



HPV-DNA Screening as a Primary Cervical Cancer Screening Modality in Zimbabwe: Obstacles and Recommendations

Ethel Essel*

Department of Emergency Medicine, Canada

Abstract

The World Health Organisation's 90-70-90 cancer strategy is premised upon the implementation of human papillomavirus deoxyribonucleic acid (HPV-DNA) testing as the primary cervical cancer screening modality. The ultimate aim is to reduce the age-standardized incidence of cervical cancer to less than 4 per 100 000 by the end of the

implementing partners to ensure the success of the program and avert cervical cancer deaths.

Keywords: Cervical cancer; HPV-DNA testing; Zimbabwe; screening; obstacles; recommendations

Introduction

Cervical cancer is a leading cause of cancer-related deaths among women in Zimbabwe. The incidence of cervical cancer in Zimbabwe is estimated to be 10.5 per 100,000 women per year [1].

The World Health Organisation (WHO) has recommended HPV-DNA testing as the primary cervical cancer screening modality [2].

However, the implementation of HPV-DNA testing in Zimbabwe has been hindered by several obstacles, including lack of funding, limited human resources, and inadequate infrastructure [3].

This paper discusses the obstacles to the implementation of HPV-DNA testing in Zimbabwe and provides recommendations to overcome these obstacles.

The WHO's 90-70-90 cancer strategy aims to reduce the global burden of cancer by 2030. The strategy is based on three targets: 90% of people having timely and appropriate diagnosis, 70% of people receiving appropriate treatment, and 90% of people surviving for at least 5 years after diagnosis [4].

Cervical cancer is a preventable cancer, and early detection through screening can significantly reduce the burden of the disease. HPV-DNA testing is a highly sensitive and specific screening modality that can detect precancerous changes in the cervix [5].

However, the implementation of HPV-DNA testing in Zimbabwe has been hindered by several obstacles, including lack of funding, limited human resources, and inadequate infrastructure [3].

Lack of funding is a major obstacle to the implementation of HPV-DNA testing in Zimbabwe. The government and private sector have not provided sufficient funding for the program [3].

Limited human resources is another obstacle to the implementation of HPV-DNA testing in Zimbabwe. There is a shortage of trained personnel to perform the tests and provide counseling [3].

Inadequate infrastructure is a third obstacle to the implementation of HPV-DNA testing in Zimbabwe. There are few laboratories equipped to perform HPV-DNA testing, and the existing ones are often overburdened [3].

These obstacles have resulted in a low coverage of HPV-DNA testing in Zimbabwe, which has led to a high incidence of cervical cancer [3].

To overcome these obstacles, several recommendations have been made. First, the government and private sector should provide sufficient funding for the program [3].

Second, more personnel should be trained to perform the tests and provide counseling [3].

Third, more laboratories should be established and equipped to perform HPV-DNA testing [3].

Finally, the public should be educated about the benefits of HPV-DNA testing and encouraged to get screened [3].

By implementing these recommendations, the obstacles to the implementation of HPV-DNA testing in Zimbabwe can be overcome, and the burden of cervical cancer can be reduced.

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Correspondence: Ethel Essel, Department of Emergency Medicine, Canada (email: ethel.essel@openaccesspub.com)

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