

Agenda Item 6.5 Accelerating Cervical Cancer Elimination

Global Health Council supported by AAP applaud WHO's recognition of cervical cancer as a global public health priority. The AAP recommends routine HPV vaccination for males and females at ages 11-12, although the vaccine is licensed for use in those ages 9-26. According to a study published in 2018, cervical cancer rates for young women fell after HPV vaccine was introduced in the United States. The vaccine was introduced in 2006 to prevent infections that can cause several types of cancer, including cervical. From 2011 to 2014, researchers found that an average of six per 1 million women ages 15-24 contracted invasive cervical cancer, a 29% decrease compared to the four years before the vaccine was introduced. Rates fell for both squamous cell carcinoma (SCC) and non-SCC, and there was a sharp decline after 2009. Among women ages 25-34, cervical cancer rates dropped 13% to 76 per 1 million, and both SCC and non-SCC types declined. However, rates already were declining slowly before vaccine introduction, and there was not a significant decrease afterward as there was for younger women.

Prevention, identification, and treatment of cervical cancer should include support for school health, adolescent immunization, and a commitment to gender equity. Addressing the non-communicable disease burden of women in low-resource settings will also require equitable access to reproductive healthcare. Poor women are among the least likely to have access to adequate and affordable prevention, diagnosis, management, treatment or care services. Women and girls can only fulfil their full potential if we recognize gender equity as a critical determinant of health outcomes and a country's overall development.