

Cervical Cancer Kills Four J'can Women Weekly

The medical data is stunning. Every week an estimated four women in Jamaica die from cervical cancer at a rate of approximately 15 out of every thousand of the population.

But even with this frightening death rate, there is an extraordinarily high opposition to vaccination for cervical cancer in the island, according to local gynaecologist Dr Sharmaine Mitchell. She said disbelief and ignorance, as well as financial constraints, are seriously curtailing the treatment and control of the deadly disease, which is sexually transmitted.

"Ignorance occurs even at the tertiary level where a lot of women refuse to believe that cervical cancer is a sexually transmitted disease," Dr Mitchell declared at the launch of a new vaccine against cervical cancer held Tuesday at the Hilton hotel. "Once you have sex, you have been exposed to the virus that causes cervical cancer," she emphasised, adding that girls should ideally be protected before reaching a sexually active age. "We need to educate people," she urged fellow doctors at the launch hosted by GlaxoSmithKline (GSK), local distributors of the vaccine named Cervarix.

Vaccination as a preventive measure against cervical cancer was identified in the early 1990s after the landmark finding that the human papilloma virus (HPV) was responsible for the disease. Clinical tests revealed that the HPV is transmitted between partners during intercourse but could be stopped by a prophylactic vaccine that produced antibodies against the virus. The first vaccine, called Gardasil, was introduced some years ago. At the Cervarix launch this week, Dr Felipe Lorenzato, manager, GSK Medical Affairs Latin America and the Caribbean, explained that the specific strains of HPV responsible for cervical cancer deaths were isolated. Lorenzato, who gave the main presentation, said that studies showed that infection with HPV16, 18 and 45 strains resulted in 93 per cent of the deaths from cervical cancer.

Vaccination, the Brazilian doctor argued, offered 100 per cent protection to women who were not sexually active and was best administered to girls between the ages of 10 and 14, before the onset of sexual activity. However, recommendations that girls, starting at 10 years old, be vaccinated against the disease are being met with strong social resistance locally, Dr Mitchell said. "There is a feeling that if you vaccinate girls against a sexually transmitted disease it makes them promiscuous," she said. "There is that feeling in the churches." Dr Mitchell added that rumours, such as one that the vaccination was designed to make women sterile, among other misconceptions, were rampant. "We need to get the facts out there. These rumours have damaged the vaccination programmes in many countries," she said. "We need to overcome the barriers to vaccination." There was also the problem of cost, Dr Mitchell said, with Cervarix - administered in three doses - at \$7,500 per dose and Gardasil, which is also a three-dose treatment, costing approximately \$13,500 per dose. She contended, however, that while the costs for vaccination were high, they paled in comparison to the cost for treatment of cervical cancer.