

No one should die from cervical cancer, says Lebanese expert

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An awareness campaign asked women to seek the vaccination and Pap smear tests.

BEIRUT: Cervical cancer is the second most common cancer affecting women after breast cancer. But unlike breast cancer, it is curable and there is a vaccine – yet awareness surrounding the disease is severely lacking in Lebanon.

“This is the most preventable disease. Honestly, no one should die from cervical cancer, no one,” insists Dr. Faysal El-Kak, head of the Lebanese Society for Obstetrics and Gynecology, and also a medical doctor and lecturer at AUB.

January marked cervical cancer awareness month, during which LSOG conducted special events, media appearances and workshops to educate physicians and the public about the risks of cervical cancer and, more importantly, the vaccines available to prevent this disease.

“According to some reports, every hour there is one woman dying from cervical cancer in the MENA region. Globally, every one minute a woman is diagnosed with cervical cancer. Half-a-million new cases are reported every year. [Out of those new cases,] 270,000 will die,” says El-Kak

Cervical cancer is caused by the Human Papillomavirus (HPV) which is the most common sexually transmitted infection in both men and women. Out of hundreds of strains of HPV, a handful have been proven to cause the majority of cervical cancer and vaccinations exist against these strains. Yet, awareness about HPV and cervical cancer are woefully lacking in Lebanon – despite availability of tools to combat the disease.

Kak believes that these dire statistics can change.

“What’s happening in the world now, there are huge numbers reported every year because of negligence,” he explains, adding that with regular clinical examinations and pap smears – the best available tool for cervical cancer screening – the disease can be caught early and treated effectively.

Statistics on cervical cancer in Lebanon are hard to measure, but official numbers report 80-90 new cases of the disease registered per year. El-Kak believes the real number is closer to 240-270 cases annually. More worrying, the cases are being discovered at a late stage, when survival and recovery are more challenging.

“[In Lebanon] 10 percent of women are getting a Pap smear, which is really low. No wonder cervical cancer gets more and more severe without people realizing. It’s a very slow growing disease. If you have precancerous cells today it might take up to 15 years before it develops into cancer,” explains El-Kak.

About 80 percent of people – both men and women – will be infected with HPV in their lifetime, but only about 20 percent of women infected with the virus will see it develop into cervical cancer. There are no outward symptoms of the cancer-causing HPV varieties, but pap smear tests can detect changes in the cells of the cervix, determining whether the cells have become precancerous or cancerous.

“It can be treated early, even if it’s cancerous you can have surgery to get rid of it. It’s something you can really control,” says El-Kak, especially when comparing cervical cancer to other forms of cancer in women. “If you tell me about ovarian [cancer], I say ovarian is a very tough disease. It’s mean and hard to survive. But cervical, I have the tools to detect it and I have the vaccine for it.”

Two vaccinations are available in Lebanon that protect against initial HPV infection: Cervarix and Gardasil, which both guard against the two strains of HPV responsible for most cancers. The vaccine is administered in three doses – the second shot two months following the first, and the third four months after the second dose. The overall cost is about \$200 and it is available to girls from ages 11-26.

Despite cuts in the cost, only about 5 percent of women in Lebanon have been vaccinated.

People are hesitant about arguments for getting the vaccination, according to Dr. El-Kak: “It’s a new, thing – let me give your daughter the vaccine for cervical cancer she might get after 10 years because of sexual activity?”

Especially among more conservative families, this reasoning is not very effective. El-Kak feels attitudes regarding women’s reproductive and sexual health need to change completely, not only to help combat cervical cancer.

“Honestly my real challenge and frustration as a gynecologist is one, how to bring women to seek care and then how to involve them in health care and help their family,” El-Kak says, recalling cases where women come for their clinical exams asking whether it is possible to conduct the examination without showing their genitals.

He believes tackling attitudes toward health care needs to begin on the cultural and political levels: “It’s about access to care, it’s about leaving the house. Think of woman who can’t go [to the clinic] because the kids are at home, she can’t leave them, she has to make food. She can’t leave the cleaning for her husband to do, etc.”

Proper training for physicians is also essential.

“People assume that nobody has sex before marriage – they are living in lala land. As a doctor, I have no right to make any judgment when you walk into my clinic. You can tell me you’ve had 50 partners or that you’ve had zero partners and it shouldn’t register in my mind. What I do is give the proper counseling to help you make an informed decision. That’s why we should work with doctors.”

LSOG conducts regular trainings and seminars. The organization has five such workshops coming up in February and March in the lead up to a “Pap smear national campaign,” which will launch March 8 to coincide with the U.N. International Women’s Day.

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