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HPV Prevention
and Control Board

Cancer registries: Data Collection, Challenges and Steps to Strengthen Registries in Nepal

Presented by:
Dr. Pradip Gyanwali
Executive Chief: Nepal Health Research Council

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Current Status of Cervical Cancer in Nepal

Incidence:

- Cervix cancer is estimated as the commonest cancer among women in Nepal (GLOBOCAN 2020).
- PBCR 2019 has reported cervical cancer as the second most commonest cancer among women (11.1%)
- Among the total incidence cases 5.5% were cervical cancer. The incidence was higher in semi-urban (14.6%) and rural (13.3%) regions compared to urban area (9.1%)

Prevention:

- National Cervical Cancer Screening and Prevention (CCSP) program was targeted to screen at least 70% of target population (30-60 years) in 2017 but the screening utilization is minimal (16%) (Shrestha et.al 2022).
- Nepal does not have nationwide HPV vaccination campaign. However, few HPV vaccination pilot programmes have been implemented; one of which started in 2016 and is ongoing.



Cancer Registration in Nepal

Hospital Based Cancer Registry (HBCR)

HBCR initiated at B.P Koirala Memorial Cancer Hospital (BPKMCH); a national level cancer institute in 1995. Currently there are 14 HBCR at tertiary level hospitals of the country and the network works under National cancer registry program (NCRS)

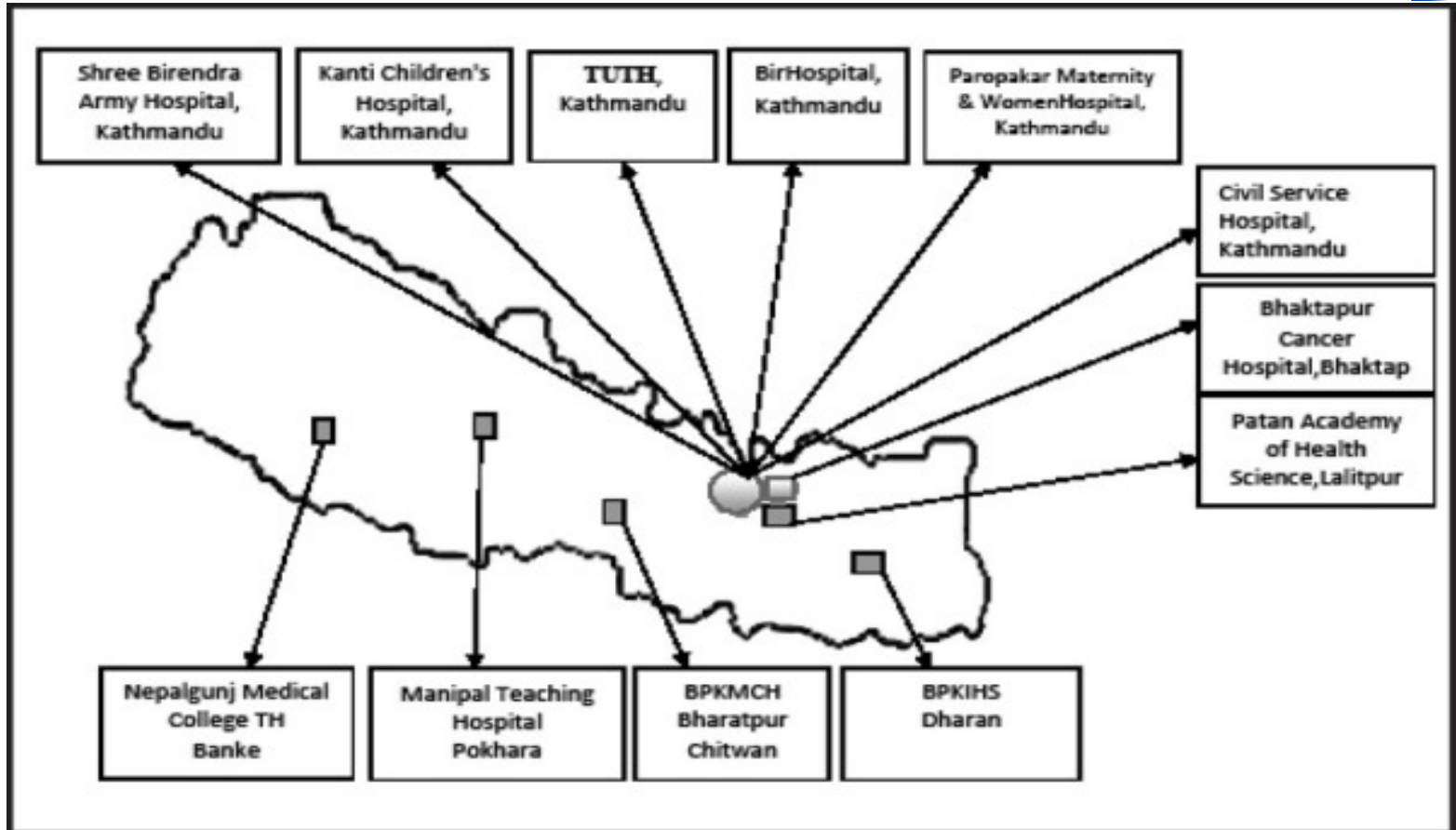


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HBCR Networks in Nepal





Population Based Cancer Registry (PBCR)

Nepal Health Research Council, national apical body for research conduction and regulation, has initiated PBCR since 2018 in 9 of 77 districts of Nepal covering 21% of total population

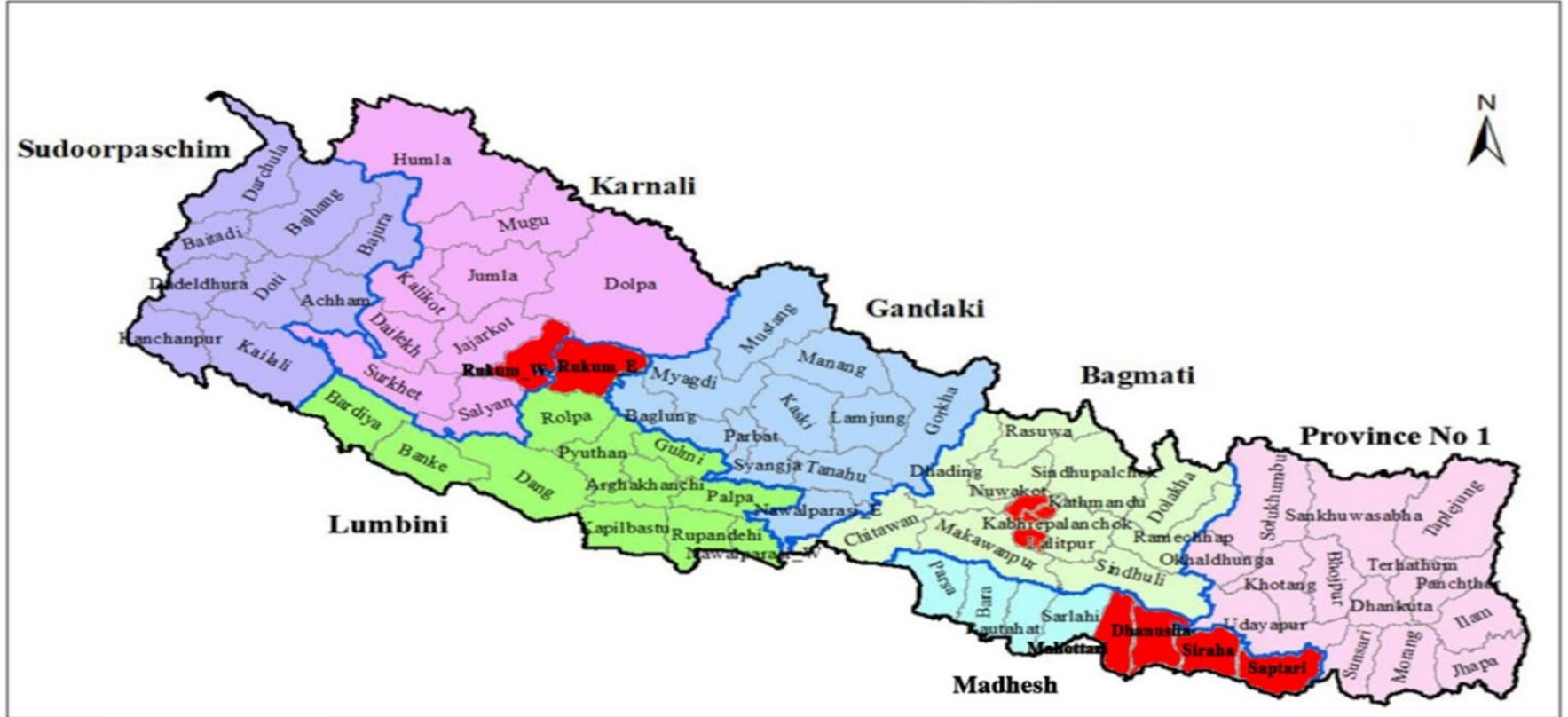
PBCR collects information on all reportable malignancies from multiple sources such as health facilities, laboratories, hospices, alternative treatment centers.

In addition, PBCR collects data from the community. Cancer cases in the community are traced with the involvement of FCHVs, community leaders, local political leaders and community health workers.

Collected data are checked for duplication, data quality and coded (ICD-0-3) by trained registry staffs and entered into CanReg5 software.



Selected Geographical regions for PBCR in Nepal





Challenges of Cancer Registries

- Poor recording and reporting system in health facilities. Absence of Electronic Medical Record.*
- Inconsistencies in recording system within health facilities.
- Difference in the timeline of data collection between HBCR and PBCR**
- Registries are being overlooked by concern authority
- Substantial cost/Limited funding impacting data capture, research and capacity development



Steps to Strengthen Data Collection System

- Government should focus towards digitalization of uniformed medical recording system with some mandatory variable in all government and private health facilities.
- Collecting death information is quite challenging in Nepal. Thus, government should emphasize towards strengthening the death recording system including cause of death.
- Current PBCR should be strengthened and expanded to all provinces of the country.
- FCHVs (Female community health volunteer) should be trained to trace cancer cases in the community.



HPV Prevention Strategies

- Integrated hospital and population based registries with additional variables (diagnostic procedures, disease extent, treatment details [first, subsequent], outcome[recurrence, follow-up, etc.])
- Monitoring performance and quality improvement of registries
- Improved cancer diagnostic, treatment and prevention modalities
- Research and innovation empowerment for evidence generation
- Multi-sectoral co-ordination and collaboration at national and international levels

Thank
You