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IPVS statement moving towards elimination of cervical cancer as a public health problem

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# Papillomavirus Research

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## IPVS statement moving towards elimination of cervical cancer as a public health problem



IPVS is releasing a **Call to Action** to health authorities to adhere to international standards developed by WHO to develop national, regional and local plans to ultimately achieve the goal of cervical cancer elimination as a public health problem. A markedly reduced incidence of cervical cancer is possible in the near term, with elimination thereafter, if high rates of HPV vaccination and cervical screening are achieved.

### The facts:

Every 2 min a woman dies of cervical cancer

- Cervical cancer is a cancer caused by human papillomavirus (HPV) infection, which can be effectively prevented as a public health problem by vaccination and screening.
- Highly safe and effective vaccines that can prevent the majority of HPV infections that cause cervical and other HPV-associated cancers are available.
- Tests to screen for, and methods to treat, cervical pre-cancerous lesions are available and are proven to reduce cervical cancer incidence.
- Combining HPV vaccination at high coverage for adolescents and high coverage of cervical screening, with appropriate treatment of all women, can eliminate cervical cancer as a public health problem.
- Recent modelling suggests that, with the tools available, elimination of cervical cancer in local populations is achievable within our lifetime. To achieve this, these effective and cost-effective prevention methods will need to be expanded, to include those not currently vaccinated or screened.
- Broad dissemination of HPV vaccines has been achieved in some low and high resource countries, but needs to be scaled up globally, to reach the majority of age eligible individuals.

Today we are poised to markedly reduce the incidence of cervical cancer, with the vision of eventually eliminating it as a public health problem, using the combination of sustained high coverage HPV vaccination and sustained high coverage screening with treatment.

Please help spread the message that we can markedly reduce cervical cancer. We have the science and the tools. We now urgently need the policy, the resources, political will and the public's determination to move forward to implement these actions.

### CONFLICT OF INTEREST

Professor Suzanne Garland, has received Grants to her institution from Commonwealth Department of Health for HPV genoprevalance surveillance post vaccination, Merck and GSK (GlaxoSmithKline) to perform phase 3 clinical vaccine trials: Merck for an investigator initiated grant to evaluate HPV in RRP post vaccination programme, Seqirus for HPV in Australian cervical cancer HPV genotyping study, & VCA (Victoria Cancer Agency) for a study on effectiveness of public health HPV vaccine on HPV genoprevalance and CIN3 in vaccine-eligible age women. She has received speaking fees from MSD for work performed in her personal time and Merck paid for travel & accommodation to present at HPV Advisory board meetings.

Dr. Giuliano's institution has received investigator initiated research grants from Merck & Co, Inc. on her behalf. She is also a member of the Scientific Advisory Board and Global Advisory Board of Merck & Co, Inc.

Dr Julia Brotherton has been an investigator on investigator initiated HPV epidemiology studies which have received unrestricted partial funding for laboratory components from Seqirus (cervical cancer typing study) and Merck (recurrent respiratory papillomatosis study) but has never received any personal financial benefits.

Dr. Moscicki is a member of the Global Advisory Board of Merck & Co, Inc.

Professor Stanley has acted as consultant and advisor to Merck USA, MSD Europe and GSK Biologicals Wavre Belgium

Andreas Kaufmann has received speakers honoraria from Merck, GSK, and Roche.

N. Bhatla advises No conflict of interest.

R. Sankaranarayanan advises No conflict of interest.

Joel Palefsky: Merck and Co: scientific advisory board, grant support, travel support. No funds to me or my institution.

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Agenovir: Grant support  
Vir: advisory board, stock options  
Ubiome: advisory board, stock options  
Silvia de Sanjose advises No conflict of interest.

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