



Saving lives in the Amazon

Lais Junqueira

Navigation menu with icons for car, bus, walking, bicycle, and airplane. Search input fields contain "Manaus, AM, Brasil" and "Amazonas, Brasil". A button labeled "OPÇÕES" is visible at the bottom right of the menu.

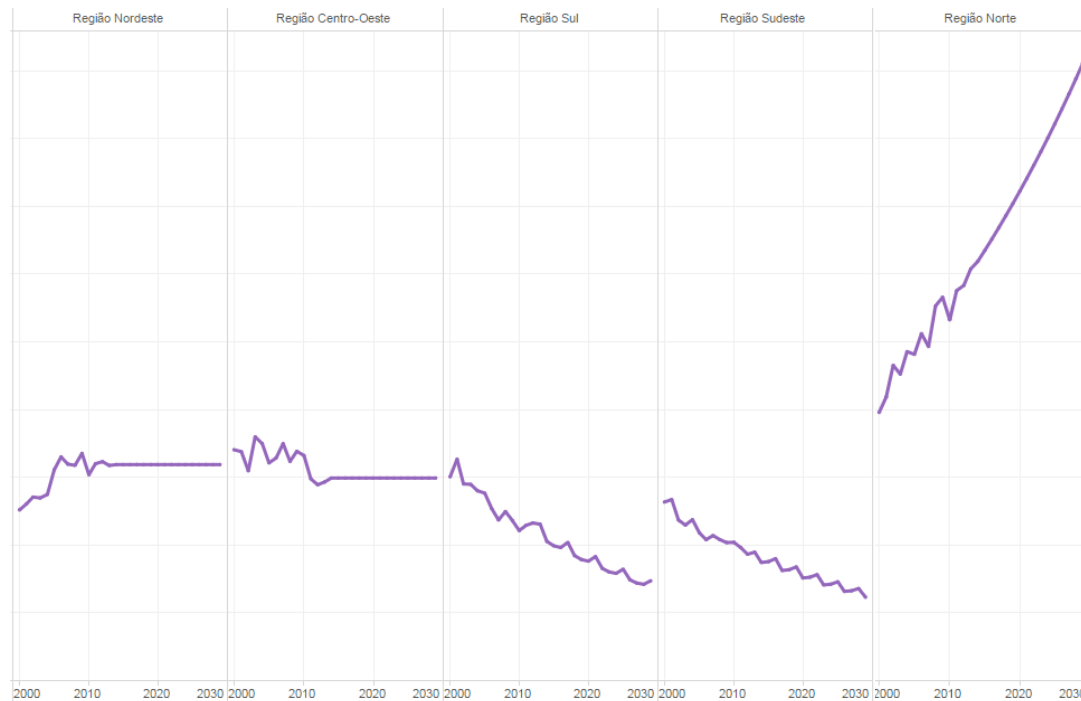


Não foi possível calcular as rotas de "Manaus, AM, Brasil" até "Amazonas, Brasil"

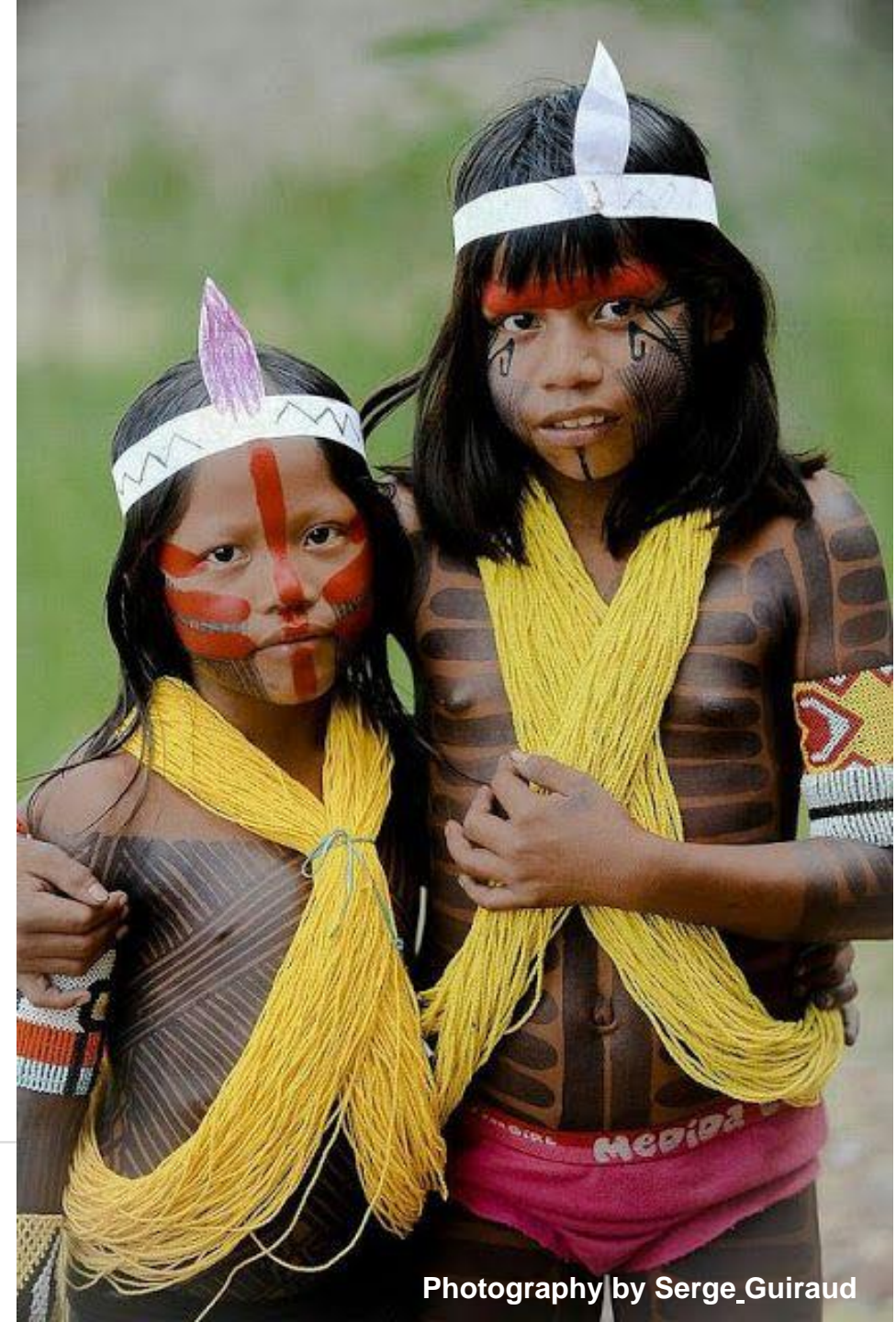


Cervical Cancer in Amazonas

Incidence rate of **47,28 / 100.000** women
compared to **15,43 / 100.000** national incidence *



*National Institute of Cancer - <http://www.inca.gov.br/estimativa/2018/sintese-de-resultados-comentarios.asp>
<http://observatoriodeoncologia.com.br/dos-dados-de-hoje-as-mortes-por-cancer-em-2029/>



Regional challenges

- Variety of initiatives
- Uncoordinated efforts
- Variability of knowledge and practice among professionals
- Healthcare system rupture



The approach

- Prevention
- Early Detection
- Timely Correct Treatment

Information



Prevention

- Information to engage patients in Prevention
- The science behind the vaccine and implementation success
- Educating future healthcare professionals

HPV (Human Papillomavirus) Vaccine: What You Need to Know

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1. Why get vaccinated?

HPV vaccine prevents infection with human papillomavirus, which is associated with many cancers, including:

- **cervical cancer** in females,
- **vaginal and vulvar cancers** in females,
- **anal cancer** in females and males,
- **throat cancer** in females and males, and
- **penile cancer** in males.

In addition, HPV vaccine prevents infection with genital warts in both females and males.

In the U.S., about 12,000 women get cervical cancer each year from it. HPV vaccine can prevent most of these cancers.

FULL TEXT ARTICLE

Cost-effectiveness analysis of cervical cancer vaccination in five Latin American countries

Lisandro Colantonio, Jorge A. Gómez, Nadia Demarteau, Beata Augustovski

Vaccine, 2009-09-04, Volume 27, Issue 40, Pages 5519-5529, Copyright © 2009 Elsevier B.V.

Abstract

Implementation of cervical cancer (CC) vaccination in Latin America is expected to reduce the high CC burden in those countries. But the efficiency of such vaccination programs in the region still remains unknown. This study assesses the cost-effectiveness and cost-utility of introducing vaccination into the current CC disease management of five Latin American countries (Argentina, Brazil, Chile, Mexico, and Peru). The modelling results indicate that universal mass vaccination is cost-effective in the current health care setting of each country (<3× gross domestic product per capita, per country) with a substantial number of CC cases and deaths avoided in addition to an increase of quality-adjusted life years. This study will help guide the design of future clinical programmes and health-related policies. It will assist early and effective decision-making processes related to vaccine implementation in Latin America.

[+] Avaliar Resultados

MONOGRAFIA SOBRE DROGAS

Human Papillomavirus Quadrivalent Vaccine

Gold Standard. Publicado September 13, 2016.

MONOGRAFIA SOBRE DROGAS

Human Papillomavirus Bivalent Vaccine

Gold Standard. Publicado September 13, 2016.

MONOGRAFIA SOBRE DROGAS

Human Papillomavirus 9-Valent Vaccine

Gold Standard. Publicado September 13, 2016.

Searches related to hpv

Human Papillomavirus Typing

human papilloma virus infection

human papillomavirus vaccine

human papillomavirus DNA detection

human Papillomavirus 9-valent vaccine

HPV - Human papillomavirus test

negative

MONOGRAFIA SOBRE DROGAS

Podofilox

Gold Standard. Publicado September 13, 2016.



ELSEVIER

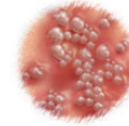
Early detection

- Empowering professionals to detect HPV infections
- Empowering professionals to diagnose pre-cancerous lesions and cancerous lesions with standardized protocols
- Educating patients on HPV, Genital Warts and other related conditions

Papilomavírus humano (Human Papillomavirus)

O papilomavírus humano (HPV) é a doença sexualmente transmissível (DST) mais comum. A transmissão dele de pessoa para pessoa (*contágio*) é fácil. O HPV pode causar câncer do colo do útero, câncer do ânus e verrugas genitais. As verrugas genitais podem ser vistas e sentidas. Também pode haver áreas semelhantes a verrugas na garganta. O HPV pode não apresentar nenhum sintoma. É possível ser portador de HPV por um longo tempo sem saber disso. Você pode transmitir o HPV para outras pessoas sem saber.

Verrugas do HPV



TRATAMENTO DOMICILIAR

- Tome medicamentos conforme orientado
- Use cremes para coceira vendidos sem receita
- Compareça a todas as consultas de acompanhamento. O Papanicolau conforme as orientações de seu médico
- **Não** toque nem coce as verrugas.
- **Não** trate verrugas genitais com medicamentos
- **Não** tenha relações sexuais enquanto estiver sendo tratado
- **Não** faça ducha vaginal nem use absorventes
- Informe seu parceiro sexual sobre a doença e o tratamento.
- Em caso de gravidez, informe seu médico imediatamente. Isso é importante para o cuidado da gravidez.
- Após o tratamento, use preservativos durante as relações sexuais.
- Tenha relações somente com um parceiro sexual.
- **Tenha um parceiro ou parceira que não tenha**

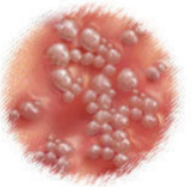
Verrugas genitais (Genital Warts)

Verrugas genitais são uma infecção transmitida sexualmente. Elas podem aparecer como pequenas bolhas nos tecidos da área genital.

CAUSAS

As verrugas genitais são causadas por um vírus chamado Human Papilloma Virus (HPV). O HPV é a doença sexualmente transmissível (DST) e infecção dos órgãos sexuais mais comum. Essa infecção pode ser disseminada por sexo sem proteção com uma pessoa infectada. Pode ser disseminada por sexo vaginal, anal e oral. Muitas pessoas não sabem que estão infectadas. Elas podem estar infectadas por anos apresentando pouco ou nenhum problema (*sintomas*). Eles ainda podem passar a infecção a seus parceiros sexuais sem saber.

Verrugas do HPV



SINTOMAS

- Coceira e irritação na área genital.
- Verrugas que sangram.
- Relação sexual dolorida devido a verrugas.

DIAGNÓSTICO

As verrugas geralmente podem ser vistas a olho nu na vagina, vulva, perineo, ânus e no reto. Certos exames podem também diagnosticar verrugas genitais, tais como:

ClinicalKey® Todos ▾ Pesquisa

Skin Lesion

Multiple warts are colored papules.



Figure 266-1

Common warts of the left hand and the chest wall.

(From Meneghini CL, Bonifaz E: *An atlas of pediatric dermatology*, Chicago, 1986, Year Book Medical Publishers, p. 45.)

Genital Warts

Genital warts may be found throughout the perineum around the anus, vagina, and urethra, as well as in the cervical, intravaginal, and intraanal areas (Fig. 266-2). Intraanal warts occur predominantly in patients who have had receptive anal intercourse.

Treatment

- Empowering professionals to provide right treatment on a timely manner
- Standardize the protocols for high quality oncological treatment for all women
- Educating patients on cervical cancer treatment

Cancer of the Uterine Cervix Top of Book Chapter

Treatment

Treatment

Multiple factors including tumor stage, size, histologic features (lymphovascular space invasion [LVSI], nonsquamous components, and depth of cervical stromal invasion), and evidence of lymph node metastasis influence the choice of treatment for cervical cancer. Patients with stage IA1 cervical cancer have undergone a cone biopsy and pathology demonstrates 3 mm of invasion or less, less than 7 mm width, no LVSI, and negative margins. Patients with this extent of disease can safely be treated with a less-radical hysterectomy, an extrafascial hysterectomy. Pelvic lymphadenectomy is not recommended owing to the low risk of pelvic node metastasis (<1%). In patients who desire to retain fertility, a cone biopsy may be considered. Wright and colleagues reported on 1409 women from the SEER database who were younger than 40 years and had stage IA1 cancer. The 5-year survival was 98% among 568 who underwent cone biopsy alone versus 99% among 841 who underwent hysterectomy.

Patients with stage IA2 to IB1 are generally treated with hysterectomy and pelvic lymphadenectomy. Patients with stage IB2 to IVA are generally treated with radiation therapy or surgery owing to comorbidities, radiation therapy contraindications, or a positive surgical margin, parametrial involvement, and lymph node metastasis.

¹ Not FDA approved for this indication.

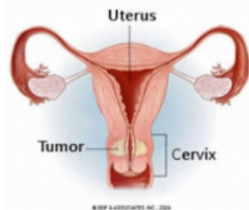
chemoradiation, based on a positive randomized trial including tumor size, cervical stromal invasion, and lymph node metastasis. Survival with adjuvant radiation.



PATIENT EDUCATION

Cervical Cancer

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Uterus
Tumor
Cervix

The cervix is the opening and bottom part of the uterus between the vagina and the uterus. Cervical cancer is a fairly common cancer. It occurs most often in women between the ages of 40 years and 55 years. Cells of the cervix act very much like skin cells. These cells are exposed to toxins, viruses, and bacteria that may cause abnormal changes.

There are two kinds of cancers of the cervix:

The approach

- Prevention
- Early Detection
- Timely Correct Treatment

**Empowering people
with information**



Partnership to support more women

Elsevier is proud to be a content provider for the Latin America Initiative to Eradicate Cervical Cancer.



Together we can change the future

