Tackling cervical cancer in Europe amidst the COVID-19 pandemic

According to estimates for 2018, approximately 33,000 cases of cervical cancer occurred and 15,000 people died from the disease in Europe (see map in appendix). Human papillomavirus (HPV) vaccine coverage is relatively low in countries with the highest incidence and screening performance is heterogeneous among European countries. Cytological screening followed by treatment of screen-detected cervical lesions has resulted in substantial decreases in the burden of cervical cancer in western and northern Europe; but in eastern Europe, cervical cancer incidence and mortality remain comparatively high.

Today, new powerful tools are available for primary and secondary prevention of cervical cancer, among which prophylactic HPV vaccines, and screening using validated HPV tests for women—including some tests that can be applied on self-collected samples, and discouraging inefficient policies, such as screening with two tests. We welcome the unprecedented collaborations between the cancer and infectious disease communities, who have been working jointly to tackle the spread of the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) by applying the experience of HPV test evaluation to protocols for comparing and validating SARS-CoV-2 assays and by bringing modellers together in the COVID-19 and Cancer Taskforce Global Modelling Consortium.

However, in the first half of 2020, due to the dramatic COVID-19 pandemic, cervical cancer prevention activities have been disrupted in many European countries. We are concerned and urge the public health community to maintain sufficient resources to sustain HPV vaccination and cancer screening in the future.

Importantly, the COVID-19 pandemic might also generate opportunities for more efficient prevention, by promoting more cost-effective, evidence-based protocols, by focusing on women who are at high-risk, extending HPV testing on self-collected samples, and discouraging inefficient policies, such as screening with two tests. We welcome the unprecedented collaborations between the cancer and infectious disease communities, who have been working jointly to tackle the spread of the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) by applying the experience of HPV test evaluation to protocols for comparing and validating SARS-CoV-2 assays and by bringing modellers together in the COVID-19 and Cancer Taskforce Global Modelling Consortium.

MA was supported by Directorate-General for Research and Innovation of the European Commission (Regional Invasive Species and Climate Change Network, grant number 847865); Belgian Foundation Against Cancer (RHUVAC project) and from the VALCOR project. LB’s research unit has received unrestricted research grants from Merck, Sharpe & Dohme and GlaxoSmithKline. MG received travel support and honoraria from Merck, Sharpe & Dohme to be a speaker. DK, PB, MP, CB, DR, and EW declare no competing interests. Where authors are identified as personnel of the International Agency for Research on Cancer or WHO, the authors alone are responsible for the views expressed in this Article and they do not necessarily represent the decisions, policy or views of the International Agency for Research on Cancer or WHO.

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