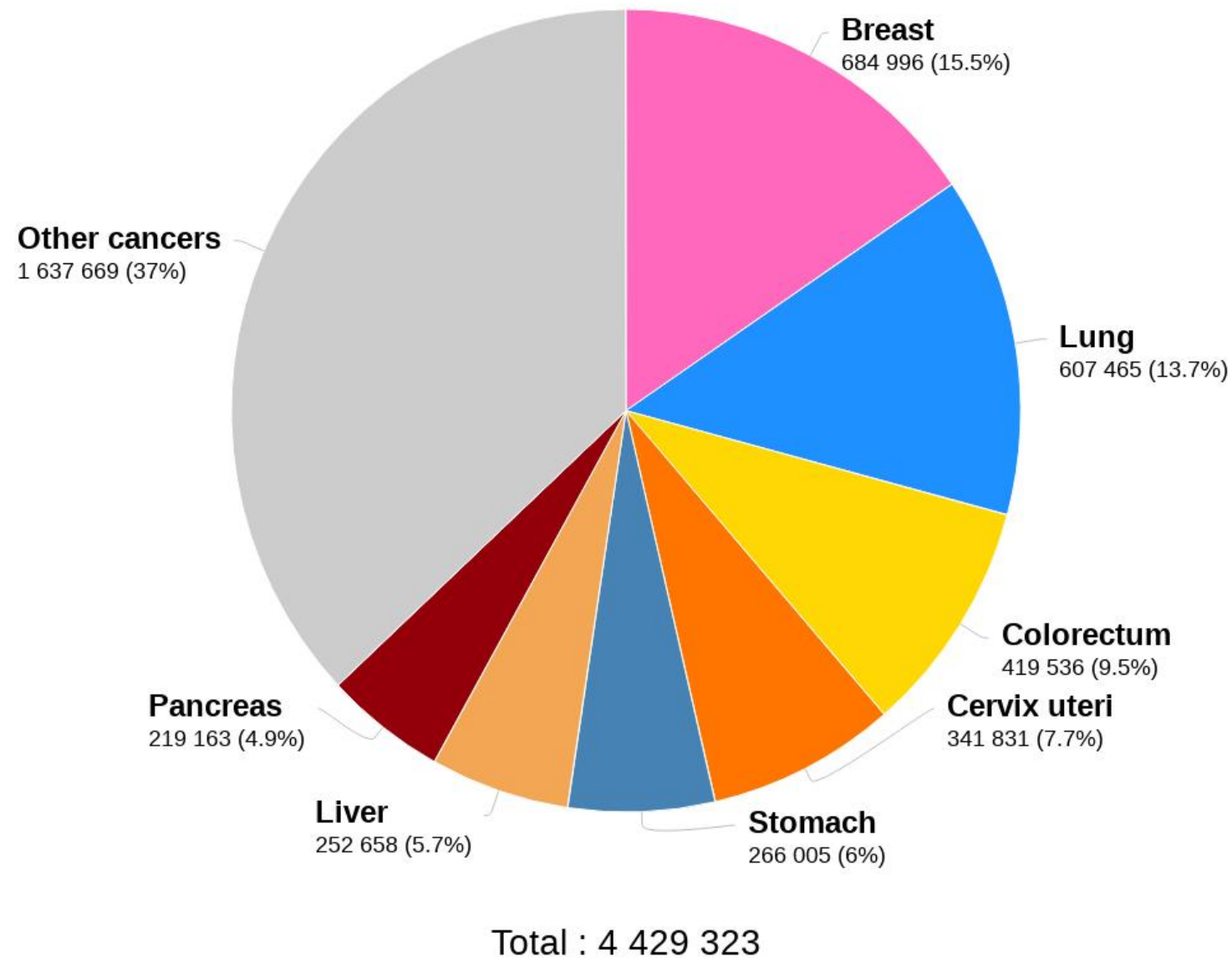
# Estimated age-standardized incidence rates (World) in 2020, cervix uteri, all ages



All rights reserved. The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization / International Agency for Research on Cancer concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate borderlines for which there may not yet be full agreement.

Data source: GLOBOCAN 2020  
Graph production: IARC  
(<http://gco.iarc.fr/today>)  
World Health Organization

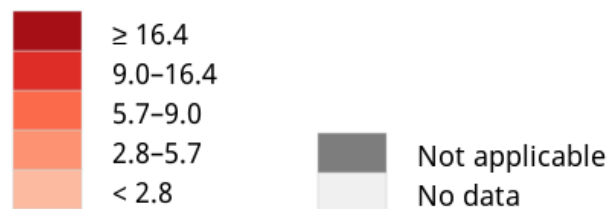
## Estimated number of deaths in 2020, worldwide, females, all ages



## Estimated age-standardized mortality rates (World) in 2020, cervix uteri, all ages

**Less developed regions bear 85% of global cervical cancer burden**

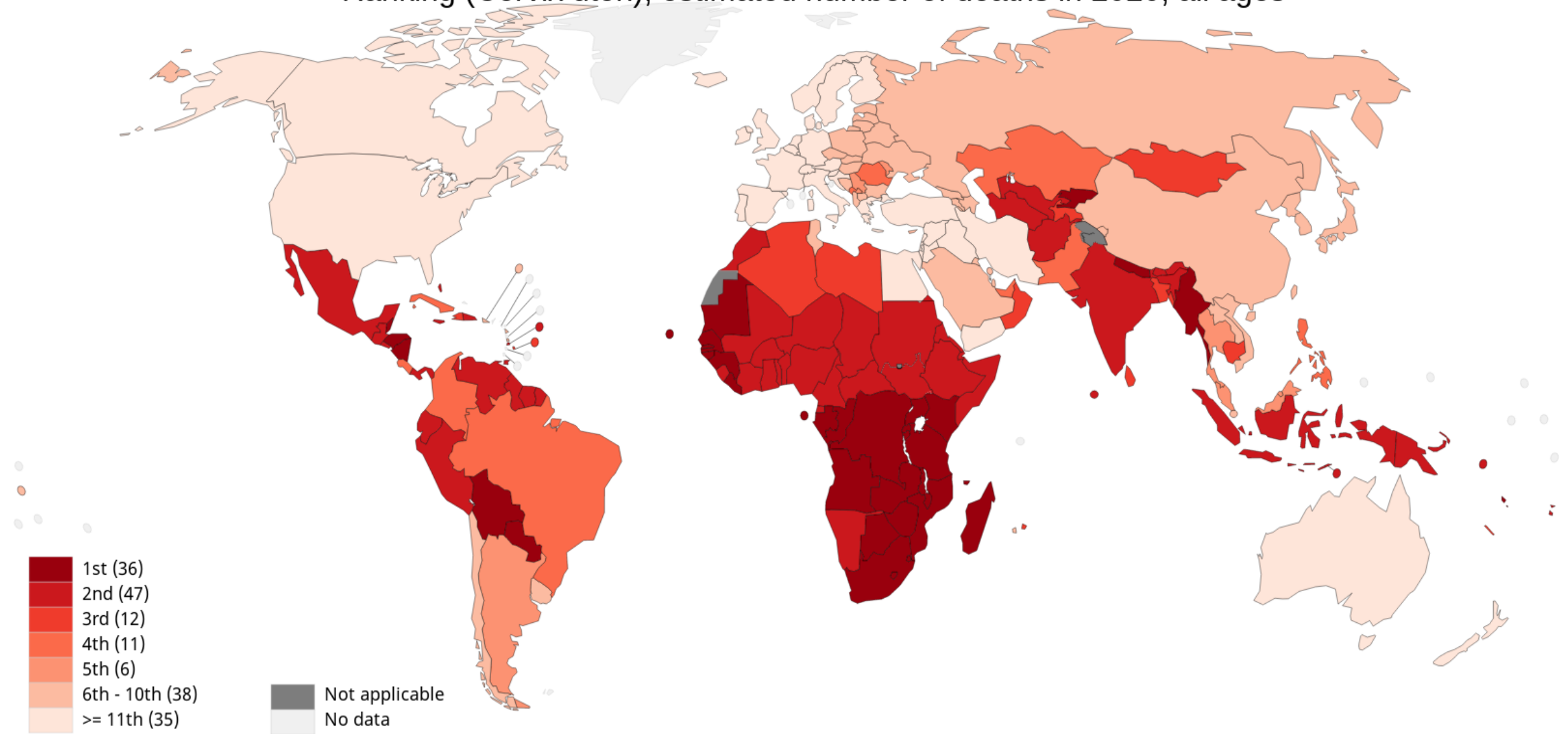
ASR (World) per 100 000



All rights reserved. The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization / International Agency for Research on Cancer concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate borderlines for which there may not yet be full agreement.

Data source: GLOBOCAN 2020  
Graph production: IARC  
(<http://gco.iarc.fr/today>)  
World Health Organization

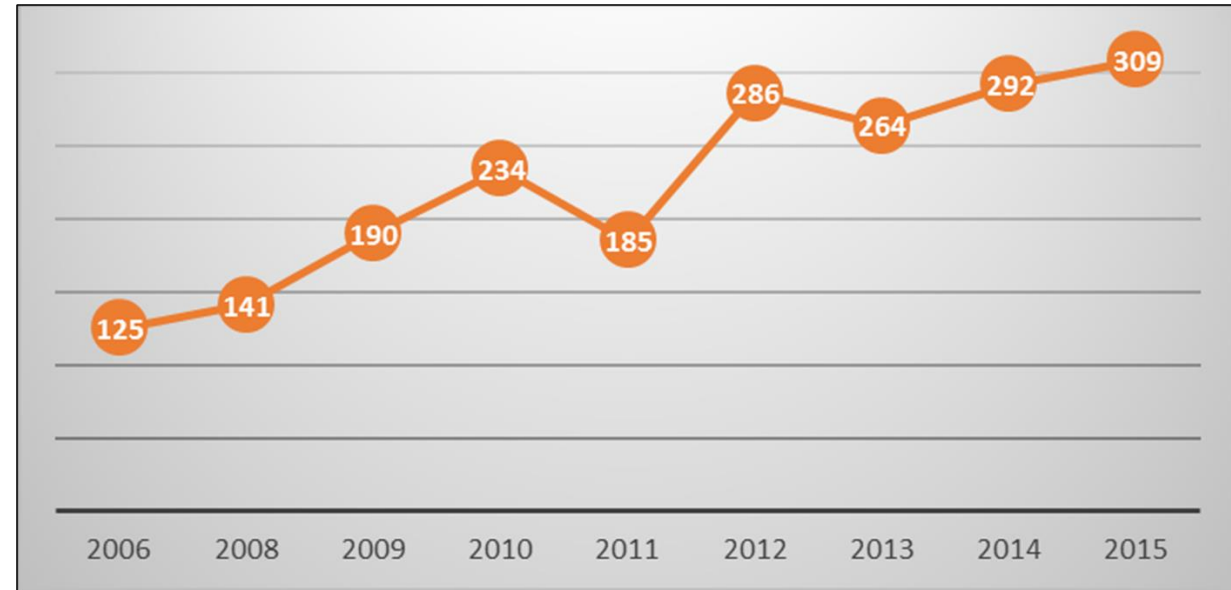
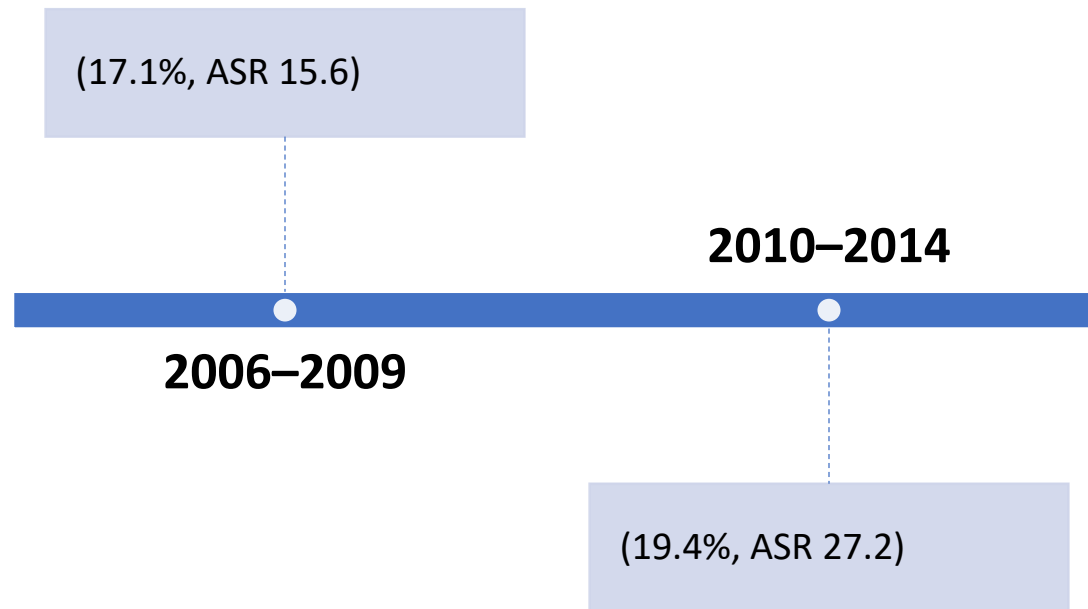
## Ranking (Cervix uteri), estimated number of deaths in 2020, all ages



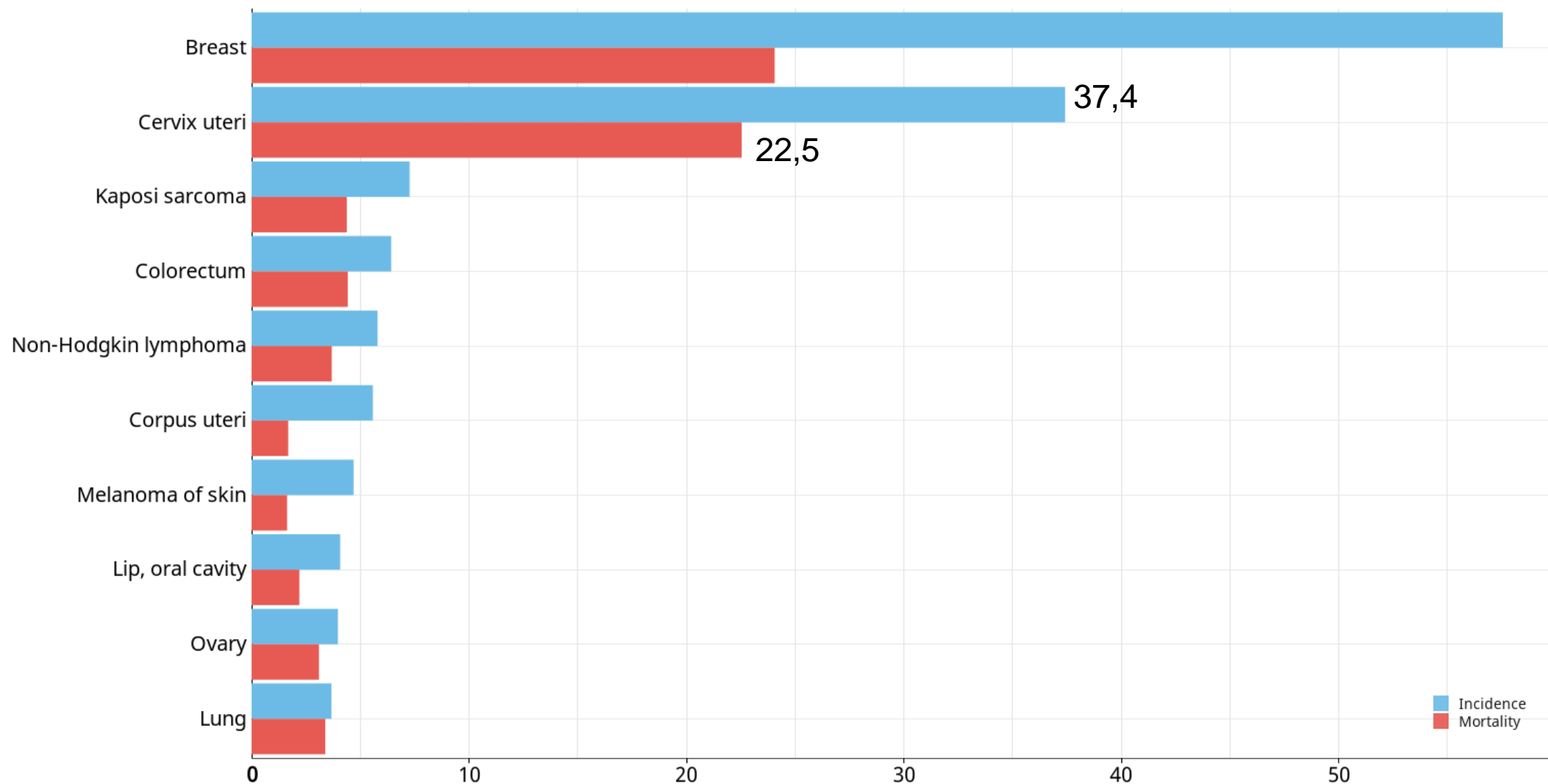
All rights reserved. The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization / International Agency for Research on Cancer concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate borderlines for which there may not yet be full agreement.

Data source: GLOBOCAN 2020  
Graph production: IARC  
(<http://gco.iarc.fr/today>)  
World Health Organization

# Rising epidemic in Namibia

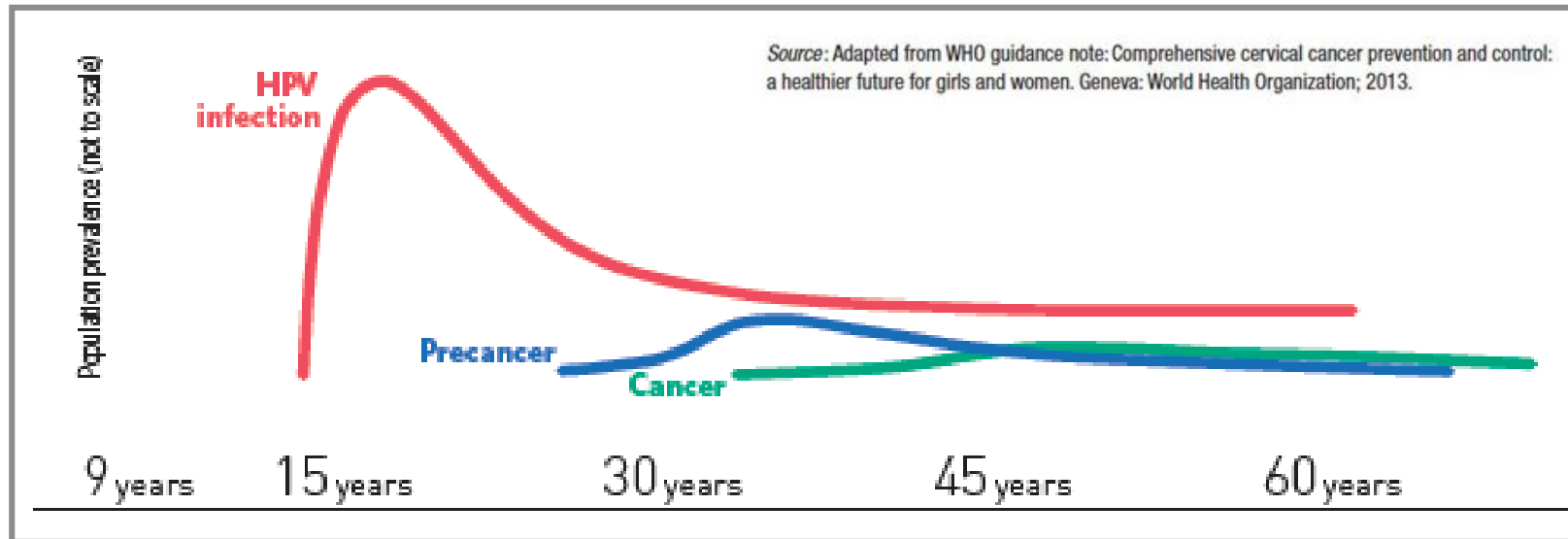


# Estimated age-standardized incidence and mortality rates (World) in 2020, Namibia, females, all ages



# Namibia Cervical cancer Prevention Program

# Comprehensive Prevention



**Primary Prevention:**  
**Prevent HPV infection**

***Girls 9-14 years***

HPV Vaccination

***Girls & Boys***

Risk reduction

**Secondary Prevention:**  
**Detect & treat  
precancerous lesions**

***Women > 20 years***

Screening and treatment  
programmes

**Tertiary Treatment:**  
**Treatment of invasive  
cancer at any age**

***Women > 30 years***

# Namibia's journey.



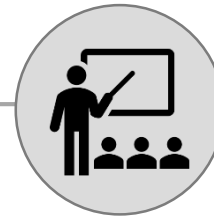
- Scoping meetings and planning

2017



- Scale-up to 10 regions
- First VIA ToT
- Rapid training scale-up (2019-July 2020)
- Introduction of thermocoagulation

2019

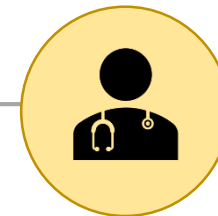


2018



- Guideline development and launch
- VIA training curriculum development
- First VIA training
- Scale-up to 6 facilities in Windhoek

2020-21



- Targeted screening in the time of COVID-19
- IEC materials developed and distributed
- Expansion to remaining 4 regions.

# Namibia preventive efforts

## Primary

- HPV vaccine (Private)
- Policy and strategy in place for public sector, to be rolled out once funding is secured

## Secondary

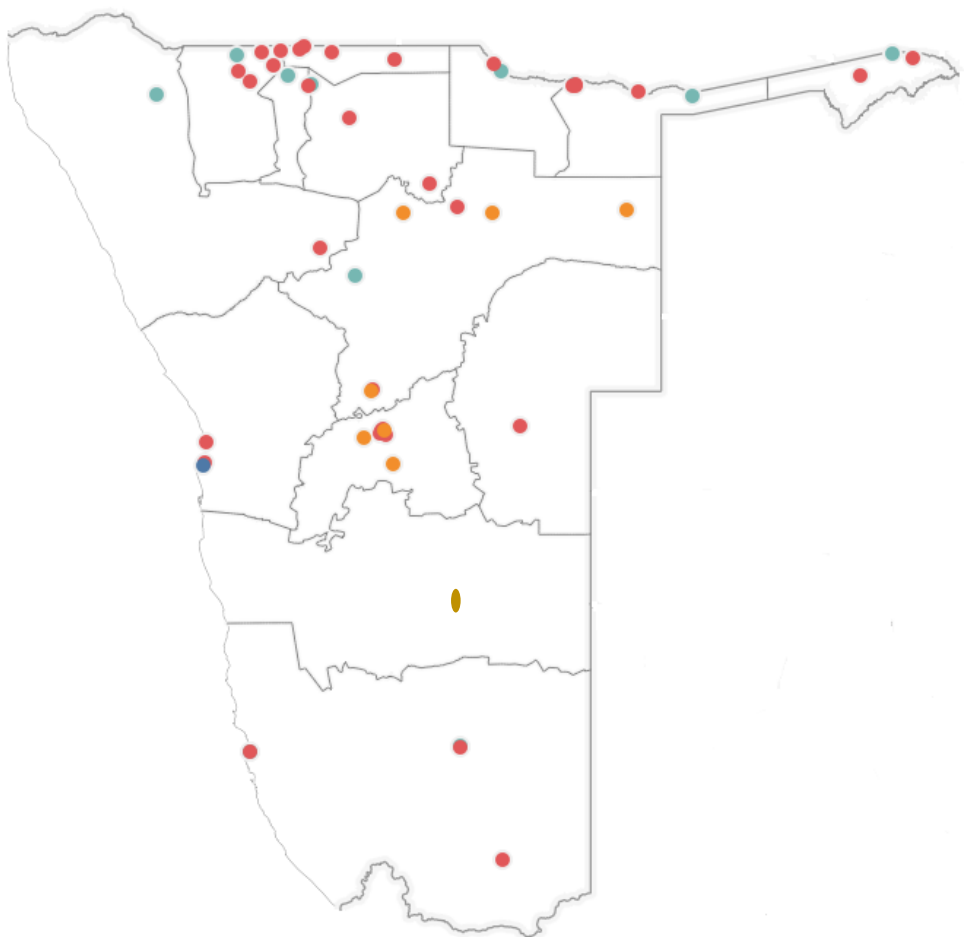
- Population based screening
- VIA
- PAP
- HPV (private)
- Thermocoagulation
- LLETZ





## Tertiary

- All confirmed cases referred to tertiary institutions for management
- Those requiring radiotherapy are referred to radio-oncology unit in Windhoek



# Namibia CCSP Program Expansion



Region	Sites	Total
 <b>VIAC/T</b>	Katutura Hospital, Katutura HC, Robert Mugabe Clinic, Khomasdale HC, Cancer Association of Namibia (CAN), Otjomuise Clinic, Okryangava Clinic, Maxulili Clinic, Wanaheda Clinic, Hakahana Clinic, Ondangwa HC, Omuthiya Hospital, Eenhana Hospital, Oshikuku Hospital, Okalongo HC, Ndama Clinic, Sauyemwa Clinic, Nkarapamwe HC, Bukalo HC, Keetmanshoop Clinic, Luderitz Clinic, Tamariskia Clinic, Kuisebmond HC, Epako Clinic, Outjo Hospital, Tsandi Hospital, Okahao Hospital, Oshakati Hospital, Ounicke, Engela Hospital, Sibinda HC, Odibo HC, Okongo Hospital, Ongha Clinic, Tsumeb Hospital, Nankudu Hospital, Nkurenkure HC, Nyangana Hospital, Okahandja Hospital, Grootfontein Hospital, Karasburg Hospital	<b>41</b>
 <b>VIA only</b>	Baumgartsbrunn Clinic, Donkerhoek Clinic, Groot Aub Clinic, Otavi HC, Otjituo Clinic, Tsumukwe Clinic, Nau Aib Clinic.	<b>7</b>
 <b>VIAT/C/LLETZ</b>	Windhoek Central Hospital, Oshakati Hospital, Onandjokwe Hospital, Outapi Hospital, Rundu Hospital, Katima Mulilo Hospital, Otjiwarongo Hospital, Keetmanshoop Hospital, Luderitz Hospital, Opuwo Hospital, Nankudu Hospital, Andara Hospital	<b>12</b>
 <b>LLETZ only</b>	Walvis Bay Hospital	<b>1</b>
<b>Totals</b>	<b>14 Regions</b>	<b>61</b>

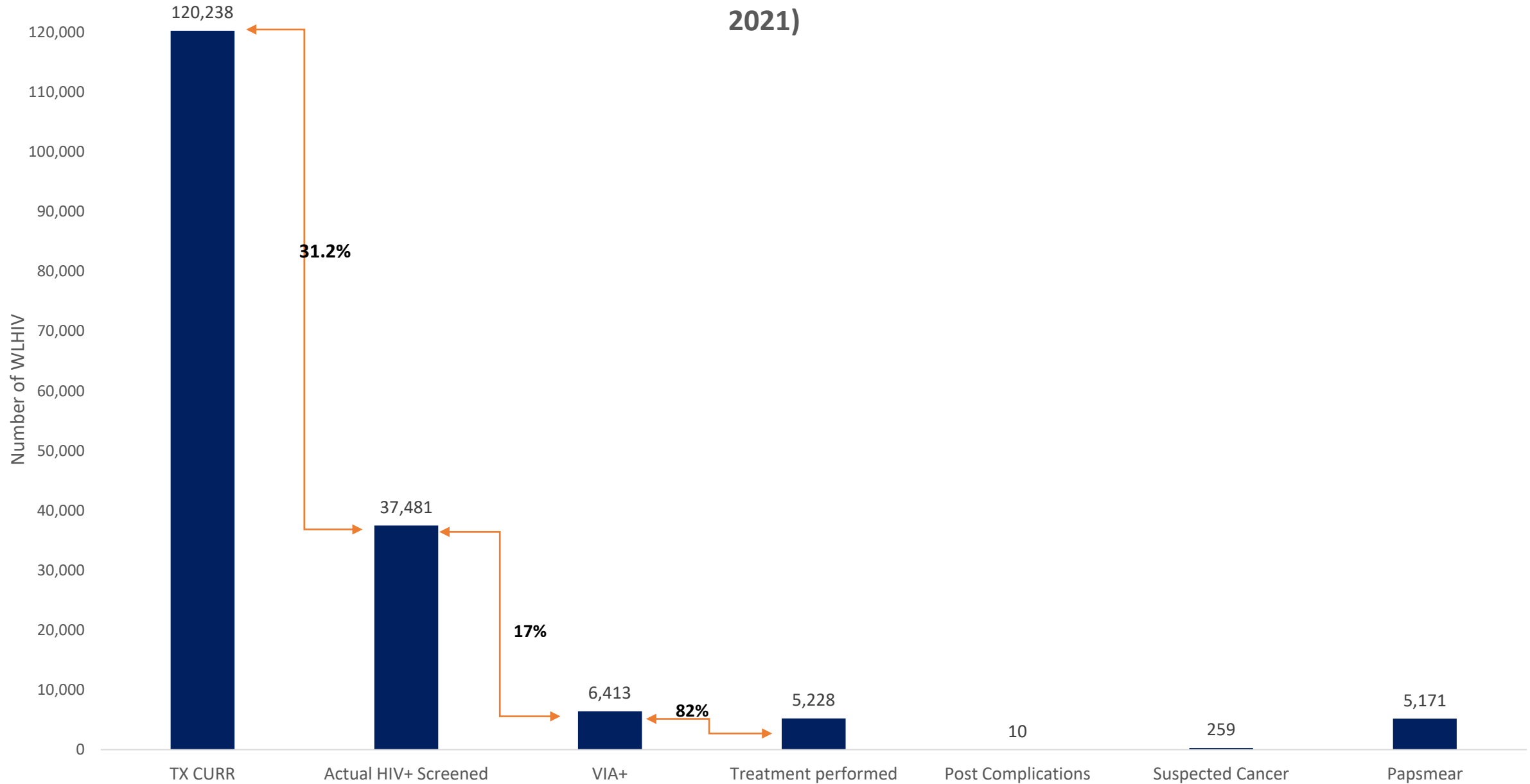
Source: Namibia national cervical cancer program data 2021

# Namibia HIV Epidemic and Cervical Cancer

- Cervical cancer rate is impacted by the high HIV prevalence
- HIV changes the natural history of HPV infection which causes cervical cancer
- WLHIV 5-6X more at risk of developing CaCx compared to HIV negative counterparts.
- HIV-infected women are more likely to have:
  - Genital HPV infection
  - Concurrent multiple HPV infections and strains
  - Persistent HPV infection
  - Earlier appearance of cervical pre-cancer and cancer compared to HIV-uninfected women
  - Progress to death within ~15 months from time of identification, fast disease course

Validated for Namibia-Globocan 2020 data, 15% of all cases were below 34 years of age and of these more than 75 percent were WLHIV,.

# Estimated Total Tx Curr against Total Cervical Cancer Screened(VIA) and Treated (FY18 - July 2021)



Source: Namibia national cervical cancer program data 2021

\*Treatment includes cryotherapy, thermocoagulation, and LLETZ

HIV services			Integration	Social enablers		
95–95–95 testing and treatment targets achieved within all sub-populations and age groups.	95% of women of reproductive age have their HIV and sexual and reproductive health service needs met; 95% of pregnant and breastfeeding women living with HIV have suppressed viral loads; and 95% of HIV-exposed children are tested by 2025.	95% of people at risk of HIV infection use appropriate, prioritized, person-centred and effective combination prevention options.	Adoption of people-centred and context-specific integrated approaches that support the achievement of 2025 HIV targets and result in at least 90% of people living with HIV and individuals at heightened risk of HIV infection linked to services for other communicable diseases, non-communicable diseases, sexual and gender-based violence, mental health and other services they need for their overall health and wellbeing.	10–10–10 targets for removing social and legal impediments towards an enabling environment limiting access or utilization of HIV services		
				Less than 10% of countries have punitive legal and policy environments that deny or limit access to services.	Less than 10% of people living with HIV and key populations experience stigma and discrimination.	Less than 10% of women, girls, people living with HIV and key populations experience gender inequality and violence.
				Achieve SDG targets critical to the HIV response (i.e. 1, 2, 3, 4, 5, 8, 10, 11, 16, 17) by 2030		

Adolescent girls and young women (aged 15-24 years)

90% have access to sexual and reproductive health services that integrate HIV prevention, testing and treatment services. These integrated services can include, as appropriate to meet the health needs of local population, HPV, cervical cancer and STI screening and treat, female genital schistosomiasis (*S. haematobium*) screening and/or treatment, intimate partner violence (IPV) programmes, sexual and gender-based violence (SGBV) programmes that include PEP<sup>4</sup>, emergency contraception and psychological first aid.

2 Adult women (aged 25+)



# Covid-19 obstacle

## Challenges

- Reduced ability to provide onsite and mobile cervical cancer screening services.
- Reduced Client clinic visits,
- Reallocation of resources to fight COVID.
- Providers directly affected

## What kept the “momentum”

- Continued messaging to encourage women to seek screening
- Staggering of clients, booking & screening by appointment
- Mobilization of resources in preparation for Catchup activities
- People centered services.

New developments& The future for NCCP

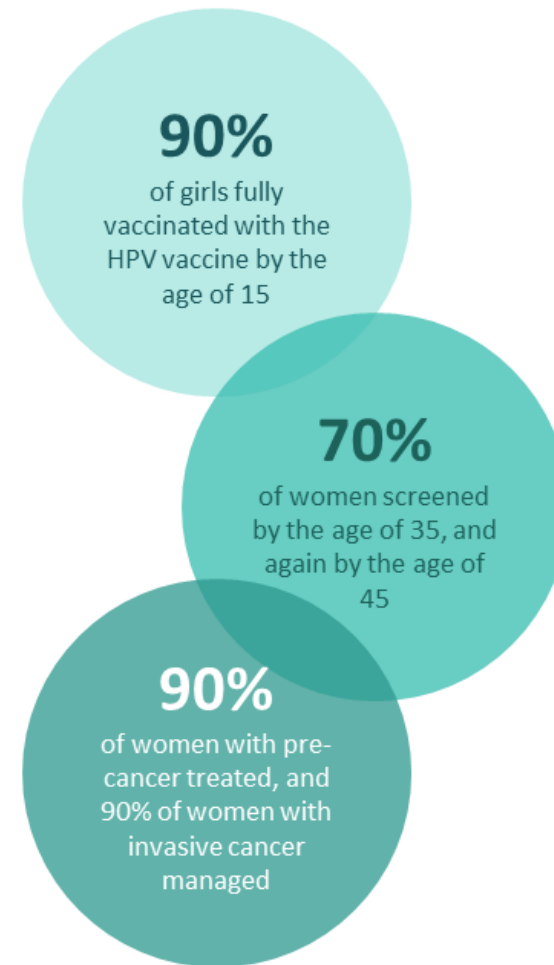
# WHO Elimination strategy

A vision of a world where cervical cancer is eliminated as a public health problem

Launched by WHO in 2020

- a threshold of 4 per 100,000 women-years for elimination as a public health problem
- the following 90-70-90 targets that must be met by 2030 for countries to be on the path towards cervical cancer elimination

New Screening recommendations published 2021  
recommending HPV based testing as the primary screening test.



# To Achieve elimination NCCP

- Introduction of HPV vaccine-in the pipeline, policy and strategy in place
- Intensify cervical cancer screening efforts, scoping for and introduction of HPV based screening. Preliminary stage
- Strengthen tertiary preventative services for cervical cancer.

# Key message

- WLHIV are at a greater risk of developing cervical cancer.
- Cervical cancer is preventable through early detection and treatment of precancers.
- Secondary preventative services are now available nationwide.
- Link WLHIV to cervical cancer screening services at every opportunity

# References

- <https://gco.iarc.fr/today/online-analysis-map?v=2020&mode>
- [https://www.can.org.na/wp-content/uploads/2019/05/Cancer in Namibia 2006-2009 Final-2.pdf](https://www.can.org.na/wp-content/uploads/2019/05/Cancer%20in%20Namibia%202006-2009%20Final-2.pdf)
- <https://www.can.org.na/wp-content/uploads/2019/05/Cancer-Registry-in-Namibia-2010-2014.pdf>
- Namibia *national cervical cancer program data 2021*
- <https://www.unaids.org/sites/default/files/2025-AIDS-Targ>
- <https://pubmed.ncbi.nlm.nih.gov/34626498/>
- <https://www.who.int/initiatives/cervical-cancer-elimination-initiative>