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EARLY CERVICAL CANCER: DETECTION, TREATMENT AND CONTROL, SINGIDA REGION TANZANIA

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Background: Cervical Cancer is almost 100% preventable but every year across Africa, 53,000 women die of the disease. In Tanzania, the incidence is 50.9/100,000 per year with mortality rate of 37.5 per 100,000. It is detected late because of lack of diagnostic facilities, resource people and lack of effective treatment of early cervical lesions.

Objective: To detect, treat and eliminate pre-cancerous lesions before developing into cancer and to estimate visual inspection under acetic acid (VIA) positivity rate in productive age groups of 30-50 yrs.

Methods: VIA was used to detect the pre-cancerous lesions and treat them. Inclusion criteria for cryotherapy or loop electrosurgical excision procedure (LEEP) treatment were VIA positive results, lesions <75% of the cervical area and or <2mm beyond the probe. Lesions suspicious of cancer, reaching vaginal wall or having cervix deformities were excluded from treatments.

Results: From Jan' to Jun' 2018; 572 out of 880 Female targets were screened of cervical cancer (Cacx). 45 out of 572 had VIA positive results. The VIA Positivity Rate was 8%. 32 (71%) women were treated by cryotherapy and 6 (13%) by LEEP. The 27 (5%) with large lesions suspected to have carcinoma of the cervix (Cacx) had biopsy for histopathological confirmation and referrals for radiotherapy.

Experiences & lessons learnt: Majority of 486 (85%) women knew someone may die of cervical cancer and may as well die of it. Almost all 543 (95%) felt worried if found to have cervical cancer lesion. 143 (25%) of women from the villages reported to have difficulties with time or money to travel to the regional hospital, the only centre offering for cervical cancer screening and treatment in Singida.

Conclusion: VIA, cryotherapy or LEEP techniques require fewer resources, low-tech equipment and provide immediate results.

Transferability: VIA through facility based or outreach basis, equipped with cryotherapy /LEEP offers great benefit in diagnosis and treatment of early Cacx in Tanzania

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