



Western Cape  
Government

Health

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# HPV CAMPAIGN in the Western Cape: 2014

UCT World Cancer Day Seminar

12 February 2014

Tracey Naledi



# Presentation Objectives



# Cervical Cancer

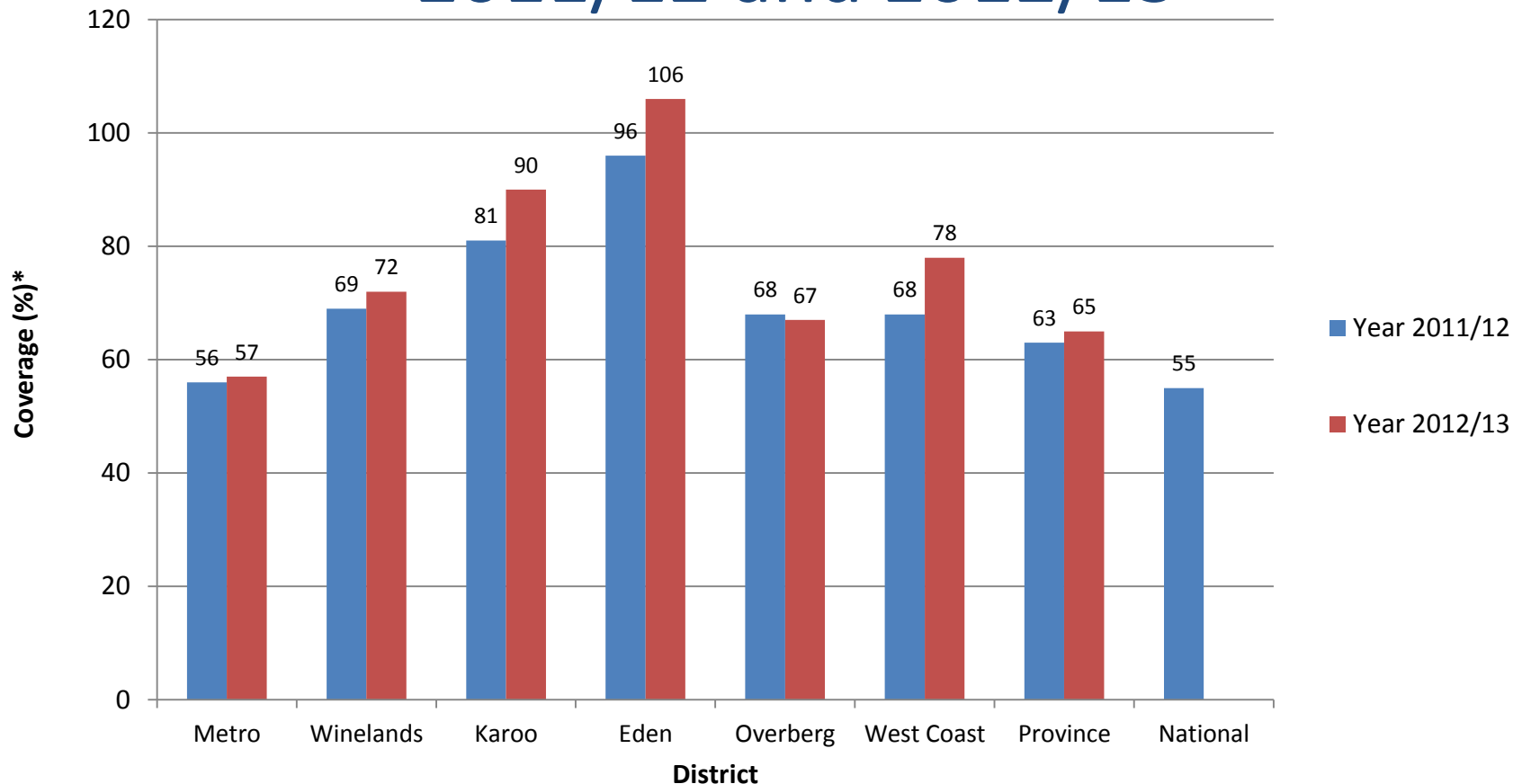
- 2<sup>nd</sup> most common cancer in women (Breast)
- 530 000 new cases
  - 275 000 deaths p/a (>85% - developing countries)
- RSA: 5 743 new cases
  - 3 027 deaths p/a
- RSA lifetime risk 1:26



- Screening: Papanicolaou smear NB!!!



# Cervical smear coverage by district: 2011/12 and 2012/13

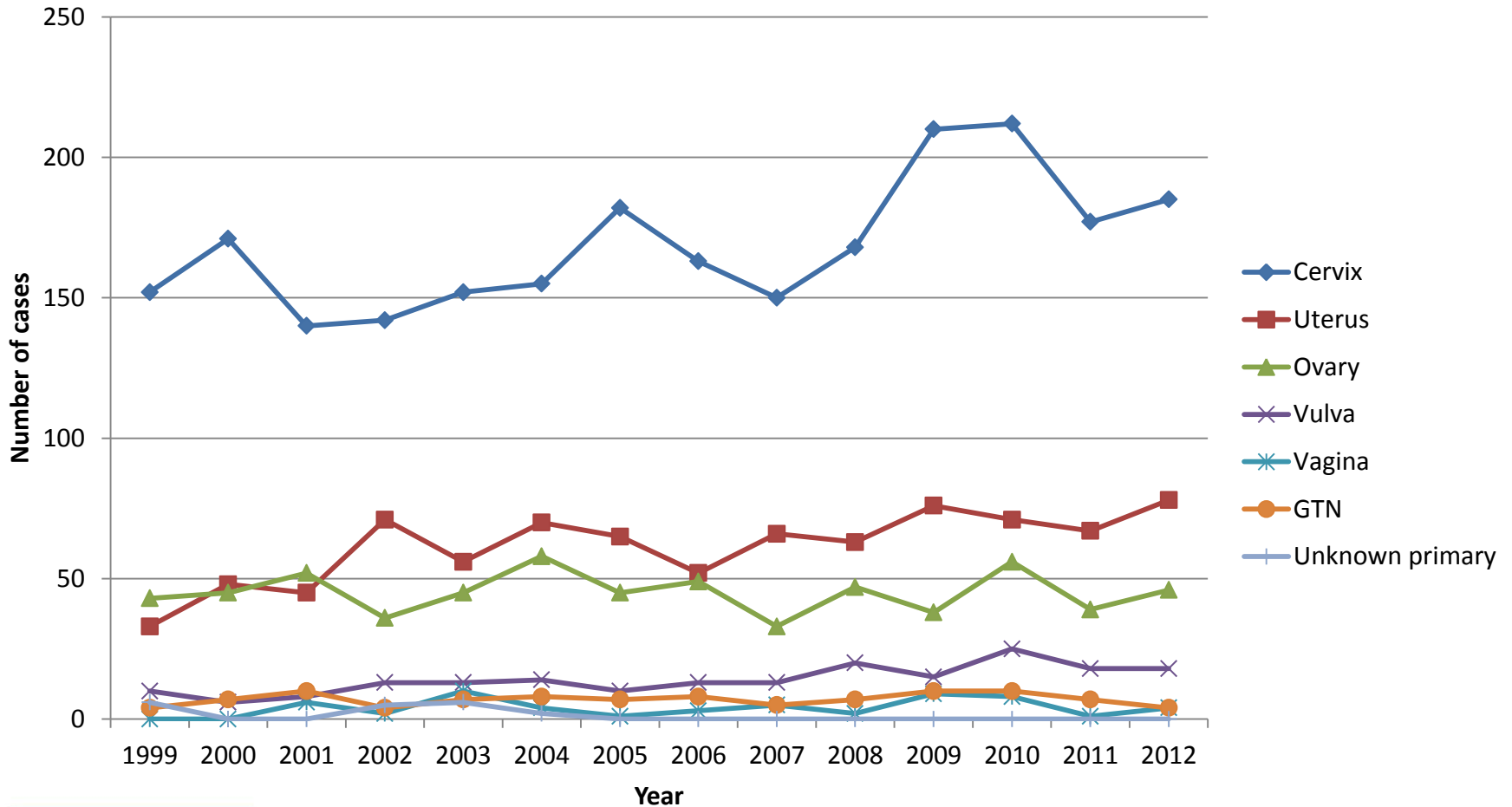


# Some of the challenges

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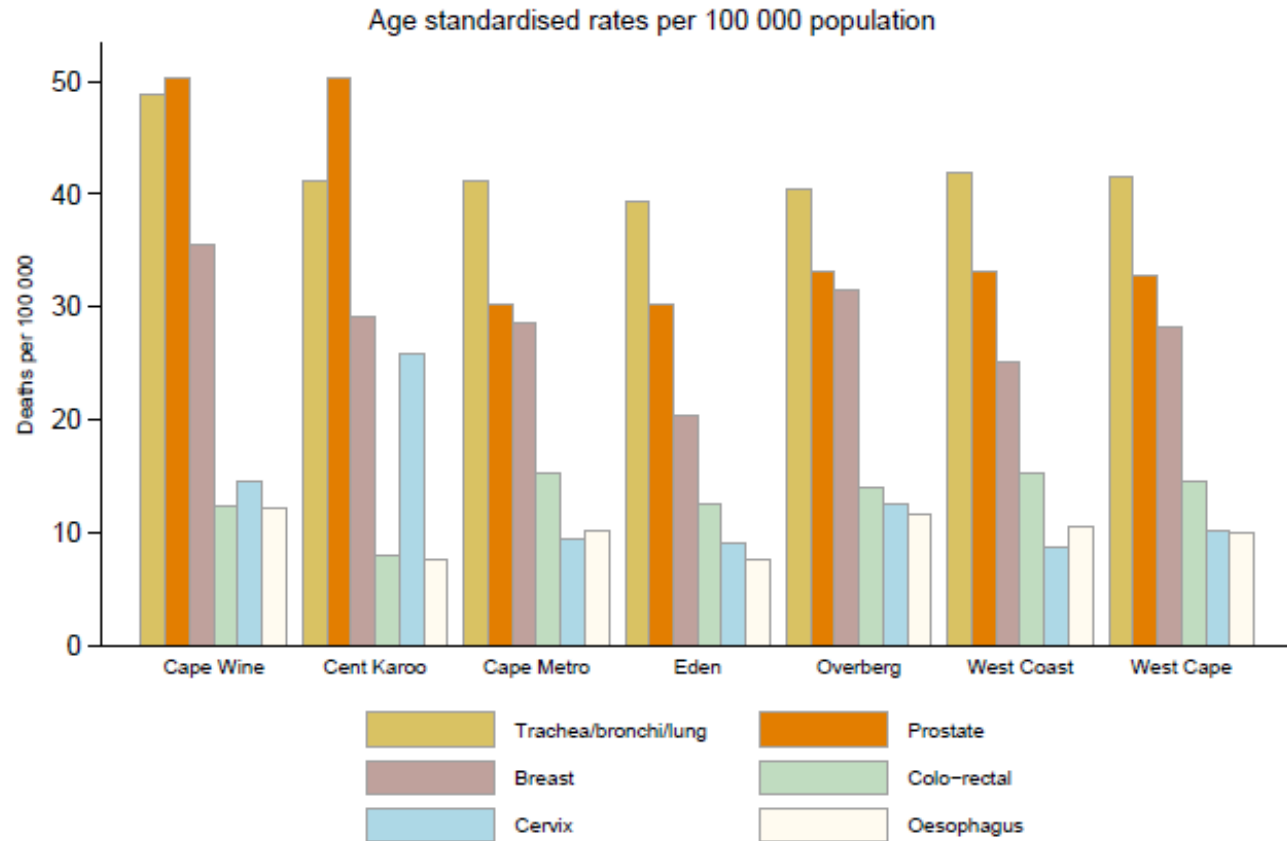
- Coverage of target population for screening
- Quality of the smears
- Receiving results
- Follow up for colposcopy

# Gynaecological cancer cases: GSH 1999 - 2012



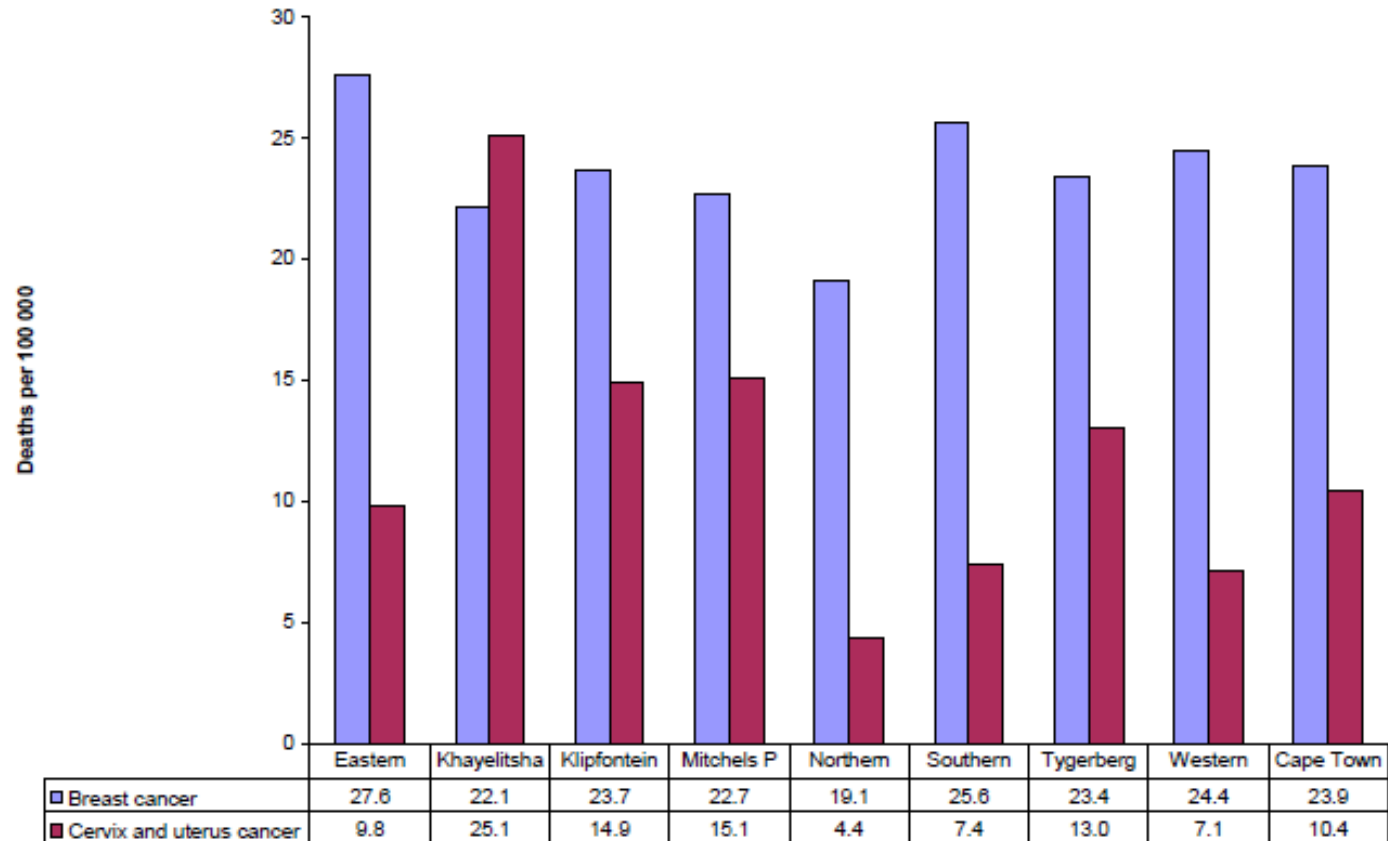
Source: Denny L

# Cancer Mortality rates: Western Cape, 2010



## Age-standardised mortality rates for cervix and breast cancer

by sub-district, Cape Town (pooled estimates 2003, 2004, 2006)





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The introduction of HPV vaccine by  
NDoH is really welcomed!

# Human Papilloma Virus:

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- Cancer of the cervix (CxCa) can be prevented: prevent the Human Papilloma Virus (HPV)
- There are >200 types of HPV
- 70% of all CxCa are caused by types **16** & **18**
- HPV is spread through sexual & intimate contact
- 80% of women will be infected with HPV in life



# Who?

- ONLY Girls
- Quintile 1-5: Grade 4:  $\geq 9$  years old
- Special schools without grades: born 2004  $\geq 9$  yrs
- NO private schools



# Where?

- National Campaign: Communication NB
- Joint venture: Department Health & - Education
- Administered only at schools
- NO HPV vaccinations provided at health facilities



health

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Department:  
Health  
REPUBLIC OF SOUTH AFRICA



education

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Department:  
Education  
REPUBLIC OF SOUTH AFRICA



# When?

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- Annual campaign starting 2014
- 1<sup>st</sup> Round: 10 March – 11 April 2014
  - 1<sup>st</sup> dose
- 2<sup>nd</sup> Round: 29 September – 31 October 2014
  - 2<sup>nd</sup> dose (only to those who received the 1<sup>st</sup> dose)



# What?

- Bivalent HPV vaccine (Types 16 & 18)
- Cervarix™
- Manufactured: Glaxco Smith Kline
- Distributed: Biovac
- R141 each
- 100 single-dose vials p/box
- Cold chain 2 - 8° C
- Do not freeze



# How?

- Signed consent
- 0.5 ml injection intramuscular
- Deltoid of non-dominant arm (90 degrees)
- 2ml syringe & 23 gauge needle (single use)
- Learner sits while injection is administered
  - Observe for @ least 15 min after vaccination
  - Do not apply anything to injection site
  - Do not rub anything on injection site





# Contraindications

- Do not give to pregnant girls
- Give with caution to girls with blood clotting disorders (observe injection site until bleeding stops)
- HIV & mild diseases like flu is not contra-indicated
- Can be used with other vaccines
- Can be used with contraceptive
- Can be given during menstruation
- As with other injections, emergency tray should always be available







# What will be monitored?

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- HPV Coverage in target population
- Safety: Adverse event during immunisation
  - Normal process of reporting any adverse incident related to medication
  - Must be reported: Medicines Information Centre and Paeds PCGC

# Still to be monitored

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- Assessing the long and short term impact of the vaccine e.g.
  - impact on HPV types
  - cervical pre-cancer
  - cervical cancer incidence
  - changes in screening behaviour
- Improving ICD -10 codes, routine data on screening, mortality surveillance system

# In Summary

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- HPV Vaccine is very welcomed as the current prevention strategy has many challenges
- The Campaign in a joint campaign with NDoH and DBE
- Two doses will be provided to girls in public and special schools 9years and older and in Grade 4
- Long term impact of campaign still to be monitored

# Acknowledgements

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- Sonia Botha: Deputy Director Child Health (WC DoH)
- Stephen Titus: Director Facility Based Services

# QUESTIONS And Answers



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Thank you