Cervical cancer control in Afghanistan

Sofia Azeem Hail MD
Consultant Obstetrician/Gynecologist
Obstetric Fistula Attending Surgeon
CURE International Hospital Kabul, Afghanistan

The unique accessibility of the cervix to cell and tissue study and to direct physical examination has permitted intensive investigation of the nature of the malignant lesions of the cervix. Although our knowledge is incomplete, investigations have taught us the most of these tumors have a gradual, rather than explosive onset. Early phases may be asymptomatic; they are detectable by current available methods. There is convincing evidence that cervical cancer primary prevention and early diagnosis is effective.

Asian countries excluding India and China have 80000 new cervical cancer cases per year. In developing countries 5% women screened for cervical cancer compared to 40% in industries countries. The main obstacle to a further improvement of the situation is the high cost and labor intensive nature of all screening programs, for this reason in most developing countries global preventive programs have been rarely implemented and almost never sustained. The usual picture is one of little financial support which entails poor quality and low coverage rates. Numerous epidemiologic studies reported in the literature have established the positive association between cancer of the cervix and multiple interdependent social factors. Although no epidemiologic study in Afghanistan has confirmed the incidence of cervical cancer, on the basis of above statement this problem is exists.

Unfortunately there is lack of data to mention the background of any kind of work up for screening and diagnosis of cervical cancer in Afghanistan in the past, in spite of Kabul medical university or perhaps some private clinics worked in this regard, the main issue is lack of proper note keeping, documentation and reporting system.

Based on Kabul Cure International Hospital’s pathology department’s report, there were 44 cases of Squamous cell carcinoma of the cervix, from July 2006 up to July 2011 signed out from this pathology lab.

Total of 493 pap smears are signed out from Cure’s pathology laboratory from 2008 up to now.

This is well known that cervical pap smear test is not a diagnostic tool, but a screening mechanism and valid only for screening of cervical neoplasia, it must be performed with care to yield optimum accuracy, and all possible explanations for the abnormal cytologic findings should be considered, considering of all these facts lack of well trained staff is a big challenge to implement such a project in national level in Afghanistan.

HPV vaccination is beneficial in countries with or without cervical cancer screening programs. This vaccine is not currently available in Afghanistan.

References:

1- Cervical cancer control current practice, training course in sexual and reproductive health research, Geneva 2011
2- Clinical Gynecologic Oncology, Philips J.DiSAIA/WILLIAM T.CREASMAN
3- Path consult @cureafghanistan.org