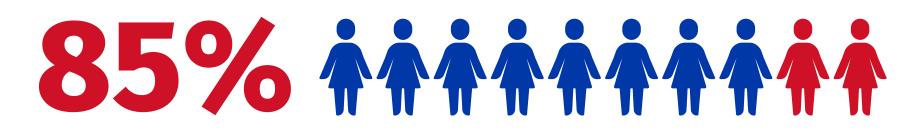
## National University Hospital

## **CERVICAL CANCER SCREENING IN THE PHILIPPINES: INSIGHTS INTO DISPARITIES IN PREVENTION AND DETECTION IN A LOW-MIDDLE INCOME COUNTRY**

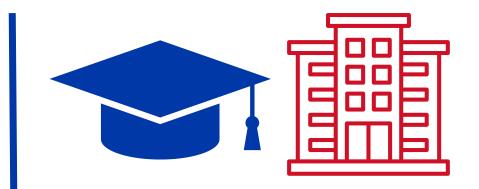
**ROMELYN IMPERIO-ONGLAO & ANGELICA STEPHANIE K. MUÑOZ** CLINICAL FELLOWS, GYNAECOLOGIC ONCOLOGY, DEPARTMENT OF OBSTETRICS AND GYNAECOLOGY NATIONAL UNIVERSITY HOSPITAL, SINGAPORE



No. of cervical cancer cases and related deaths occur in Low-Middle Income Countries (LMICs)

44% VS 60% Women who went for cervical cancer screening in LMICs







Less than 1% of the estimated eligible population in the Philippines

**Region 8**, characterized as **one of the poorest regions**, in the Philippiness exhibited the *highest proportion of women* testing positive or suspected of cervical cancer at 23.53%

**Educational level and** urban living are identified as influential factors facilitating cervical cancer screening.

## Visual Inspection with Acetic Acid (VIA)



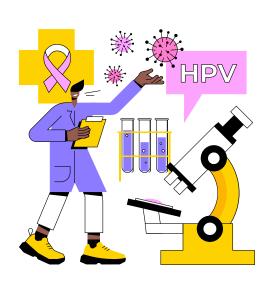
Since 2009, the Philippine Department of Health recommended screening a protocol for women aged 25-55, advocating for Visual Inspection with Acetic Acid (VIA) every 5-7 years in areas without Pap smear capabilities. This method served as the primary screening tool in local health units, district hospitals, and provincial hospitals.



VIA entails applying a diluted acetic acid solution (typically 3-5%) to the cervix, allowing for the observation of changes in cervical tissue.



Positive findings prompt referrals to established centers for comprehensive diagnostic tests and subsequent treatment.



## **Philippine Cervical Cancer Screening**

In 2021 Philippine Guidelines on Periodic Health Examination underscore that women aged 30 to 65 should undergo cervical cancer screening every 3 years with cervical cytology alone or every 5 years with high-risk Human Papilloma Virus (HPV) testing.



**VIA continues to be an alternative to Pap smear.** Cost-effectiveness analysis conducted locally revealed that HPV testing and co-testing are pricier compared to cytology-based testing, with Pap smear being deemed costineffective due to its high cost

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