



COALITION to STRENGTHEN
the HPV IMMUNIZATION
COMMUNITY



HPV Prevention
and Control Board



THE INCLEN TRUST INTERNATIONAL

Cervical Cancer Screening Program in Bhutan

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Bhutan

South Asia Regional Meeting

HPV Prevention and Control Landscape and the way forward.

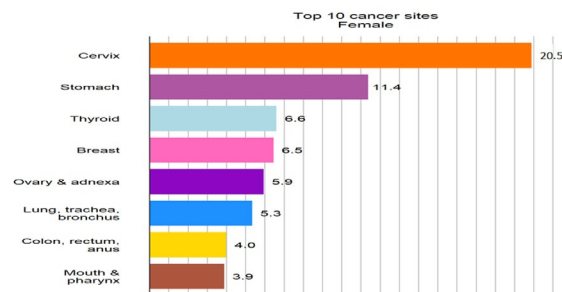
13^h , 14^h and 15^h - Dec 2022– New Delhi, India.

Outline

1. Background
2. Introduction of HPV screening
3. Screening programs
4. Current Status: Towards elimination of Cervical Cancer
5. Challenges
6. Lessons learned

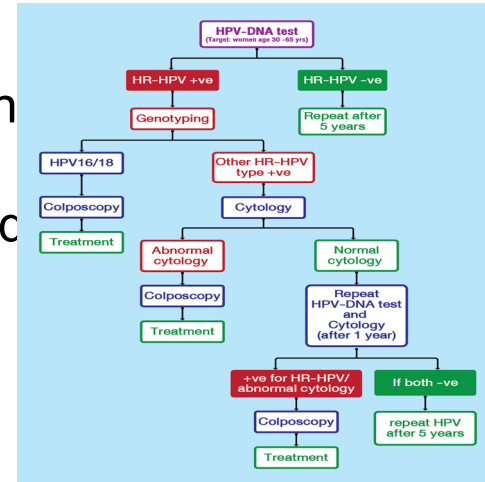
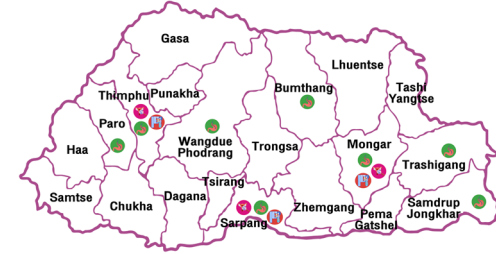
Background: Cervical cancer screening

- Nationwide Pap smear Program introduced since 2006
- HPV vaccination program for adolescent girls in 2010 with around 97% coverage
- Cervical cancer is the most common cancer in Bhutanese women (IR:20.5/100000 & MR: 5.3/100000)
- STEPS survey 2019 showed **only 60%** of women had a Pap smear in last 5 years
- Though cervical cancer is more common in women younger than 50 years of age, 70% of deaths occurred in older women
- Challenges with pap smear program



Introduction of HPV Screening

- HPV-DNA testing system introduced in 2020
- Rapid Capture (HC2-HPV system): 3 regions (3 Cytology Centers)
- HPV DNA, Genotyping and LBC
- Development of screening guideline and algorithm
- Training on health workers on HPV and LBC
- Cancer online reporting system DHIS 2
- Expansion of treatment centers

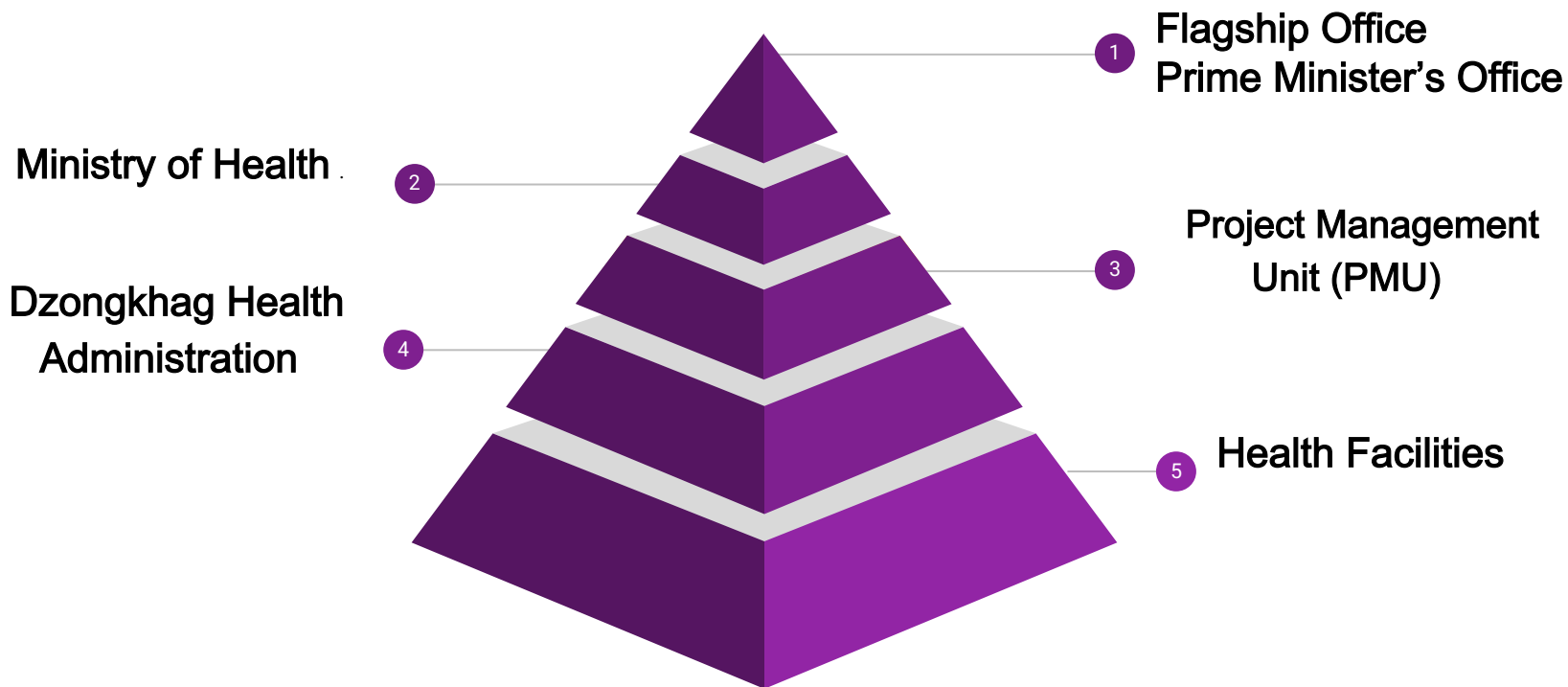


Screening Programs

- All target women (**30-65 years**) are registered or line listed by respective health facilities in their catchment area **DHIS2** (online reporting system)
- Timeline or period of screening program are announced through national or local media, social media and through the local government
- **Camp based screening** program are carried out in different Districts
- All samples from the region/districts are transported to the HPV testing in designated cytology center
- All the required tests (HPV DNA testing, Genotyping, LBC) are be done in the 3 designated centers
- All **abnormal results** are communicated to the Health facilities from where the sample was sent and all the necessary follow up screening and treatment services are be provided through treatment camps
- Records of all women are maintained online from screening to treatment



Implementation Modality



Towards elimination of Cervical Cancer

HPV Screening

- Total Dzongkhags screened All 20 Districts
- Total Population screened 98,721 (77%)
- Total HPV positives 11.3 %

Detection of early cervical cancers

Total colposcopy 5,623

Treatment on site 576

Total no. of cancers detected 72



Challenges

1. Limited HR
2. Competing priorities
3. Women not coming forward for screening
4. New method: HPV DNA testing and LBC

Lessons Learned

1. Modality of camps

- Phasewise implementation of the camp (with dedicated HR)
- Ensure to conduct the camp during appropriate season in some places

1. Engagement of Stakeholder

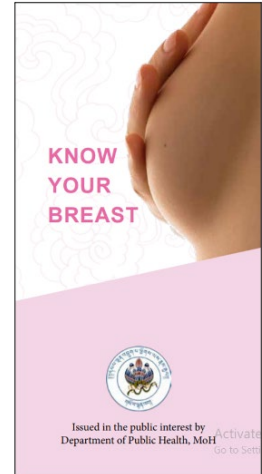
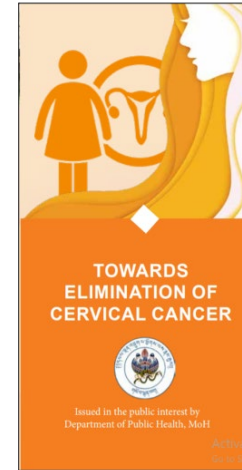
- Full engagement of local government for mobilization of women

1. Supplies

- Adequate supplies to be ensured before camps

1. Advocacy and Awareness

- Ensure continuous awareness programs
- Targeted advocacy required
- Have dedicated individual for social media and information dissemination of the camp



Thank You

