

WHO Cervical Cancer Elimination Initiative: Improving access to HPV screening and treatment

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**World Health
Organization**



Proposed Elimination Threshold and Targets

Threshold for Elimination as a Public Health Problem:
Age-adjusted incidence rate $< 4 / 100,000$ women

2030 Targets

90%

of girls fully vaccinated
with HPV vaccine by 15
years of age

70%

of women are screened
with a high-performance
test by 35 and 45 years of
age

90%

of women identified with
cervical disease
(precancer or cancer)
receive treatment and
care

SDG 2030 Target 3.4:

30% reduction in mortality from NCDs

Pillar I: Strategic Actions



- Secure **sufficient & affordable** HPV vaccines
- Improve quality of and **increase coverage** of vaccination
- Improve **communication** and social mobilization
- Innovate to **increase efficiency** of vaccine delivery

70% women screened with a high-performance test & 90% of women with identified cervical disease treated

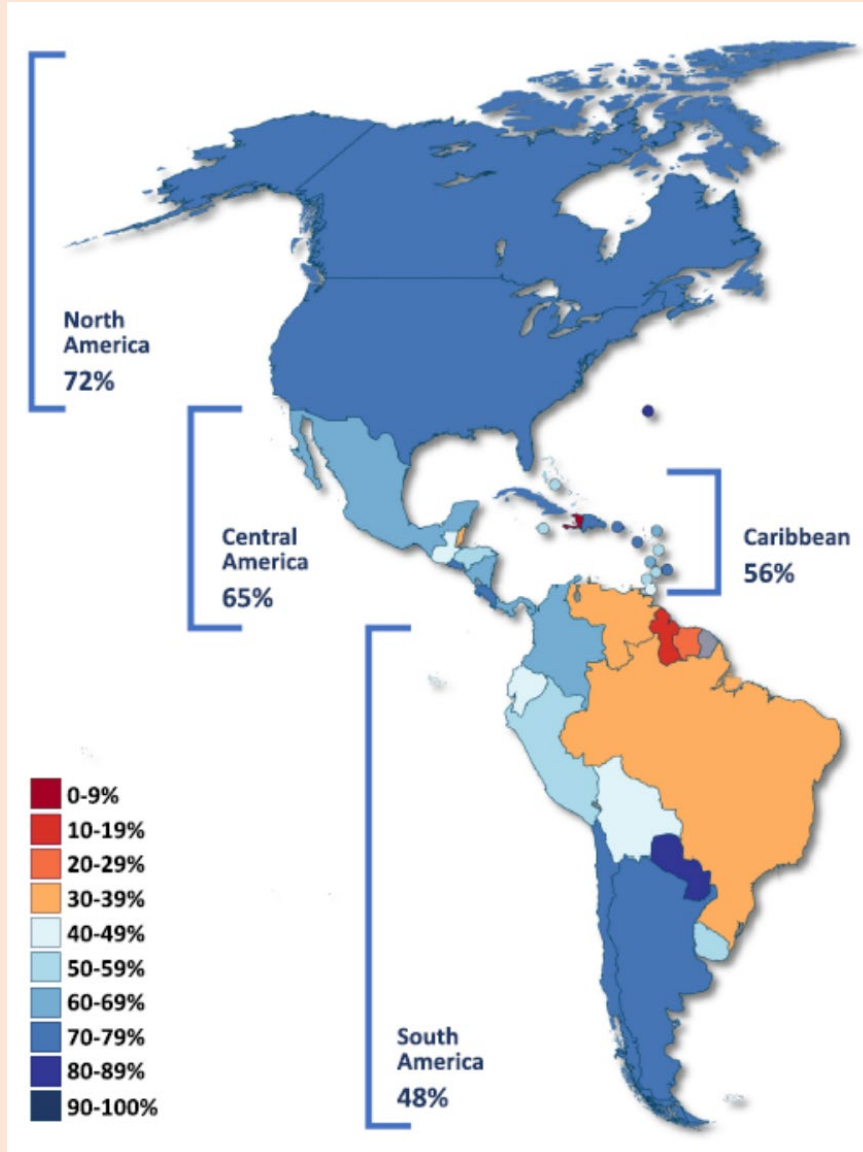
Strategic Actions



- Promote **simple screening algorithms** to increase retention to the screening continuum and improve **programmes' efficiency**
- Understand **barriers**, improve communication/information to create **enabling environment for screening**
- Ensure **affordable supply** of quality assured, high performance screening tests & treatment devices
- Strengthen **laboratory** and **screening services** capacity
- **Integrate** screening and treatment services into primary care

70% women screened with a high-performance test

3-yearly screening coverage in women 25-65y up to 2019

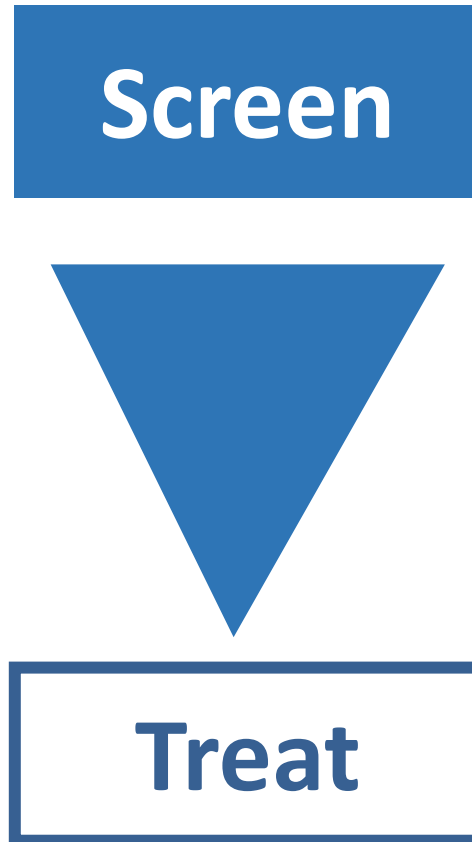
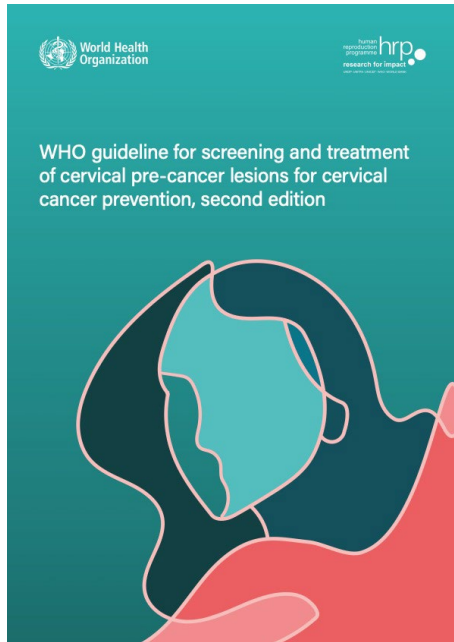


Progress in some countries
but coverage still low !

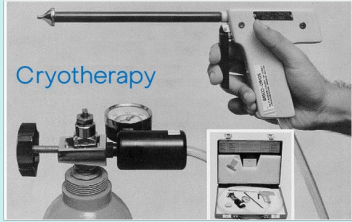
- Only 35% countries in the Americas reached >70% coverage target => **much lower in other regions**
- Screening mostly done with cytology followed by several clinical visits before treatment

NEW APPROACH
Transition to HPV testing and
SIMPLE screening algorithms
to reach target


WHO guidelines for screening and treatment of precancer cervical lesions to prevent cervical cancer



- ✓ HPV DNA testing
- ✓ Self-sampling
- ✓ Ablative treatment after eligibility assessment:



Cryotherapy



Thermal Ablation

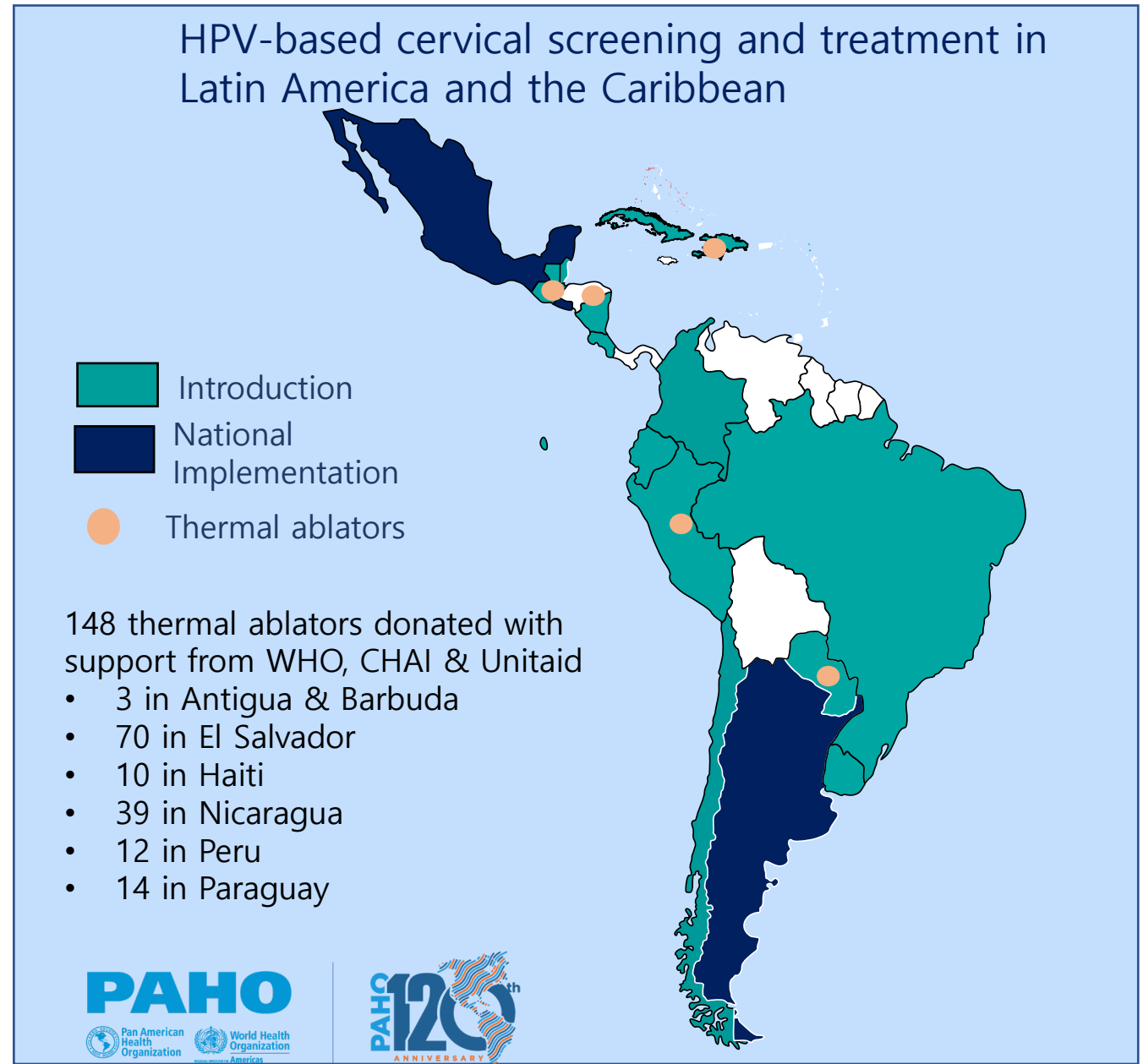
- ✓ EXCISION:
 - LEEP
 - CKC
- ✓ Referral



HPV-based cervical cancer screening and treatment

Globally in 2019

- ✓ 139 countries with cervical cancer screening programmes
- ✓ 48 HPV-based screening
- ✓ 17 implementing HPV testing on self-collected samples

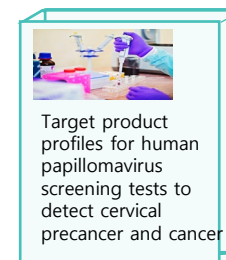
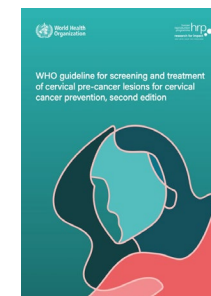


70% women screened with a high-performance test & 90% of women with identified cervical disease treated



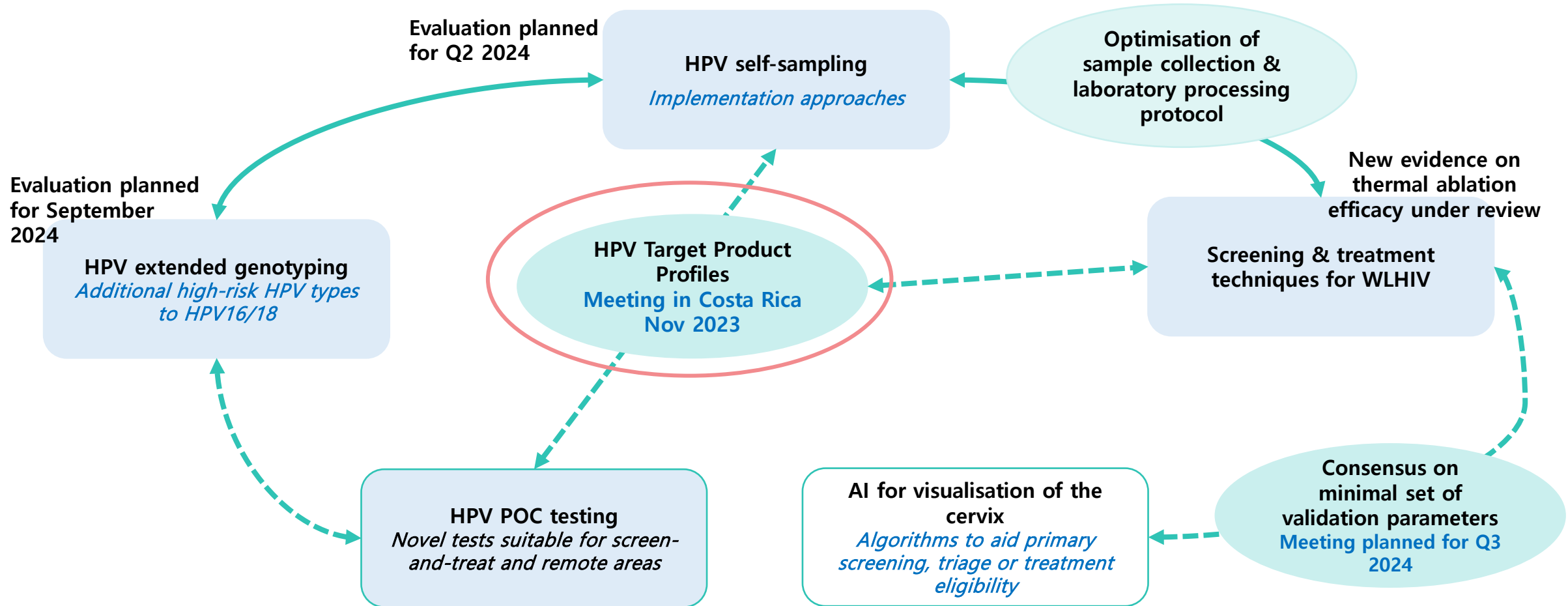
Ensure affordable supply of quality assured, high-performance screening tests & treatment devices

1. Living systematic reviews and recommendations to update 2021 guideline on screening and treatment of precancer lesions to prevent cervical cancer
2. Target Product Profiles for HPV screening tests
3. HPV tests Private Sector Dialogues



Living Systematic Reviews and Recommendations

Five priorities for evidence assessment



Living Systematic Reviews and Recommendations

Progress on evidence assessment

Technique	Progress	Expected outcome of GDG meeting in September 2024
- HPV extended genotyping	- Systematic Review (SR) being completed	- New recommendation
- Screening interval for mRNA testing among the general population	- SR completed	- Updated recommendation
- Thermal ablation & excisional treatment efficacy among women living with HIV	- SR on thermal ablation ongoing - SR on other treatment under planning	- Decision on continuing/stopping evidence monitoring
- Thermal ablation – general population	- SR under planning	- Continue monitoring
- AI for cervix visualisation, harmonising data generation	- Meeting under planning for Q3 2024	- Continue monitoring

What is a Target Product Profile: TPP ?

WHO TPP development is a **WHO-led** process

- Indicates the product characteristics to meet a global health needs
- **WHO TPPs** guide and coordinate development of new health products with clear product characteristics considering [populations, access and equity from the outset](#).
 - PPC – Preferred Product Characteristics: Early indication of priorities
 - TPP – Target Product Profile: Minimal and optimal characteristics
- TPPs aim to incentivize R&D for priority health products of public need



Developing WHO TPPs and PPCs

Identify need



- Literature review
- Consult experts
- Landscape analysis

Scope



- Prepare scope & purpose
- Clearance within WHO
- Determine there is an external audience

Develop



- Prepare draft v0
- Convene panel & consult v0.1
- Post draft for 28 days

Finalize



- Prepare v1.0
- Refine with panel
- Clearance within WHO
- Disseminate
- Retire after 5 years

Developing WHO Target Product Profiles for HPV screening tests to detect cervical precancer and cancer

- WHO WG of 39 members: experts, stakeholders and women's groups
- Participatory approach
- Questionnaire to define TPPs scope:
 - ✓ TPP for HPV screening tests to detect cervical precancer and cancer
 - ✓ TPPs for HPV laboratory (LAB) and point-of-care (POC) tests
- Minimal and Preferred Characteristics in 8 Domains:
 - Scope, Technical Specifications Performance, Design & Operation, Conditions, Quality & Standards, Data & Connectivity, Cost
- Several rounds of Delphi's surveys
 - 75% agreement threshold
 - 80% participation quorum
- Public consultation
 - 68 responses, 31% from industry

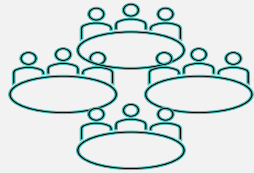
Developing WHO Target Product Profiles for HPV screening tests to detect cervical precancer and cancer

	MINIMAL CHARACTERISTIC	PREFERRED CHARACTERISTIC
Specimen Type	<ul style="list-style-type: none"> ✓ Self- & provider-collection for LAB tests ✓ Only self-collection for POC tests 	<ul style="list-style-type: none"> ✓ Self- & provider-collection for LAB & POC tests
Genotyping Spectrum Exclusion of HPV66 & HPV68	<ul style="list-style-type: none"> ✓ 8 most oncogenic HPV types included for LAB & POC tests 	<ul style="list-style-type: none"> ✓ 12 most oncogenic HPV types included for LAB & POC tests
Result Output	<ul style="list-style-type: none"> ✓ 2-3 genotyping groups for LAB tests ✓ Pos/Neg output for POC tests 	<ul style="list-style-type: none"> ✓ 4 genotyping groups for lab tests ✓ 2-3 genotyping groups for POC tests
Cost per reportable result (all inclusive)	<ul style="list-style-type: none"> ✓ ≤US\$8 for LAB & POC tests 	<ul style="list-style-type: none"> ✓ ≤US\$5 for LAB tests ✓ ≤US\$3 for POC tests

Increasing access to HPV tests and treatment devices

Private Sector Dialogues

Meeting with Private Sector June 2024



To strengthen commitment and contribution of the private sector to increase access to HPV tests

Other coordinated activities:

- Clinical validation of HPV tests
- PQ of HPV tests

Target Product Profiles for HPV laboratory & point-of-care tests

Evaluation of use of novel technologies from living guidelines

Pillar III: Strategic Actions

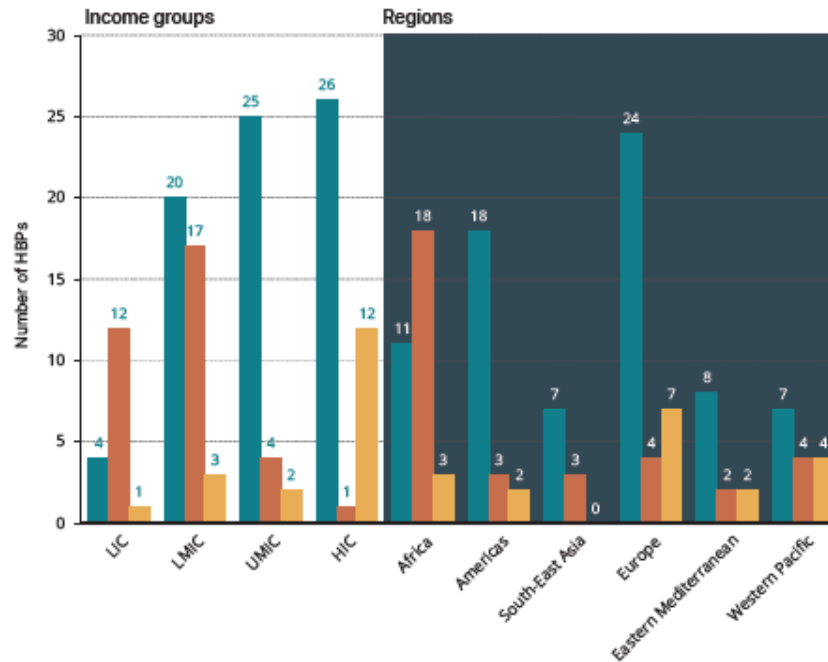


- Strengthen **affordability & availability** of histological diagnosis & treatment
- Ensure adoption of management guidelines
- Optimize workforce to **increase coverage**
- Reduce cancer stigma by strengthening **information/communication**
- Provide comprehensive care for survivors
- Prioritize palliative care as human right

Investing in improving treatment coverage and relieving suffering

Coverage of treatment services is still low !

- Only 25% LIC and 54% lower-middle income countries include radiotherapy in health benefit packages



New guidance

Packages of essential services

- Core treatment services
- Working training modules and optimization

New opportunities

- Strategic partnerships (e.g., Islamic Dev Bank, IAEA)
- Palliative care training and capacity building, access to opioids

70% women screened with a high-performance test & 90% of women with identified cervical disease treated

1. Accelerating through integration and people-centre approaches

- Global partnerships to implement screening through integrated service delivery
- Integration of cervical cancer and HIV care
- **The Global Fund supporting co-morbidities including cervical cancer in 20 countries**

2. Accelerating through partnership and advocacies

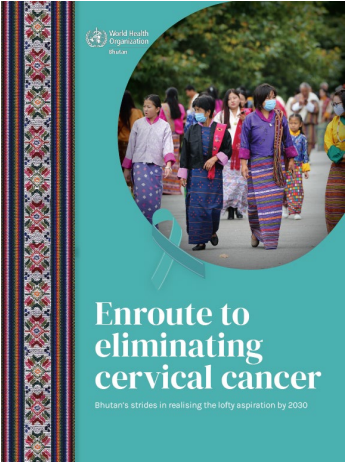
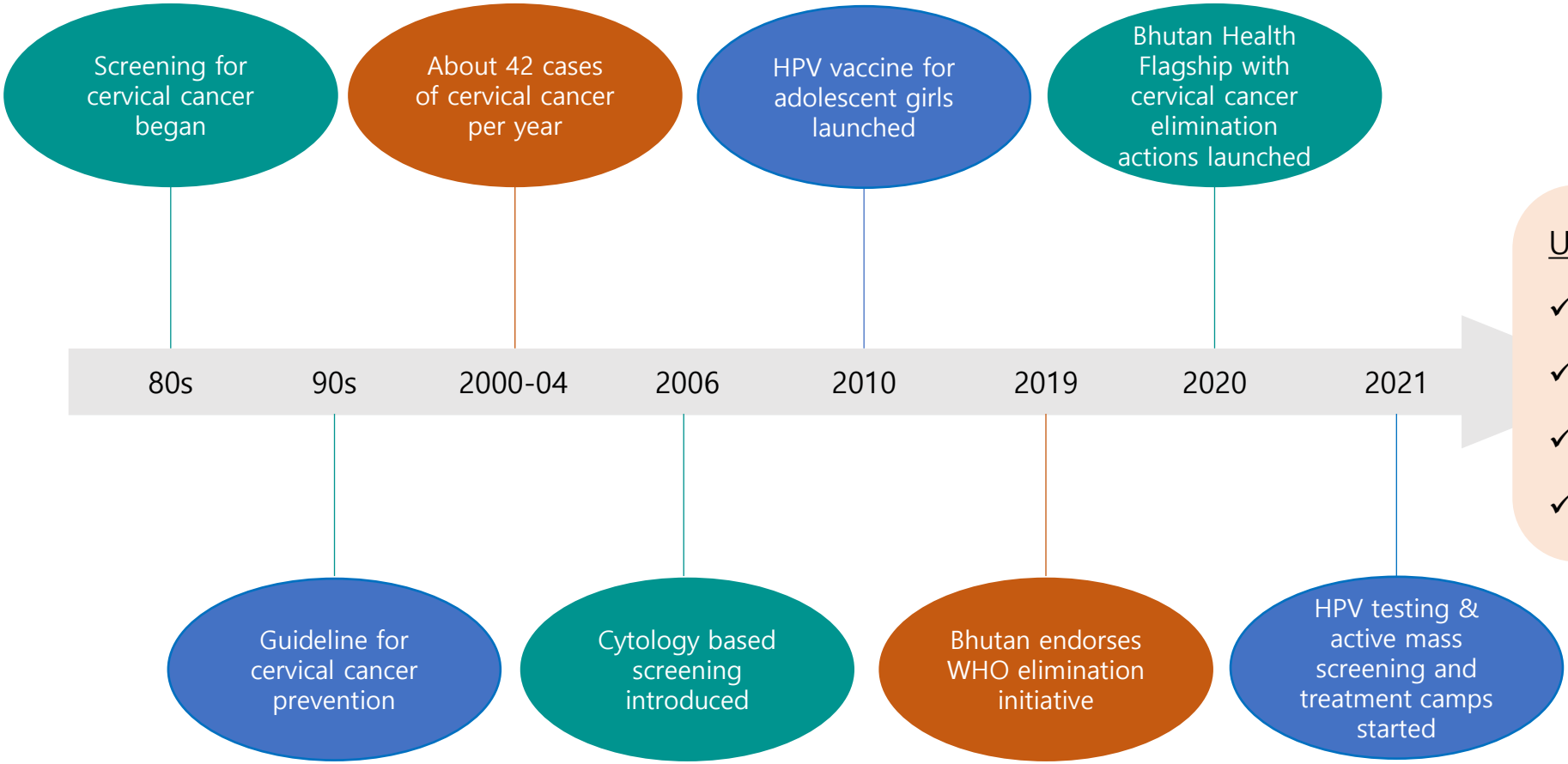
- More than 100 implementing partners engaged
- 1st spouse network

3. Accelerating through data and accountability

- The WHO Global Status Report (2025)
- Tools for data collection, monitoring and evaluation



Success is possible



Up to 09/2023

- ✓97% HPV vaccination coverage
- ✓91% women 30-65y HPV screened
- ✓92% with cervical precancer treated
- ✓100% cervical cancers managed

Wave of new commitments marks historic step towards the elimination of cervical cancer

New country, policy and program commitments, plus nearly **US\$ 600 million** in new funding, at first-ever global forum offer a chance to save hundreds of thousands of lives by 2030.

5 March 2024 News release

Cartagena de Indias, Colombia

Governments, donors, multilateral institutions, and partners today announced major new policy, programmatic and financial commitments, including nearly US\$ 600 million in new funding, to eliminate cervical cancer. If these ambitions to expand vaccine coverage and strengthen screening and treatment programs are fully realized, the world could eliminate a cancer for the first time.

Global Cervical Cancer Elimination Forum Commitments

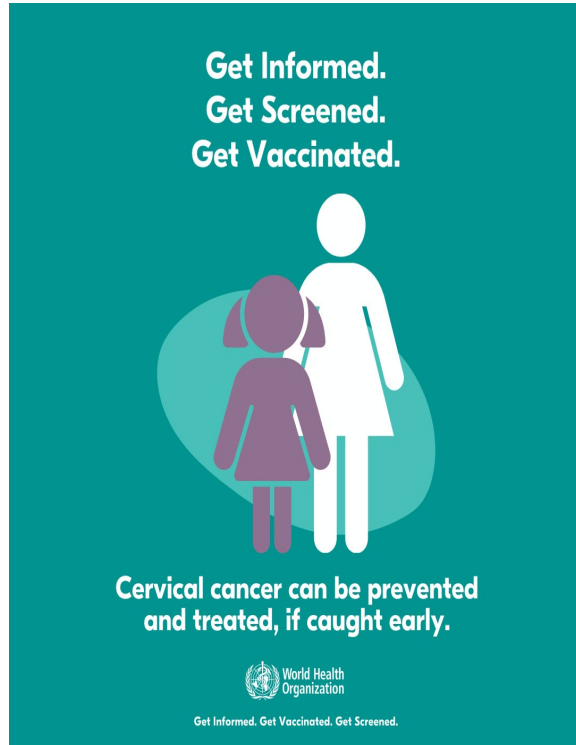


<https://www.who.int/initiatives/cervical-cancer-elimination-initiative/cervical-cancer-forum>

In summary

- Elimination of cervical cancer is commitment we make to all women and girls – to spare millions from the harms of a preventable cancer
- Progress accelerating – shift to innovative approaches to scale-up needed, enhanced through partnerships and coordination
- Local stakeholder leadership is driving improvement, increasing capabilities and addressing inequalities
- Progress can only be achieved if we measure impact and outcomes.

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