COALITION to STRENGTHEN the HPV IMMUNIZATION COMMUNITY

HPV related cancers incidence, mortality, social and economic impact in Africa

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CHIC SPC Symposium

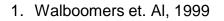
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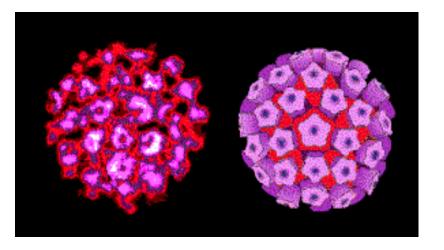
Introduction

- Cancer is a major public health concern, particularly in the sub-Saharan region where the disease burden is high
- HPV is associated with several cancers including: Cervical, vulva, vaginal, penile, anal, oropharynx among others
- Cervical cancer cases have been reported to be on the rise as per data generated by population based cancer registries in SSA.
- Human papillomavirus (HPV) infection is the central cause of cervical cancer¹
- The impact of cancer is further exacerbated by the high burden of HIV in SSA





Human Papilloma Viruses



- HPV types 16,18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68, 73, and 82 should be considered carcinogenic, or high-risk, types,
- HPV types 26, 53, and 66 should be considered probably carcinogenic ⁴
- HPV types 16 and 18 cause 70% of cervical cancers and precancerous cervical lesions.



COALITION to STRENGTHEN the **HPV IMMUNIZATION** COMMUNITY

Cancers associated with HPV

- HPV is thought to be responsible for more than 90% of anal cancers, about 70% of vaginal and vulvar cancers, and 60% of penile cancers²
- Recent studies show that about 60% to 70% of cancers of the oropharynx (traditionally linked to alcohol and smoking) may be linked to HPV²

1. Walboomers et. Al, 1999

2. https://www.cdc.gov/cancer/hpv/basic_info/cancers.htm#re



Cancers Attributable To Infection With Oncogenic HPV in Africa 2018

Site	Total Cancers	AF(%)	Attributable Cancers	% all cancer
Cervix	119,280	100	119,280	11.3%
Anus (s.c.c. only)	2,938	90	2,590	0.3%
Vulva	5,767	40	2,210	0.2%
Vagina	1,977	72	1,420	0.1%
Penis	2,279	40	910	0.1%
Oro-pharynx	2,514	30	760	0.1%
Oral Cavity	13,613	4	550	0.1%
Larynx	10058	4	410	0.0%
Total			128,130	12.1%



Population-Based Cancer Registries in SSA: The Africa Cancer Registries Network

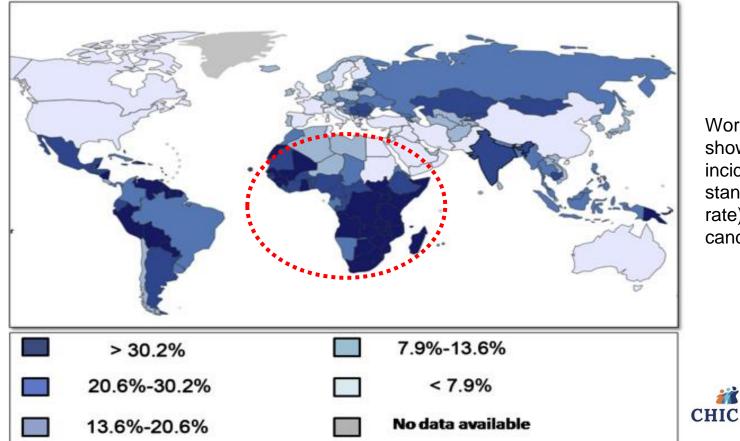
There has been an increase in number of PBCR across SSA though still low compared to high income countries

□35 population-based Cancer Registries in 35 countries of SSA

The incidence rates from these registries are used to generate national estimates



Incidence of cervical cancer globally



World map showing incidence (age standardized rate) of cervical cancer



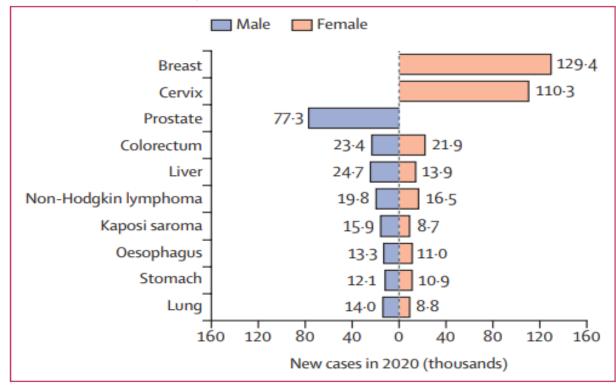
Patterns of cancer incidence and mortality in SSA

Patterns across the 48 countries of sub-Saharan Africa, using IARC's national estimates for the year 2020³ indicate that:

- 801 392 new cancer cases and 520158 cancer deaths were estimated to have occurred
- Cancers of the breast (129 400 female cases) and cervix (110 300 cases) were responsible for three in ten of the cancers diagnosed in both sexes.
- Breast and cervical cancer were the most common cancers, ranking first in 28 and 19 countries, respectively
- Cervical cancer was the leading form of cancer death among women in 27 countries, followed by breast cancer (21 countries)
- In Kenya, cervical cancer is the second most common cancer among women -5,236 new cases and 12.4% of all female cancers annually

3. Bray and Perkin, ACRN 2022

Estimated numbers of cases of the ten most frequent cancers, by sex, in SSA



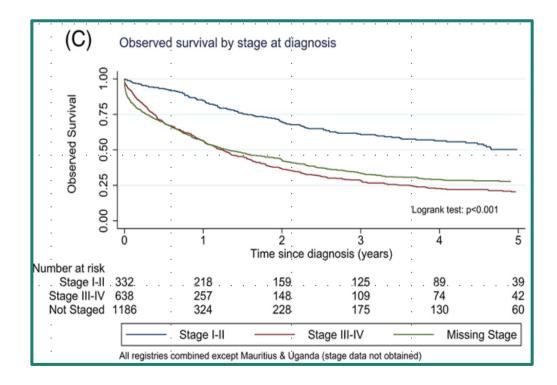
3. Bray and Parkin, ACRN 2022

Cervical cancer trends in incidence in SSA countries



Survival by stage (Cervical cancer)

Source: Sengayi-Muchengeti et al. 2020



Impact in Africa

- 19 of 20 countries worldwide with the highest burden of cervical cancer in 2018 were in Africa ⁵.
- While Cervical cancer is one of the most preventable cancers, poor access to prevention, screening and treatment contributes to 90% of deaths.
- Cervical cancer is also one of the most common in women living with HIV, adding a layer of complexity to young women in Africa who face multiple barriers to good health
- Social discrimination, loss of body image, loss of sexual function, loss of femininity have been reported by patients ⁶
- Economic impact: loss of income, financial distress due to medical and non medical expenditure, work and employment challenges have also been reported
- 5. WHO <u>https://www.afro.who.int/health-topics/cervical-cancer</u> 6. Endale H. et al, 2021

WHO cervical cancer elimination goal

- To eliminate cervical cancer, all countries must reach and maintain an incidence rate of below four per 100 000 women.
- Achieving that goal rests on three key pillars and their corresponding targets:
- 1) Vaccination
- 2) Screening
- 3) Treatment
- Each country should meet the 90-70-90 targets by 2030 to get on the path to eliminate cervical cancer within the next century.
- Population-based registries play a vital role in tracking the progress towards attainment of these goals



70%

of women screened by the age of 35, and again by the age of

45

90%

of women with precancer treated, and 90% of women with invasive cancer managed

Gaps and opportunities

- To achieve cervical cancer elimination there's need to improve prevention strategies. HPV vaccination, screening and follow up along the care continuum are key strategies
- There is need to strengthen cancer registries in SSA and improve the collection of critical variables (e.g., staging, recurrence, co-morbidities)
- Cancer registries need to perform follow-up on over 80% of the cases to determine the outcomes and measure impact of interventions.

Conclusion

- The role of the PBCR has evolved from basic reporting of incident cancers to monitoring population-based indicators of cancer control
- PBCRs are vital for generating data on population-level survival outcomes and for monitoring the cancer care pathway.
- The AFCRN provides a harmonized platform to study trends in cancer incidence, survival by age, stage at diagnosis and country-level human development index.
- AFCRN is open to collaborations and partnerships

Acknowledgement

- CHIC
- AFCRN

• THANK YOU!