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# HPV and Cervical Cancer in the World
# 2007 Report

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X. Castellsagué, S. de Sanjosé, T. Aguado, K.S. Louie, L. Bruni, J. Muñoz, M. Diaz, K. Irwin, M. Gacic, O. Beauvais, G. Albero, E. Ferrer, S. Byrne, F.X. Bosch

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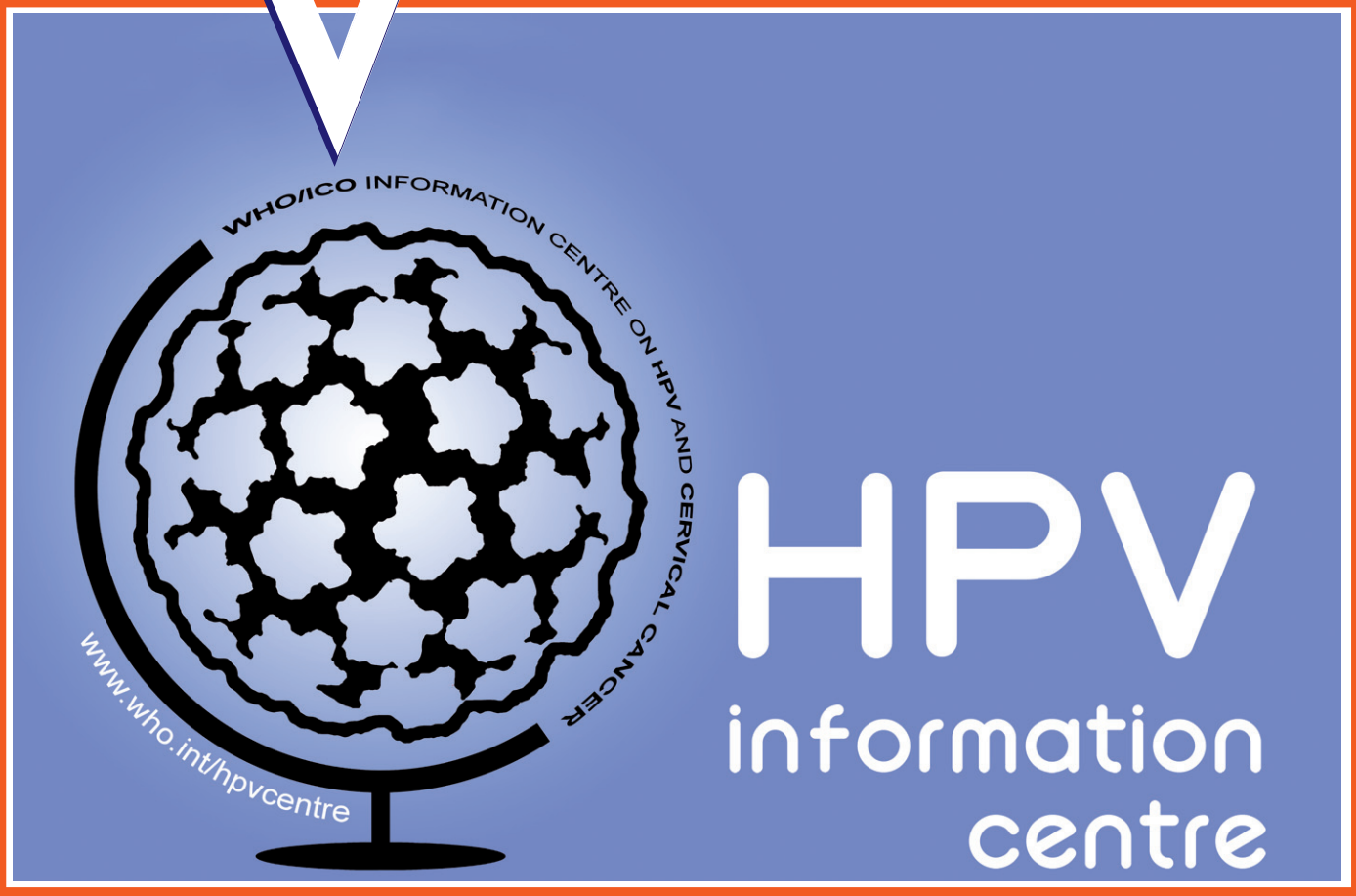


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## Aims and Scope

**VACCINE** is the pre-eminent journal for those interested in vaccines and vaccination. It serves as an interface between academics, those in research and development, and workers in the field. Relevant topics range from basic research through to applications, safety and legislation.

**Key aspects** include

- human
- veterinary
- disease prevention
- physiological manipulation
- molecular biology
- synthetic peptides
- recombinant antigens
- vectors
- new immunogens
- adjuvants
- animals models
- immunity
- immunology of protection
- fertility
- academic research
- developmental applications
- field trials
- clinical trials
- laboratory production
- industrial production
- social implications
- epidemiology
- efficacy
- safety
- legislation
- regulation
- cost/benefit

**These aspects may be applied to diseases caused by:**

- viruses
- bacteria
- mycoplasma
- protozoa
- fungi
- helminths
- arthropods
- prions

**HPV and Cervical Cancer in the World. 2007 Report.**

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# Preface

The main aim of this report is to summarize the key information available on human papillomavirus (HPV), cervical cancer and other related indicators at the country-specific level.

The Immunization, Vaccines and Biologicals department of the World Health Organization and the Cancer Epidemiology and Registration Unit of the Institut Català d'Oncologia have developed the *WHO/ICO Information Centre on HPV and Cervical Cancer (HPV Information Centre)* to evaluate the burden of disease and to help facilitate stakeholders and relevant bodies of decision makers to formulate recommendations on cervical cancer prevention, including the implementation of the newly developed HPV vaccines.

Indicators aggregated by the *HPV Information Centre* are derived from data and official reports produced by the World Health Organization (WHO), the International Agency for Research on Cancer (IARC), the United Nations, The World Bank, and published literature. Indicators include relevant statistics on cervical cancer, epidemiological determinants of cervical cancer such as demographics, socioeconomic factors and other risk factors, estimates on the burden of HPV infection, and data on immunization and cervical cancer screening. The full data on these indicators can be found in a user-friendly interface at the *HPV Information Centre* website (www.who.int/hpvcentre). This report is an extract of the data included in the website and it will be updated regularly.

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# Presentation of Data

The following data are presented in this book.

**Burden of cervical cancer** is described in the country with estimates of prevalence, incidence and mortality rates. Ranking of cervical cancer in comparison to other cancers in women in each country is described according to highest incidence and mortality (ie. 1st ranking the highest).

**HPV burden in women with and without cervical disease** reports the HPV prevalence and HPV type-specific distribution in women with normal cytology, women with cervical neoplasia and women with invasive cervical cancer. The prevalence of HPV 16/18 in cervical cancer cases describe the proportion of cases that could potentially be prevented by current HPV vaccines.

HPV prevalence in women with cervical cancer should be interpreted with caution. It is now established that HPV is the cause of virtually 100% of cases of cervical cancer. Therefore, HPV prevalence in cervical cancer should be approximately 100%. Countries or regions with lower estimates are due to limitations in study methodologies such as sample quality, inhibitors for HPV DNA detection and the accuracy and performance of the HPV DNA assays used.

For countries with no data available, regional estimates are presented. Estimates were calculated from published literature.

**Cervical screening coverage** describes the coverage achieved in the country.

**Factors contributing to cervical cancer** describe factors that can modify the natural history of HPV and cervical carcinogenesis. HPV is a necessary cause of cervical cancer, but it is not a sufficient cause. Other cofactors are necessary for progression from cervical HPV infection to cancer. Long-term use of hormonal contraceptives, high parity, tobacco smoking, and co-infection with HIV have been identified as established cofactors; co-infection with Chlamydia trachomatis and herpes simplex virus type-2, immunosuppression, and certain dietary deficiencies are other probable cofactors. Genetic and immunological host factors and viral factors other than type, such as variants of type, viral load and viral integration, are likely to be important but have not been clearly identified (Muñoz N, Vaccine 2006; 24S3: S3-1).

**Relevant factors for HPV vaccine introduction** present data on vaccination coverage for third dose of diphtheria-tetanus-pertussis (DTP3) at the country-level and at the local-level. This information will be relevant for assessing the country's capacity to introduce and implement the new HPV vaccines.

# SECTION I. CONTINENTS and REGIONS

# WORLD

The World has a population of 2329.08 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 493,243 women are diagnosed with cervical cancer and 273,505 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in the World, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.1% of invasive cervical cancers in the World are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 16.2 | 8.9 |
| Age-standardized rate | 16.2 | 8.9 |
| Cumulative risk (%). Age period 0-64 years | 1.3 | 0.7 |
| SIR/SMR | 100 | 100 |
| Annual number of new cases/deaths | 493243 | 273505 |
| Ranking of cervical cancer (all ages)† | 2nd | 3rd |
| Ranking of cervical cancer (15-44 years)† | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

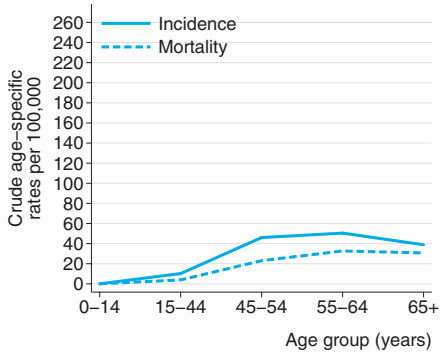



**Table 2. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 157879 | 10.0 (9.8-10.1) |
| Low-grade lesions | 8640 | 71.6 (70.6-72.5) |
| High-grade lesions | 7094 | 84.9 (84.1-85.7) |
| Cervical Cancer: any type | 14595 | 87.2* (86.7-87.8) |
| Cervical Cancer: HPV 16/18 | 14595 | 70.1 (69.3-70.8) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 3. Ten most frequent HPV types in women with and without cervical disease**

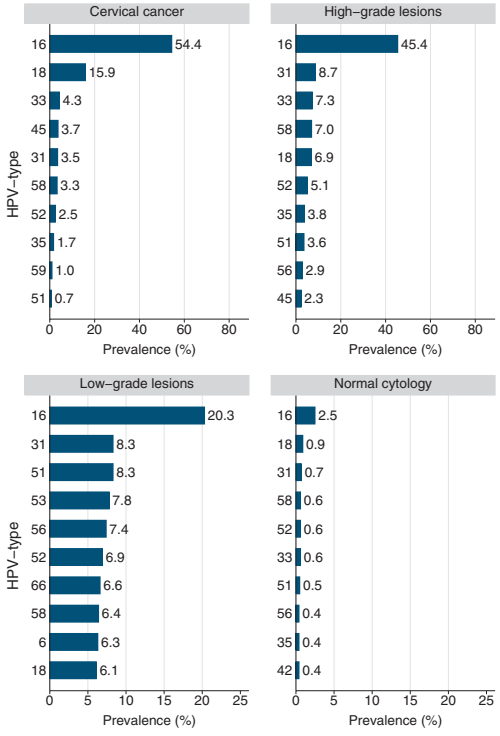
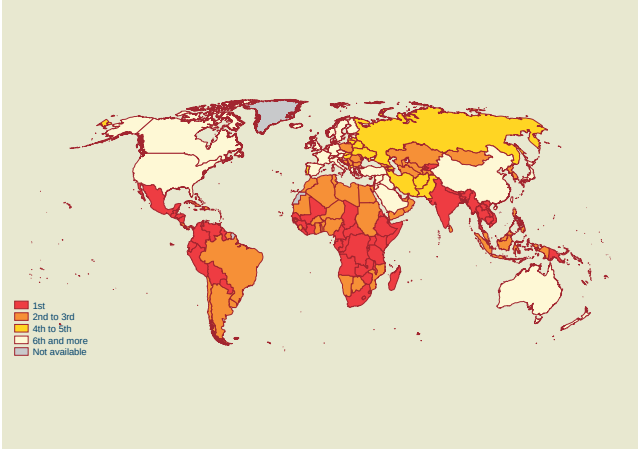
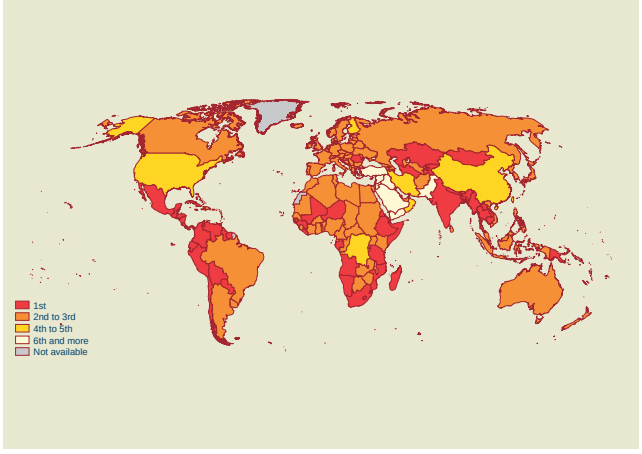



**Fig. 2. Ranking of incidence of cervical cancer in comparison to other cancers in women by country**

**WOMEN ALL AGES**




**WOMEN 15-44 YEARS**



# AFRICA

Africa has a population of 267.9 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 78,897 women are diagnosed with cervical cancer and 61,671 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Africa, and the 1st most frequent among women between 15 and 44 years of age.

In Africa, about 24.9% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.1% of invasive cervical cancers in Africa are attributed to HPVs 16 or 18.

**Fig. 1. Age-standardized (World) incidence rates of cervical cancer per 100,000 women in Africa**

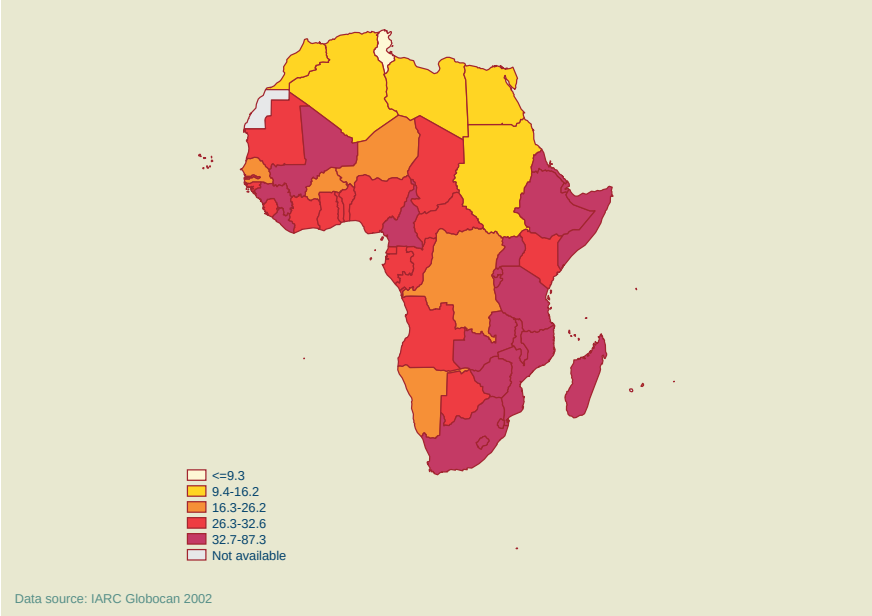



**Fig. 2. Age-specific incidence rates of cervical cancer in Africa and the World**

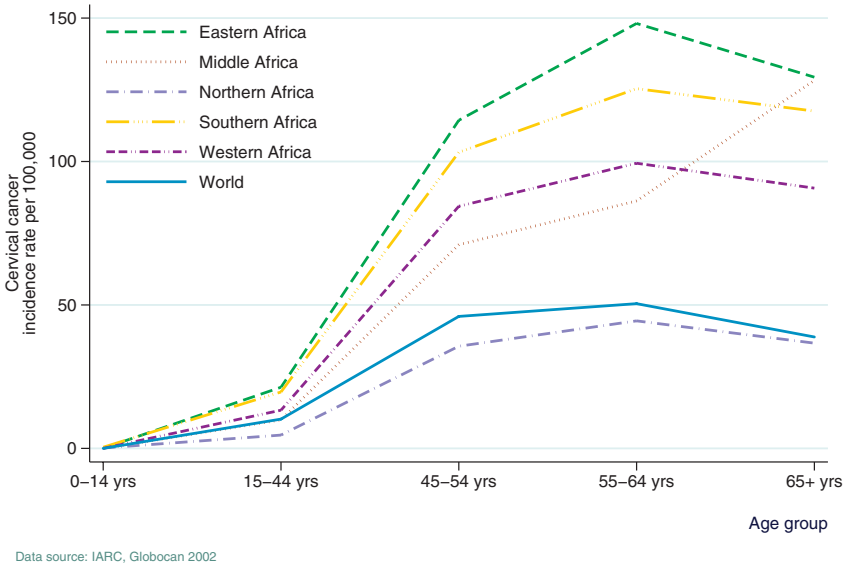


**Table 1. Female population and estimates of incidence and mortality for cervical cancer**

| Region / Country | Female population† | | Incidence | | Ranking | | Mortality | |
|---|---|---|---|---|---|---|---|---|
| | 10-14 years | 15+ years | Cases | ASR‡ | All women | 15-44 years | Deaths | ASR‡ |
| **Africa Continent** | 54.96 | 267.86 | 78897 | 29.3 | 1st | 1st | 61671 | 23.1 |
| **Eastern Africa** | 18.45 | 81.36 | 33903 | 42.7 | 1st | 1st | 27147 | 34.6 |
| Burundi | 0.50 | 2.17 | 899 | 42.7 | 1st | 2nd | 722 | 34.6 |
| Comoros | 0.05 | 0.23 | 97 | 42.7 | 1st | 1st | 79 | 34.6 |
| Djibouti | 0.05 | 0.23 | 113 | 42.7 | 1st | 1st | 90 | 34.6 |
| Eritrea | 0.28 | 1.26 | 548 | 42.7 | 1st | 1st | 438 | 34.6 |
| Ethiopia | 5.03 | 21.76 | 7619 | 35.9 | 1st | 1st | 6081 | 29 |
| Kenya | 2.10 | 9.82 | 2635 | 28.7 | 1st | 2nd | 2111 | 23.4 |
| Madagascar | 1.16 | 5.27 | 2238 | 42.7 | 1st | 1st | 1795 | 34.6 |
| Malawi | 0.85 | 3.46 | 1766 | 46.6 | 1st | 2nd | 1405 | 37.4 |
| Mauritius | 0.05 | 0.48 | 111 | 18.2 | 2nd | 2nd | 61 | 10.2 |
| Mozambique | 1.27 | 5.88 | 2058 | 33.6 | 2nd | 1st | 1654 | 27.2 |
| Rwanda | 0.59 | 2.68 | 1087 | 49.4 | 1st | 2nd | 878 | 40.4 |
| Seychelles | - | - | - | - | - | - | - | - |
| Somalia | 0.47 | 2.34 | 1134 | 42.7 | 1st | 1st | 906 | 34.6 |
| Uganda | 1.92 | 7.19 | 2429 | 36.3 | 1st | 2nd | 1932 | 29.2 |
| Tanzania | 2.44 | 11.14 | 7515 | 68.6 | 1st | 1st | 6009 | 55.6 |
| Zambia | 0.79 | 3.17 | 1650 | 53.7 | 1st | 2nd | 1340 | 44 |
| Zimbabwe | 0.87 | 3.96 | 1817 | 52.1 | 1st | 2nd | 1492 | 43.1 |
| **Middle Africa** | 7.01 | 30.16 | 8201 | 28 | 1st | 3rd | 6687 | 23 |
| Angola | 1.05 | 4.37 | 1158 | 28.6 | 1st | 1st | 926 | 23.2 |
| Cameroon | 1.03 | 4.86 | 1759 | 35.7 | 1st | 2nd | 1419 | 28.9 |
| Central African Rep. | 0.26 | 1.20 | 374 | 28 | 1st | 3rd | 306 | 23 |
| Chad | 0.63 | 2.62 | 681 | 28 | 1st | 2nd | 555 | 23 |
| Congo | 0.26 | 1.08 | 303 | 30.5 | 1st | 2nd | 242 | 24.6 |
| DR Congo | 3.65 | 15.43 | 3709 | 25.1 | 1st | 4th | 3058 | 20.9 |
| Equatorial Guinea | 0.03 | 0.14 | 45 | 28 | 1st | 2nd | 37 | 23 |
| Gabon | 0.09 | 0.42 | 164 | 30.6 | 1st | 1st | 135 | 24.9 |
| Sao Tome & Principe | 0.01 | 0.05 | - | - | - | - | - | - |
| **Northern Africa** | 10.00 | 64.13 | 8175 | 12.1 | 2nd | 2nd | 6588 | 9.8 |
| Algeria | 1.76 | 11.51 | 1726 | 15.6 | 2nd | 2nd | 1391 | 12.7 |
| Egypt | 3.80 | 24.75 | 2713 | 9.7 | 2nd | 2nd | 2178 | 7.9 |
| Libya | 0.27 | 1.97 | 218 | 11.9 | 2nd | 2nd | 175 | 9.6 |
| Morocco | 1.59 | 11.02 | 1550 | 13.2 | 2nd | 2nd | 1247 | 10.7 |
| Sudan | 2.09 | 11.02 | 1664 | 15.4 | 2nd | 2nd | 1354 | 12.7 |
| Tunisia | 0.48 | 3.74 | 284 | 6.8 | 2nd | 2nd | 229 | 5.5 |
| **Southern Africa** | 2.98 | 18.59 | 7698 | 38.2 | 1st | 1st | 4455 | 22.6 |
| Botswana | 0.11 | 0.57 | 156 | 30.4 | 2nd | 3rd | 126 | 24.7 |
| Lesotho | 0.12 | 0.61 | 479 | 61.6 | 1st | 1st | 391 | 50.3 |
| Namibia | 0.14 | 0.61 | 133 | 22.2 | 2nd | 2nd | 109 | 18.1 |
| South Africa | 2.53 | 16.48 | 6742 | 37.5 | 1st | 1st | 3681 | 21 |
| Swaziland | 0.07 | 0.32 | 186 | 58.9 | 1st | 1st | 150 | 47.6 |
| **Western Africa** | 16.53 | 73.62 | 20919 | 29.3 | 2nd | 2nd | 16793 | 23.8 |
| Benin | 0.52 | 2.35 | 561 | 29.3 | 2nd | 2nd | 448 | 23.8 |
| Burkina Faso | 0.87 | 3.51 | 921 | 23.4 | 2nd | 2nd | 724 | 18.5 |
| Cape Verde | 0.03 | 0.16 | 47 | 29.3 | 2nd | 2nd | 38 | 23.8 |
| Côte d'Ivoire | 1.17 | 5.13 | 1497 | 30.1 | 1st | 2nd | 1192 | 24.3 |
| Gambia | 0.09 | 0.46 | 157 | 28.8 | 1st | 1st | 124 | 23 |
| Ghana | 1.32 | 6.70 | 1958 | 29.3 | 2nd | 2nd | 1572 | 23.8 |
| Guinea | 0.57 | 2.59 | 1444 | 50.9 | 1st | 1st | 1138 | 40.5 |
| Guinea-Bissau | 0.10 | 0.43 | 124 | 29.3 | 2nd | 2nd | 99 | 23.8 |
| Liberia | 0.21 | 0.88 | 320 | 35 | 1st | 1st | 256 | 28.1 |
| Mali | 0.88 | 3.58 | 1336 | 35.2 | 1st | 1st | 1076 | 28.4 |
| Mauritania | 0.18 | 0.89 | 259 | 29.3 | 2nd | 2nd | 209 | 23.8 |
| Niger | 0.86 | 3.49 | 679 | 19.9 | 2nd | 1st | 532 | 15.7 |
| Nigeria | 8.28 | 36.59 | 9922 | 28.5 | 2nd | 2nd | 8030 | 23.3 |
| Senegal | 0.74 | 3.47 | 804 | 26.2 | 1st | 2nd | 640 | 21.1 |
| Sierra Leone | 0.33 | 1.62 | 452 | 29.3 | 2nd | 2nd | 362 | 23.8 |
| Togo | 0.39 | 1.77 | 435 | 29.3 | 2nd | 2nd | 349 | 23.8 |

†Population in millions.
‡ASR: age-standardized rate per 100,000 women.
Estimates were calculated using the direct method and the World population as the reference.

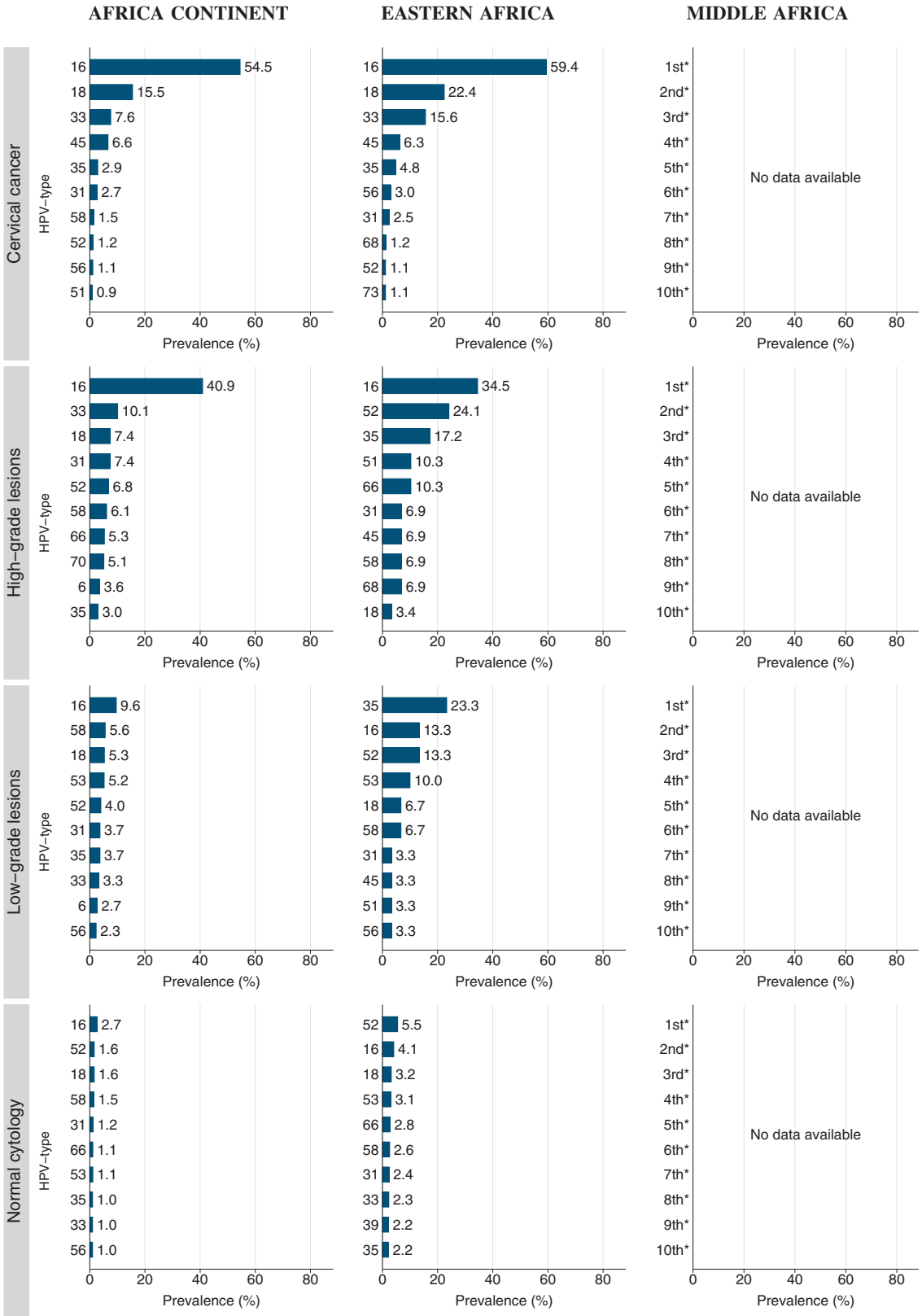
**Table 2. Prevalence of HPV in women with normal cytology, precancerous cervical lesions and invasive cervical cancer**

| Country /Region | Normal cytology | | Low-grade lesions† | | High-grade lesions‡ | | Cervical cancer | |
|---|---|---|---|---|---|---|---|---|
| | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) |
| **Africa Continent** | 6226 | 23.0 (21.9-24.0) | 301 | 59.1 (53.3-64.7) | 296 | 85.1 (80.6-89.0) | 1339 | 93.9 (92.5-95.1) |
| **Eastern Africa** | 2144 | 35.4 (33.4-37.5) | 30 | 60 (40.6-77.3) | 29 | 96.6 (82.2-99.9) | 478 | 96.4 (94.4-97.9) |
| Burundi | - | - - | - | - - | - | - - | - | - - |
| Comoros | - | - - | - | - - | - | - - | - | - - |
| Djibouti | - | - - | - | - - | - | - - | - | - - |
| Eritrea | - | - - | - | - - | - | - - | - | - - |
| Ethiopia | - | - - | - | - - | - | - - | 163 | 96.9 (93.0-99.0) |
| Kenya | 369 | 38.8 (33.8-43.9) | 30 | 60 (40.6-77.3) | 29 | 96.6 (82.2-99.9) | - | - - |
| Madagascar | - | - - | - | - - | - | - - | - | - - |
| Malawi | - | - - | - | - - | - | - - | - | - - |
| Mauritius | - | - - | - | - - | - | - - | - | - - |
| Mozambique | 196 | 32.1 (25.7-39.2) | - | - - | - | - - | 72 | 97.2 (90.3-99.7) |
| Rwanda | - | - - | - | - - | - | - - | - | - - |
| Seychelles | - | - - | - | - - | - | - - | - | - - |
| Somalia | - | - - | - | - - | - | - - | - | - - |
| Uganda | - | - - | - | - - | - | - - | 43 | 97.7 (87.7-99.9) |
| Tanzania | - | - - | - | - - | - | - - | 102 | 94.1 (87.6-97.8) |
| Zambia | - | - - | - | - - | - | - - | - | - - |
| Zimbabwe | 1579 | 35.0 (32.7-37.4) | - | - - | - | - - | 98 | 96.9 (91.3-99.4) |
| **Middle Africa** | - | - - | - | - - | - | - - | - | - - |
| Angola | - | - - | - | - - | - | - - | - | - - |
| Cameroon | - | - - | - | - - | - | - - | - | - - |
| Central African Rep. | - | - - | - | - - | - | - - | - | - - |
| Chad | - | - - | - | - - | - | - - | - | - - |
| Congo | - | - - | - | - - | - | - - | - | - - |
| DRCongo | - | - - | - | - - | - | - - | - | - - |
| Equatorial Guinea | - | - - | - | - - | - | - - | - | - - |
| Gabon | - | - - | - | - - | - | - - | - | - - |
| Sao Tome & Principe | - | - - | - | - - | - | - - | - | - - |
| **Northern Africa** | 172 | 21.5 (15.6-28.4) | - | - - | - | - - | 335 | 95.5 (92.7-97.5) |
| Algeria | - | - - | - | - - | - | - - | 183 | 96.2 (92.3-98.4) |
| Egypt | - | - - | - | - - | - | - - | - | - - |
| Libya | - | - - | - | - - | - | - - | - | - - |
| Morocco | 172 | 21.5 (15.6-28.4) | - | - - | - | - - | 152 | 94.7 (89.9-97.7) |
| Sudan | - | - - | - | - - | - | - - | - | - - |
| Tunisia | - | - - | - | - - | - | - - | - | - - |
| **Southern Africa** | 1269 | 15.5 (13.6-17.6) | - | - - | 129 | 88.4 (81.5-93.3) | 308 | 93.8 (90.5-96.2) |
| Botswana | - | - - | - | - - | - | - - | - | - - |
| Lesotho | - | - - | - | - - | - | - - | - | - - |
| Namibia | - | - - | - | - - | - | - - | - | - - |
| South Africa | 1269 | 15.5 (13.6-17.6) | - | - - | 129 | 88.4 (81.5-93.3) | 308 | 93.8 (90.5-96.2) |
| Swaziland | - | - - | - | - - | - | - - | - | - - |
| **Western Africa** | 2641 | 16.5 (15.1-18.0) | 271 | 59 (52.9-65.0) | 138 | 79.7 (72.0-86.1) | 218 | 85.8 (80.4-90.1) |
| Benin | - | - - | - | - - | - | - - | 6 | 83.3 (35.9-99.6) |
| Burkina Faso | - | - - | - | - - | - | - - | - | - - |
| Cape Verde | - | - - | - | - - | - | - - | - | - - |
| Côte d'Ivoire | - | - - | 151 | 68.2 (60.1-75.5) | 49 | 77.6 (63.4-88.2) | - | - - |
| Gambia | - | - - | - | - - | - | - - | - | - - |
| Ghana | - | - - | - | - - | - | - - | - | - - |
| Guinea | - | - - | - | - - | - | - - | 18 | 100 (81.5-100.0) |
| Guinea-Bissau | - | - - | - | - - | - | - - | - | - - |
| Liberia | - | - - | - | - - | - | - - | - | - - |
| Mali | - | - - | - | - - | - | - - | 123 | 94.3 (88.6-97.7) |
| Mauritania | - | - - | - | - - | - | - - | - | - - |
| Niger | - | - - | - | - - | - | - - | - | - - |
| Nigeria | 844 | 24.8 (21.9-27.8) | 34 | 38.2 (22.2-56.4) | - | - - | - | - - |
| Senegal | 1797 | 12.6 (11.1-14.3) | 86 | 51.2 (40.1-62.1) | 89 | 80.9 (71.2-88.5) | 71 | 67.6 (55.5-78.2) |
| Sierra Leone | - | - - | - | - - | - | - - | - | - - |
| Togo | - | - - | - | - - | - | - - | - | - - |

†Low-grade lesions: LSIL or CIN-1
‡High-grade lesions: CIN-2, CIN-3, CIS or HSIL

*Sources of data: see Section III.Methods or visit http://www.who.int/hpvcentre*

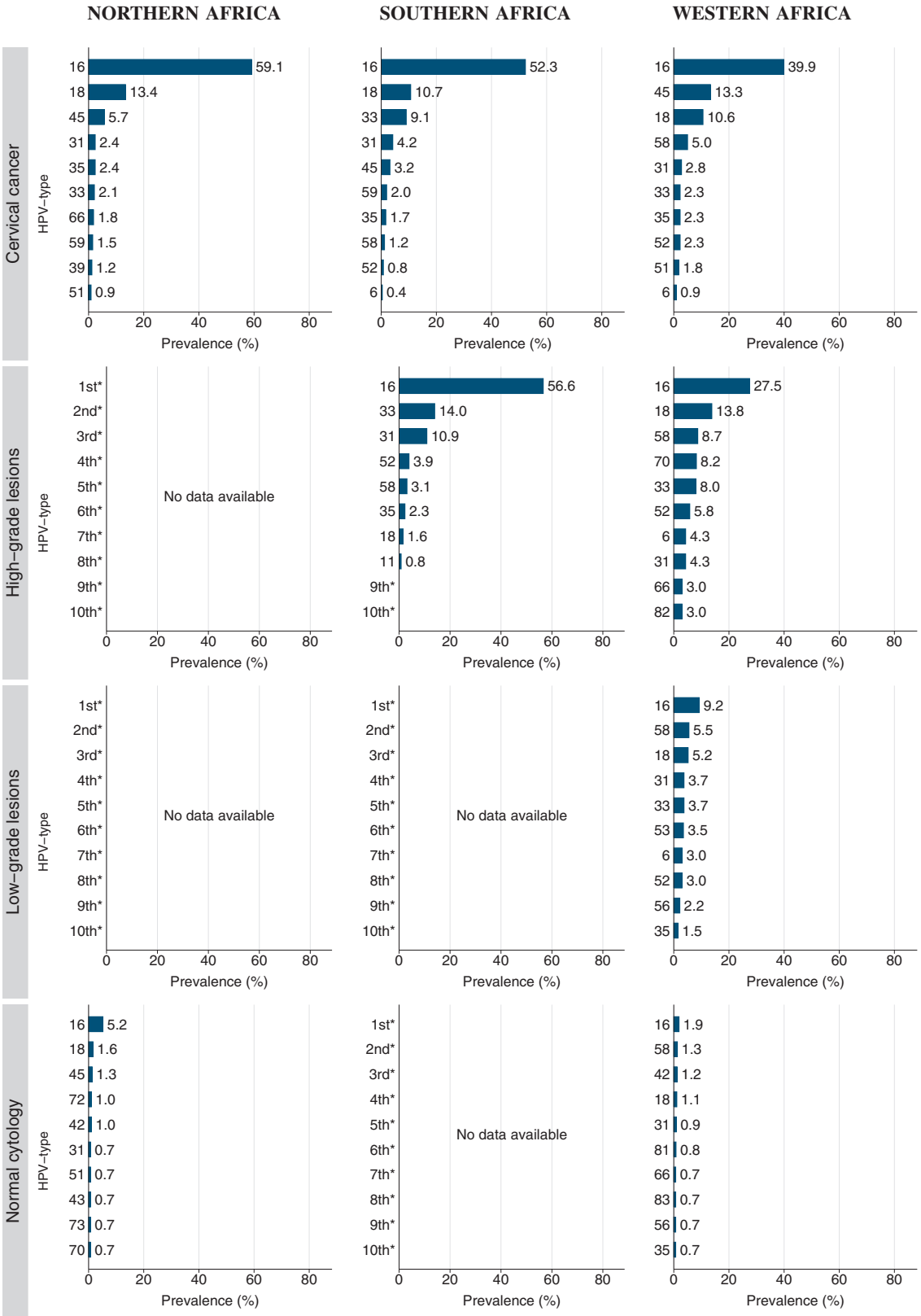
**Fig. 3. Ten most frequent HPV types in women with and without cervical disease in Africa**




*No data available. No more types than shown were tested or were positive.

*Sources of data: see Section III.Methods or visit http://www.who.int/hpvcentre*

**Fig. 3. Ten most frequent HPV types in women with and without cervical disease in Africa (continued)**




*No data available. No more types than shown were tested or were positive.

# AMERICAS

America has a population of 336.5 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 86,532 women are diagnosed with cervical cancer and 38,436 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in America, and the 2nd most frequent among women between 15 and 44 years of age.

In America, about 15.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.7% of invasive cervical cancers in America are attributed to HPVs 16 or 18.

**Fig. 1. Age-standardized (World) incidence rates of cervical cancer per 100,000 women in America**

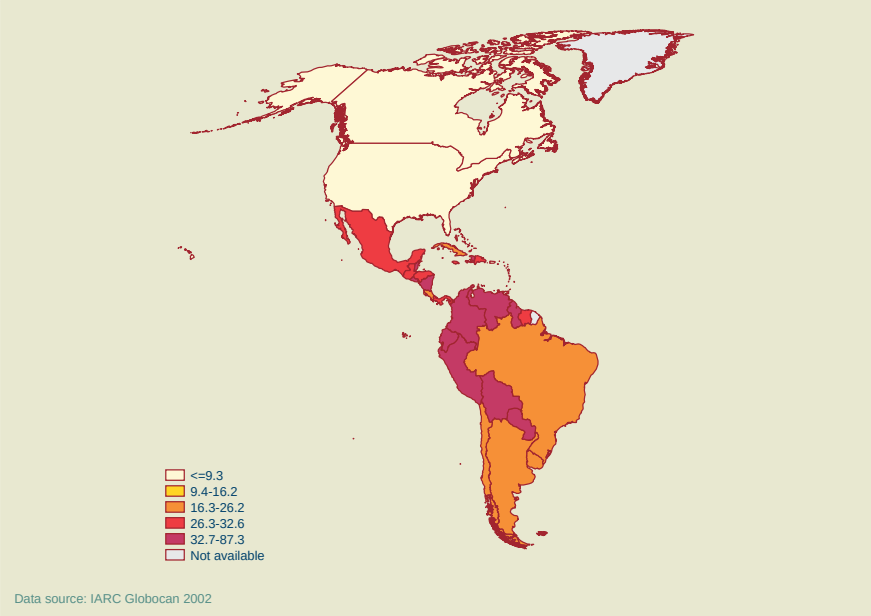



**Fig. 2. Age-specific incidence rates of cervical cancer in America and the World**

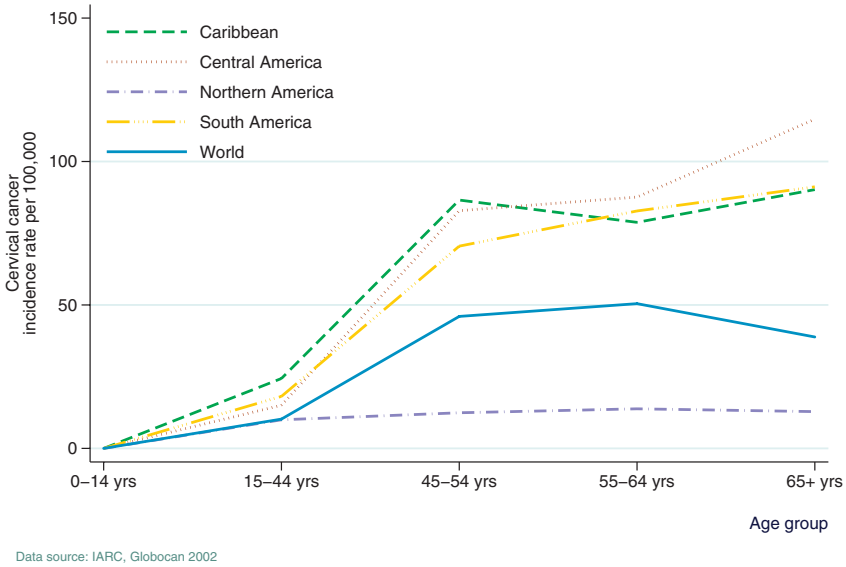


**Table 1. Female population and estimates of incidence and mortality for cervical cancer**

| Region / Country | Female population† | | Incidence | | Ranking | | Mortality | |
|---|---|---|---|---|---|---|---|---|
| | 10-14 years | 15+ years | Cases | ASR‡ | All women | 15-44 years | Deaths | ASR‡ |
| **Americas Continent** | 38.64 | 336.49 | 86532 | 18.8 | 4th | 2nd | 38436 | 8.1 |
| **Caribbean** | 1.79 | 14.39 | 6369 | 32.6 | 2nd | 1st | 3113 | 16 |
| Antigua & Barbuda | - | - | - | - | - | - | - | - |
| Bahamas | 0.02 | 0.12 | 25 | 16.7 | 2nd | 2nd | 9 | 6.2 |
| Barbados | 0.01 | 0.11 | 46 | 24.9 | 2nd | 2nd | 18 | 9.4 |
| Cuba | 0.37 | 4.58 | 1346 | 20.2 | 2nd | 1st | 567 | 8.3 |
| Dominica | - | - | - | - | - | - | - | - |
| Dominican Republic | 0.47 | 2.98 | 1032 | 30.8 | 2nd | 2nd | 562 | 17.3 |
| Grenada | - | - | - | - | - | - | - | - |
| Haiti | 0.49 | 2.75 | 2774 | 87.3 | 1st | 1st | 1484 | 48.1 |
| Jamaica | 0.14 | 0.94 | 383 | 31.2 | 2nd | 1st | 151 | 12.2 |
| Saint Kitts & Nevis | - | - | - | - | - | - | - | - |
| Saint Lucia | 0.01 | 0.06 | - | - | - | - | - | - |
| S. Vincent & The Gren. | 0.01 | 0.04 | - | - | - | - | - | - |
| Trinidad & Tobago | 0.05 | 0.52 | 186 | 27.1 | 2nd | 2nd | 73 | 10.7 |
| **Central America** | 7.89 | 51.13 | 17165 | 30.6 | 1st | 1st | 8124 | 15 |
| Belize | 0.02 | 0.08 | 40 | 52.4 | 1st | 1st | 16 | 23 |
| Costa Rica | 0.21 | 1.53 | 392 | 21.5 | 2nd | 1st | 210 | 12 |
| El Salvador | 0.37 | 2.35 | 1213 | 45.6 | 1st | 1st | 609 | 23.5 |
| Guatemala | 0.80 | 3.77 | 1153 | 30.6 | 1st | 1st | 628 | 17.2 |
| Honduras | 0.44 | 2.19 | 664 | 30.6 | 1st | 1st | 361 | 17.2 |
| Mexico | 5.57 | 38.38 | 12516 | 29.5 | 1st | 1st | 5777 | 14.1 |
| Nicaragua | 0.34 | 1.70 | 809 | 47.2 | 1st | 1st | 354 | 22.3 |
| Panama | 0.15 | 1.12 | 375 | 28.2 | 2nd | 1st | 166 | 12.9 |
| **South America** | 17.48 | 136.09 | 48328 | 28.6 | 2nd | 2nd | 21402 | 12.9 |
| Argentina | 1.71 | 14.76 | 4924 | 23.2 | 2nd | 2nd | 1679 | 7.8 |
| Bolivia | 0.54 | 2.89 | 1831 | 55 | 1st | 1st | 987 | 30.4 |
| Brazil | 8.15 | 69.05 | 19603 | 23.4 | 2nd | 2nd | 8286 | 10.2 |
| Chile | 0.73 | 6.24 | 2163 | 25.8 | 2nd | 1st | 931 | 10.9 |
| Colombia | 2.30 | 16.15 | 6815 | 36.4 | 1st | 1st | 3296 | 18.2 |
| Ecuador | 0.68 | 4.49 | 1978 | 38.7 | 1st | 1st | 1064 | 21 |
| Guyana | 0.03 | 0.28 | 160 | 47.3 | 1st | 1st | 71 | 22.2 |
| Paraguay | 0.36 | 1.92 | 1131 | 53.2 | 1st | 1st | 513 | 26.1 |
| Peru | 1.47 | 9.48 | 5400 | 48.2 | 1st | 1st | 2663 | 24.6 |
| Suriname | 0.02 | 0.16 | 51 | 27 | 2nd | 1st | 26 | 14 |
| Uruguay | 0.14 | 1.37 | 392 | 18.8 | 3rd | 2nd | 162 | 7 |
| Venezuela | 1.34 | 9.22 | 3845 | 36 | 1st | 1st | 1705 | 16.8 |
| **Northern America** | 11.49 | 134.88 | 14670 | 7.7 | 12th | 4th | 5796 | 2.3 |
| Canada | 1.04 | 13.51 | 1502 | 7.7 | 11th | 2nd | 581 | 2.5 |
| United States | 10.45 | 121.32 | 13162 | 7.7 | 13th | 4th | 5214 | 2.3 |

†Population in millions.
‡ASR: age-standardized rate per 100,000 women.
Estimates were calculated using the direct method and the World population as the reference.

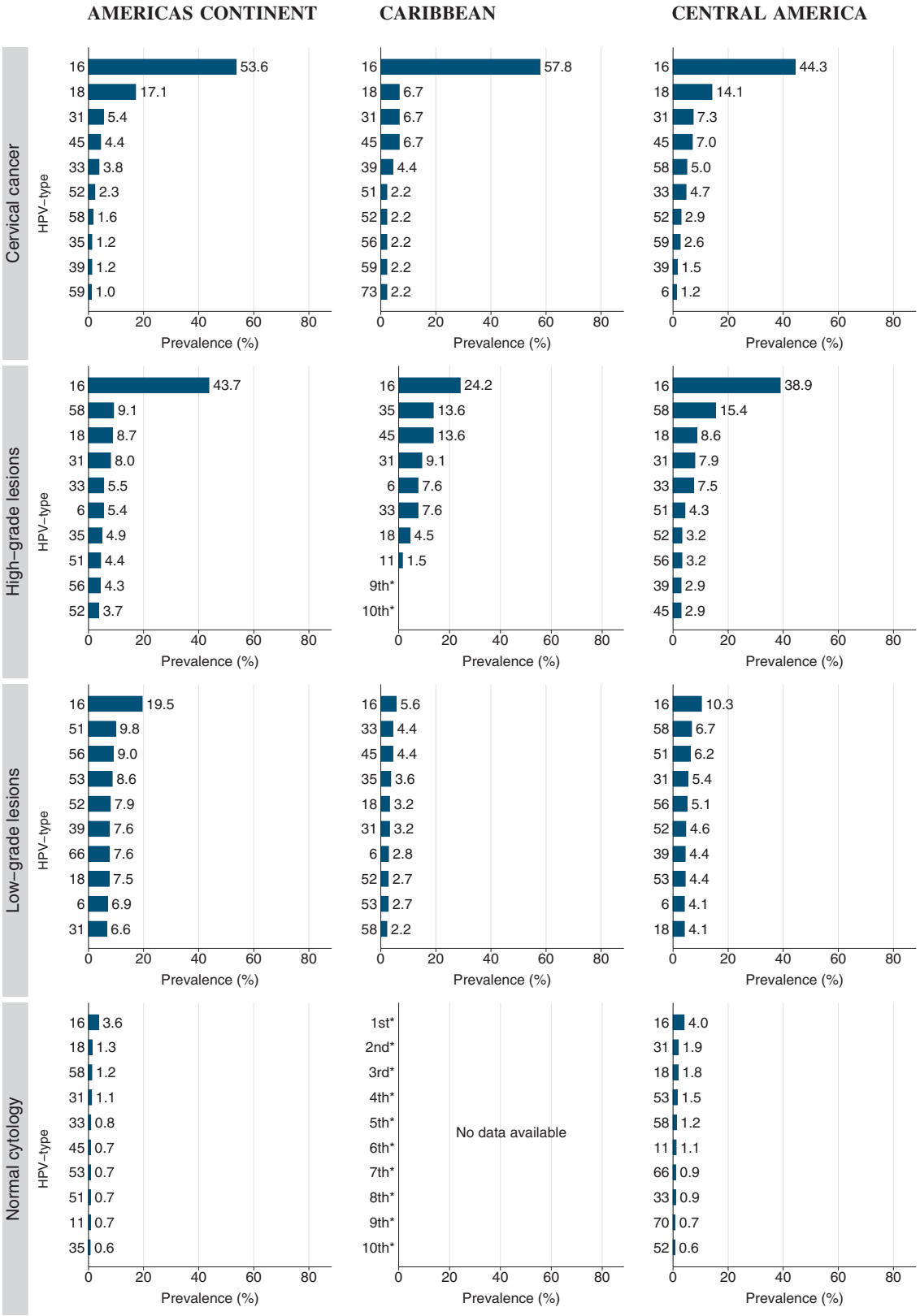
**Table 2. Prevalence of HPV in women with normal cytology, precancerous cervical lesions and invasive cervical cancer**

| Country /Region | Normal cytology | | Low-grade lesions† | | High-grade lesions‡ | | Cervical cancer | |
|---|---|---|---|---|---|---|---|---|
| | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) |
| **Americas Continent** | 40399 | 15.6 (15.2-15.9) | 3651 | 75.8 (74.4-77.2) | 1922 | 83.9 (82.1-85.5) | 2813 | 89 (87.8-90.1) |
| **Caribbean** | - | - - | 248 | 60.9 (54.5-67.0) | 66 | 80.3 (68.7-89.1) | 45 | 97.8 (88.2-99.9) |
| Antigua & Barbuda | - | - - | - | - - | - | - - | - | - - |
| Bahamas | - | - - | - | - - | - | - - | - | - - |
| Barbados | - | - - | - | - - | - | - - | - | - - |
| Cuba | - | - - | - | - - | - | - - | 45 | 97.8 (88.2-99.9) |
| Dominica | - | - - | - | - - | - | - - | - | - - |
| Dominican Republic | - | - - | - | - - | - | - - | - | - - |
| Grenada | - | - - | - | - - | - | - - | - | - - |
| Haiti | - | - - | - | - - | - | - - | - | - - |
| Jamaica | - | - - | 248 | 60.9 (54.5-67.0) | 66 | 80.3 (68.7-89.1) | - | - - |
| Saint Kitts & Nevis | - | - - | - | - - | - | - - | - | - - |
| Saint Lucia | - | - - | - | - - | - | - - | - | - - |
| S. Vincent & The Gren. | - | - - | - | - - | - | - - | - | - - |
| Trinidad & Tobago | - | - - | - | - - | - | - - | - | - - |
| **Central America** | 10232 | 20.5 (19.7-21.3) | 390 | 55.1 (50.0-60.1) | 280 | 86.8 (82.2-90.5) | 341 | 90.3 (86.7-93.2) |
| Belize | - | - - | - | - - | - | - - | - | - - |
| Costa Rica | 7459 | 22.4 (21.5-23.4) | 181 | 72.9 (65.8-79.3) | 108 | 89.8 (82.5-94.8) | 35 | 97.1 (85.1-99.9) |
| El Salvador | - | - - | - | - - | - | - - | - | - - |
| Guatemala | - | - - | - | - - | - | - - | - | - - |
| Honduras | 438 | 38.8 (34.2-43.6) | 44 | 47.7 (32.5-63.3) | 81 | 79 (68.5-87.3) | 104 | 79.8 (70.8-87.0) |
| Mexico | 2335 | 11.0 (9.7-12.3) | 165 | 37.6 (30.2-45.4) | 91 | 90.1 (82.1-95.4) | 129 | 91.5 (85.3-95.7) |
| Nicaragua | - | - - | - | - - | - | - - | - | - - |
| Panama | - | - - | - | - - | - | - - | 73 | 100 (95.1-100.0) |
| **South America** | 4354 | 14.3 (13.3-15.4) | 548 | 79 (75.4-82.4) | 487 | 80.1 (76.3-83.5) | 1041 | 91.1 (89.2-92.7) |
| Argentina | 843 | 15.4 (13.0-18.0) | 334 | 82.9 (78.5-86.8) | 207 | 94.7 (90.7-97.3) | 131 | 97.7 (93.5-99.5) |
| Bolivia | - | - - | - | - - | - | - - | 49 | 95.9 (86.0-99.5) |
| Brazil | 194 | 17.0 (12.0-23.1) | 89 | 71.9 (61.4-80.9) | 155 | 74.2 (66.6-80.9) | 347 | 86.2 (82.1-89.6) |
| Chile | 913 | 11.2 (9.2-13.4) | - | - - | - | - - | 80 | 98.8 (93.2-100.0) |
| Colombia | 2138 | 14.5 (13.0-16.0) | 70 | 55.7 (43.3-67.6) | 125 | 63.2 (54.1-71.6) | 125 | 80 (71.9-86.6) |
| Ecuador | - | - - | - | - - | - | - - | - | - - |
| Guyana | - | - - | - | - - | - | - - | - | - - |
| Paraguay | 91 | 19.8 (12.2-29.4) | 55 | 96.4 (87.5-99.6) | - | - - | 113 | 96.5 (91.2-99.0) |
| Peru | 175 | 17.7 (12.4-24.2) | - | - - | - | - - | 196 | 94.9 (90.8-97.5) |
| Suriname | - | - - | - | - - | - | - - | - | - - |
| Uruguay | - | - - | - | - - | - | - - | - | - - |
| Venezuela | - | - - | - | - - | - | - - | - | - - |
| **Northern America** | 25813 | 13.8 (13.4-14.3) | 2465 | 79.9 (78.3-81.5) | 1089 | 85 (82.8-87.1) | 1386 | 86.8 (84.9-88.5) |
| Canada | 2010 | 21.7 (19.9-23.6) | 170 | 87.6 (81.7-92.2) | 58 | 98.3 (90.8-100.0) | 172 | 83.7 (77.3-88.9) |
| United States | 23685 | 13.1 (12.6-13.5) | 2295 | 79.3 (77.6-81.0) | 1001 | 84.9 (82.5-87.1) | 1182 | 87.3 (85.3-89.2) |

†Low-grade lesions: LSIL or CIN-1
‡High-grade lesions: CIN-2, CIN-3, CIS or HSIL

*Sources of data: see Section III.Methods or visit http://www.who.int/hpvcentre*

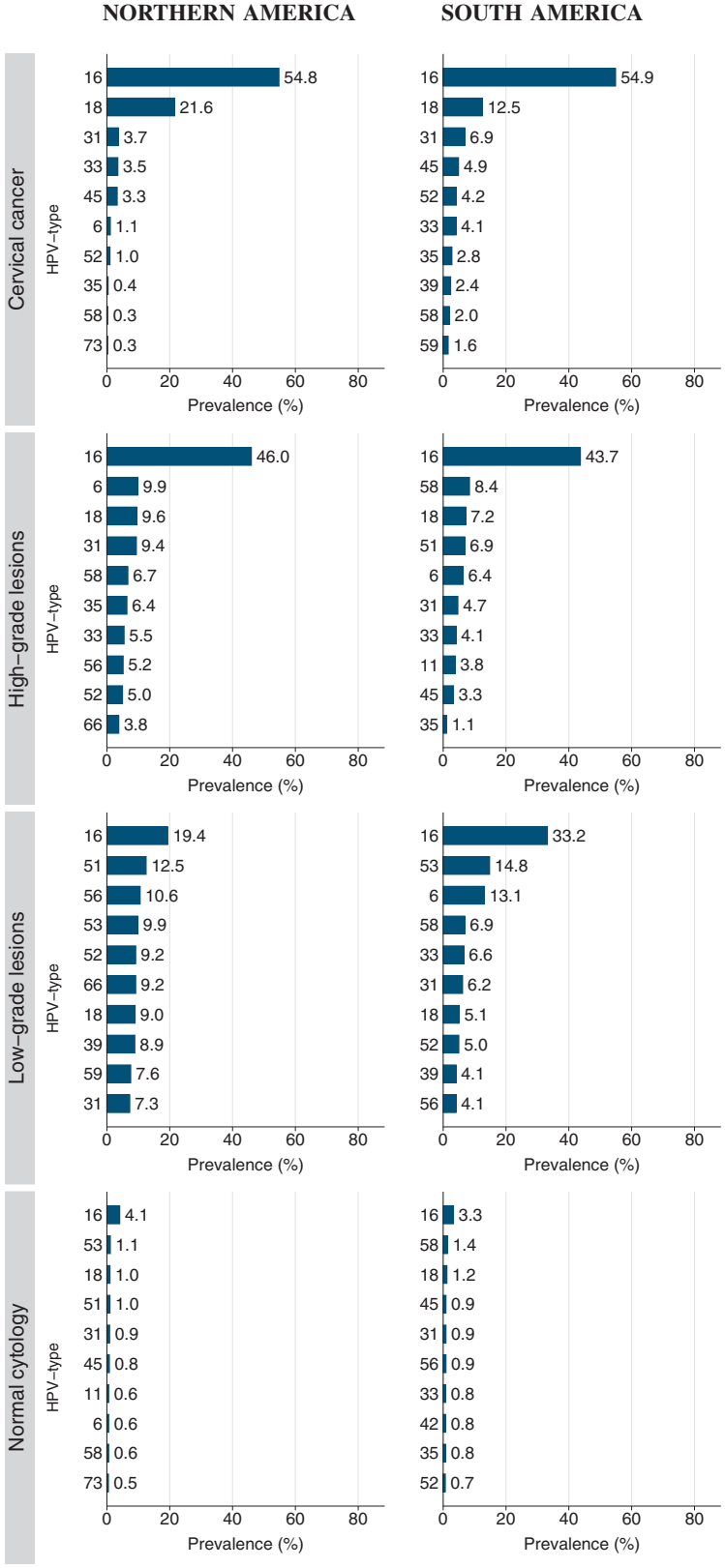
**Fig. 3. Ten most frequent HPV types in women with and without cervical disease in America**




*No data available. No more types than shown were tested or were positive.

*Sources of data: see Section III.Methods or visit http://www.who.int/hpvcentre*

**Fig. 3. Ten most frequent HPV types in women with and without cervical disease in America (continued)**




*Sources of data: see Section III.Methods or visit http://www.who.int/hpvcentre*

# ASIA

Asia has a population of 1390.4 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 265,884 women are diagnosed with cervical cancer and 142,735 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women between 15 and 44 years of age as well as women of all ages in Asia.

In Asia, about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers in Asia are attributed to HPVs 16 or 18.

**Fig. 1. Age-standardized (World) incidence rates of cervical cancer per 100,000 women in Asia**

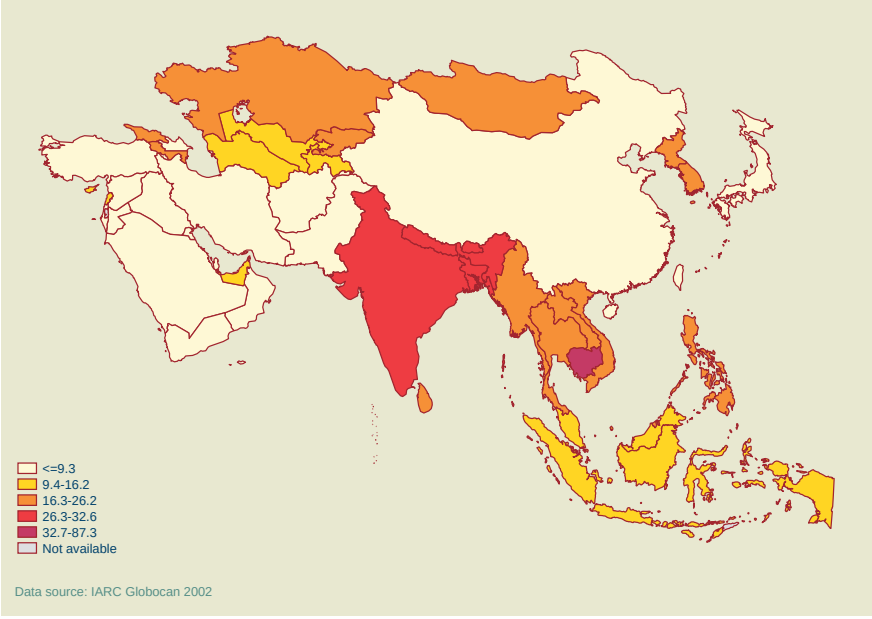



**Fig. 2. Age-specific incidence rates of cervical cancer in Asia and the World**

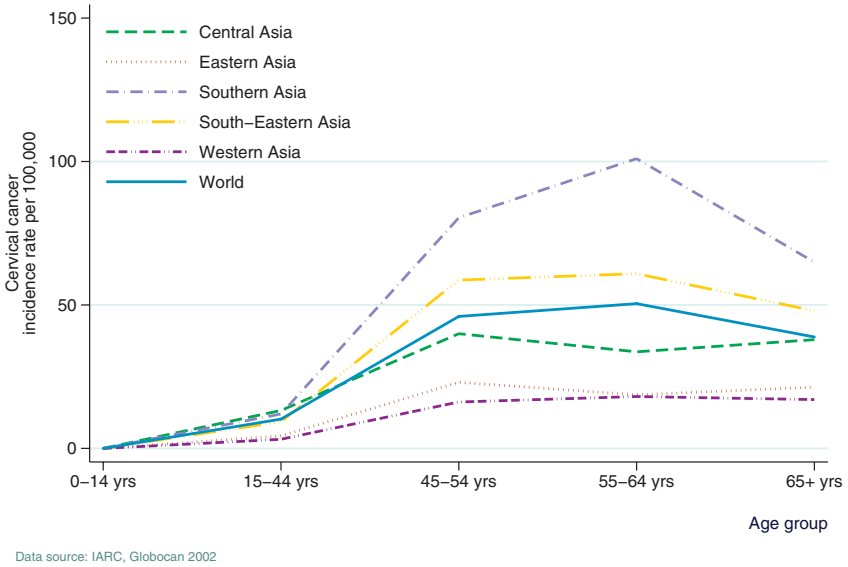


**Table 1. Female population and estimates of incidence and mortality for cervical cancer**

| Region / Country | Female population† | | Incidence | | Ranking | | Mortality | |
|---|---|---|---|---|---|---|---|---|
| | 10-14 years | 15+ years | Cases | ASR‡ | All women | 15-44 years | Deaths | ASR‡ |
| **Asia Continent** | 178.26 | 1390.40 | 265884 | 15.4 | 2nd | 2nd | 142735 | 8.4 |
| **Central Asia** | 3.20 | 20.65 | 4133 | 15.4 | 2nd | 1st | 1459 | 5.8 |
| Kazakhstan | 0.62 | 6.04 | 1955 | 21.6 | 2nd | 1st | 729 | 7.9 |
| Kyrgyzstan | 0.29 | 1.86 | 522 | 21.6 | 1st | 1st | 186 | 7.9 |
| Tajikistan | 0.42 | 2.03 | 232 | 9.9 | 3rd | 1st | 70 | 3.5 |
| Turkmenistan | 0.28 | 1.69 | 274 | 13.5 | 2nd | 1st | 96 | 5.2 |
| Uzbekistan | 1.58 | 9.03 | 1149 | 10.7 | 2nd | 2nd | 379 | 3.9 |
| **Eastern Asia** | 54.22 | 595.98 | 61132 | 7.4 | 7th | 3rd | 31314 | 3.7 |
| China | 48.37 | 506.73 | 45689 | 6.8 | 7th | 5th | 25561 | 3.8 |
| DPR Korea | 0.98 | 8.50 | 2150 | 17.9 | 3rd | 2nd | 558 | 4.7 |
| Japan | 2.93 | 56.77 | 7772 | 8 | 7th | 2nd | 3573 | 2.8 |
| Mongolia | 0.14 | 0.93 | 171 | 18 | 3rd | 1st | 92 | 10.1 |
| Republic of Korea | 1.60 | 19.62 | 4949 | 17.9 | 3rd | 2nd | 1327 | 4.7 |
| **Southern Asia** | 82.15 | 507.07 | 153535 | 26.6 | 1st | 2nd | 85192 | 15.4 |
| Afghanistan | 1.84 | 7.73 | 511 | 6.9 | 4th | 3rd | 254 | 3.6 |
| Bangladesh | 8.00 | 44.78 | 12931 | 27.6 | 1st | 1st | 6561 | 14.8 |
| Bhutan | 0.13 | 0.66 | 200 | 26.4 | 1st | 1st | 105 | 14.1 |
| India | 56.22 | 365.71 | 132082 | 30.7 | 1st | 1st | 74118 | 17.8 |
| Iran | 3.95 | 24.54 | 1118 | 4.4 | 5th | 5th | 581 | 2.4 |
| Maldives | 0.02 | 0.09 | - | - | - | - | - | - |
| Nepal | 1.64 | 8.54 | 2185 | 26.4 | 1st | 1st | 1129 | 14.1 |
| Pakistan | 9.49 | 47.27 | 2962 | 6.5 | 4th | 12th | 1605 | 3.6 |
| Sri Lanka | 0.86 | 7.74 | 1544 | 17.2 | 2nd | 2nd | 840 | 9.5 |
| **South-Eastern Asia** | 27.49 | 197.82 | 42538 | 18.7 | 2nd | 2nd | 22594 | 10.2 |
| Brunei | 0.02 | 0.13 | 26 | 18.7 | 2nd | 2nd | 13 | 9.6 |
| Cambodia | 0.85 | 4.71 | 1768 | 38.7 | 1st | 1st | 949 | 21.6 |
| Indonesia | 10.24 | 80.57 | 15050 | 15.7 | 2nd | 2nd | 7566 | 8.1 |
| Laos | 0.36 | 1.77 | 317 | 16.8 | 1st | 1st | 159 | 8.8 |
| Malaysia | 1.33 | 8.49 | 1492 | 15.7 | 2nd | 2nd | 766 | 8.4 |
| Myanmar | 2.67 | 18.08 | 5017 | 24.6 | 1st | 1st | 2594 | 13.1 |
| Philippines | 4.69 | 26.98 | 6000 | 20.9 | 2nd | 2nd | 4349 | 15.6 |
| Singapore | 0.16 | 1.74 | 323 | 13.2 | 4th | 3rd | 205 | 8.4 |
| Thailand | 2.60 | 25.14 | 6243 | 19.8 | 1st | 1st | 2620 | 8.4 |
| Timor-Leste | 0.05 | 0.26 | - | - | - | - | - | - |
| Viet Nam | 4.51 | 29.95 | 6224 | 20.2 | 1st | 2nd | 3334 | 11.2 |
| **Western Asia** | 11.20 | 68.88 | 4456 | 5.8 | 4th | 3rd | 2118 | 2.9 |
| Armenia | 0.13 | 1.31 | 380 | 16.8 | 2nd | 2nd | 130 | 5.6 |
| Azerbaijan | 0.43 | 3.28 | 345 | 8.2 | 5th | 2nd | 113 | 2.8 |
| Bahrain | 0.03 | 0.22 | 17 | 8.5 | 4th | 3rd | 9 | 4.8 |
| Cyprus | 0.03 | 0.35 | 53 | 11.6 | 4th | 2nd | 25 | 5.3 |
| Georgia | 0.17 | 1.95 | 580 | 17.5 | 2nd | 2nd | 225 | 5.9 |
| Iraq | 1.73 | 8.42 | 252 | 3.3 | 12th | 7th | 129 | 1.8 |
| Israel | 0.28 | 2.49 | 160 | 4.5 | 14th | 6th | 82 | 2.3 |
| Jordan | 0.31 | 1.71 | 60 | 4.2 | 8th | 9th | 32 | 2.3 |
| Kuwait | 0.10 | 0.75 | 34 | 6.1 | 4th | 3rd | 17 | 3.4 |
| Lebanon | 0.17 | 1.32 | 262 | 15.4 | 2nd | 2nd | 131 | 8 |
| Oman | 0.14 | 0.69 | 46 | 6.9 | 3rd | 4th | 25 | 3.9 |
| Qatar | 0.02 | 0.18 | 5 | 3.9 | 12th | 8th | 3 | 2.2 |
| Saudi Arabia | 1.41 | 6.82 | 271 | 4.6 | 8th | 8th | 143 | 2.5 |
| Syria | 1.06 | 6.02 | 118 | 2 | 14th | 10th | 55 | 1 |
| Turkey | 3.40 | 25.83 | 1364 | 4.5 | 8th | 7th | 726 | 2.4 |
| United Arab Emirates | 0.16 | 0.95 | 73 | 9.9 | 2nd | 3rd | 36 | 5.2 |
| Yemen | 1.39 | 5.58 | 370 | 8 | 3rd | 9th | 206 | 4.6 |

†Population in millions.
‡ASR: age-standardized rate per 100,000 women.
Estimates were calculated using the direct method and the World population as the reference.

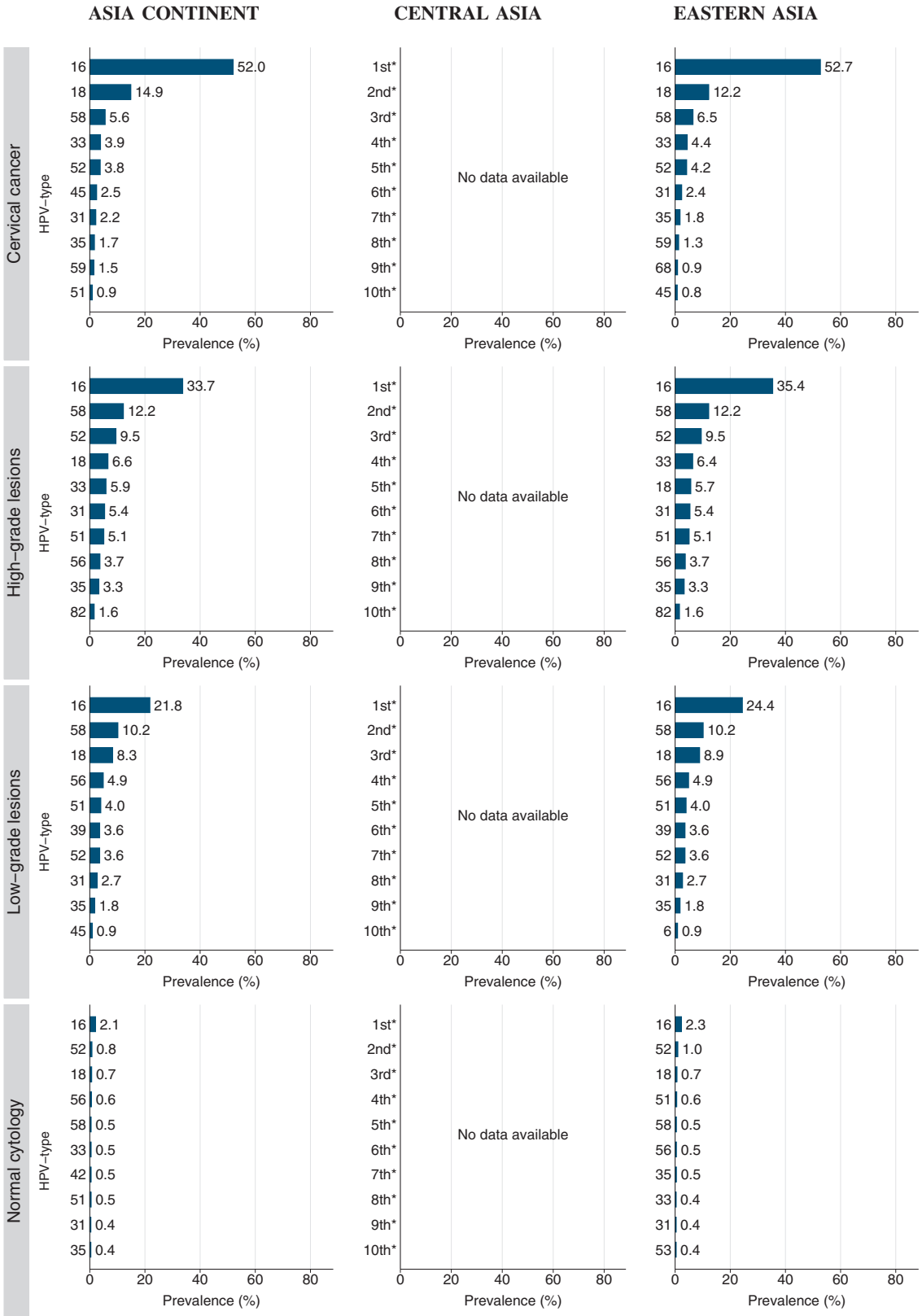
**Table 2. Prevalence of HPV in women with normal cytology, precancerous cervical lesions and invasive cervical cancer**

| Country /Region | Normal cytology | | Low-grade lesions† | | High-grade lesions‡ | | Cervical cancer | |
|---|---|---|---|---|---|---|---|---|
| | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) |
| **Asia Continent** | 41125 | 8.3 (8.0-8.5) | 252 | 67.1 (60.9-72.8) | 1364 | 78 (75.7-80.2) | 5652 | 85.8 (84.9-86.7) |
| **Central Asia** | - | - - | - | - - | - | - - | - | - - |
| Kazakhstan | - | - - | - | - - | - | - - | - | - - |
| Kyrgyzstan | - | - - | - | - - | - | - - | - | - - |
| Tajikistan | - | - - | - | - - | - | - - | - | - - |
| Turkmenistan | - | - - | - | - - | - | - - | - | - - |
| Uzbekistan | - | - - | - | - - | - | - - | - | - - |
| **Eastern Asia** | 17767 | 10.6 (10.1-11.0) | 225 | 71.1 (64.7-76.9) | 1132 | 81.3 (78.9-83.5) | 4176 | 83.8 (82.7-84.9) |
| China | 2044 | 13.6 (12.1-15.1) | 51 | 64.7 (50.1-77.6) | 416 | 66.6 (61.8-71.1) | 2698 | 84.1 (82.7-85.5) |
| DPRKorea | - | - - | - | - - | - | - - | - | - - |
| Japan | 12599 | 7.5 (7.0-7.9) | - | - - | 338 | 91.4 (87.9-94.2) | 1142 | 81.6 (79.2-83.8) |
| Mongolia | - | - - | - | - - | - | - - | - | - - |
| Republic of Korea | 3124 | 21.0 (19.6-22.5) | 174 | 73 (65.7-79.4) | 378 | 88.4 (84.7-91.4) | 336 | 88.7 (84.8-91.9) |
| **Southern Asia** | 19164 | 6.6 (6.2-6.9) | - | - - | 25 | 64 (42.5-82.0) | 386 | 90.2 (86.7-92.9) |
| Afghanistan | - | - - | - | - - | - | - - | - | - - |
| Bangladesh | - | - - | - | - - | - | - - | - | - - |
| Bhutan | - | - - | - | - - | - | - - | - | - - |
| India | 19164 | 6.6 (6.2-6.9) | - | - - | 25 | 64 (42.5-82.0) | 275 | 93.1 (89.4-95.8) |
| Iran | - | - - | - | - - | - | - - | 111 | 82.9 (74.6-89.4) |
| Maldives | - | - - | - | - - | - | - - | - | - - |
| Nepal | - | - - | - | - - | - | - - | - | - - |
| Pakistan | - | - - | - | - - | - | - - | - | - - |
| Sri Lanka | - | - - | - | - - | - | - - | - | - - |
| **South-Eastern Asia** | 4194 | 6.2 (5.5-6.9) | 27 | 33.3 (16.5-54.0) | 207 | 61.8 (54.8-68.5) | 1090 | 92.1 (90.3-93.6) |
| Brunei | - | - - | - | - - | - | - - | - | - - |
| Cambodia | - | - - | - | - - | - | - - | - | - - |
| Indonesia | - | - - | - | - - | - | - - | 121 | 97.5 (92.9-99.5) |
| Laos | - | - - | - | - - | - | - - | - | - - |
| Malaysia | - | - - | - | - - | - | - - | 23 | 95.7 (78.1-99.9) |
| Myanmar | - | - - | - | - - | - | - - | - | - - |
| Philippines | 377 | 9.3 (6.6-12.7) | - | - - | - | - - | 356 | 93.5 (90.5-95.9) |
| Singapore | - | - - | - | - - | - | - - | - | - - |
| Thailand | 1920 | 6.3 (5.3-7.5) | 27 | 33.3 (16.5-54.0) | 207 | 61.8 (54.8-68.5) | 590 | 90 (87.3-92.3) |
| Timor-Leste | - | - - | - | - - | - | - - | - | - - |
| Viet Nam | 1897 | 5.4 (4.5-6.5) | - | - - | - | - - | - | - - |
| **Western Asia** | - | - - | - | - - | - | - - | - | - - |
| Armenia | - | - - | - | - - | - | - - | - | - - |
| Azerbaijan | - | - - | - | - - | - | - - | - | - - |
| Bahrain | - | - - | - | - - | - | - - | - | - - |
| Cyprus | - | - - | - | - - | - | - - | - | - - |
| Georgia | - | - - | - | - - | - | - - | - | - - |
| Iraq | - | - - | - | - - | - | - - | - | - - |
| Israel | - | - - | - | - - | - | - - | - | - - |
| Jordan | - | - - | - | - - | - | - - | - | - - |
| Kuwait | - | - - | - | - - | - | - - | - | - - |
| Lebanon | - | - - | - | - - | - | - - | - | - - |
| Oman | - | - - | - | - - | - | - - | - | - - |
| Qatar | - | - - | - | - - | - | - - | - | - - |
| Saudi Arabia | - | - - | - | - - | - | - - | - | - - |
| Syria | - | - - | - | - - | - | - - | - | - - |
| Turkey | - | - - | - | - - | - | - - | - | - - |
| United Arab Emirates | - | - - | - | - - | - | - - | - | - - |
| Yemen | - | - - | - | - - | - | - - | - | - - |

†Low-grade lesions: LSIL or CIN-1
‡High-grade lesions: CIN-2, CIN-3, CIS or HSIL

*Sources of data: see Section III.Methods or visit http://www.who.int/hpvcentre*

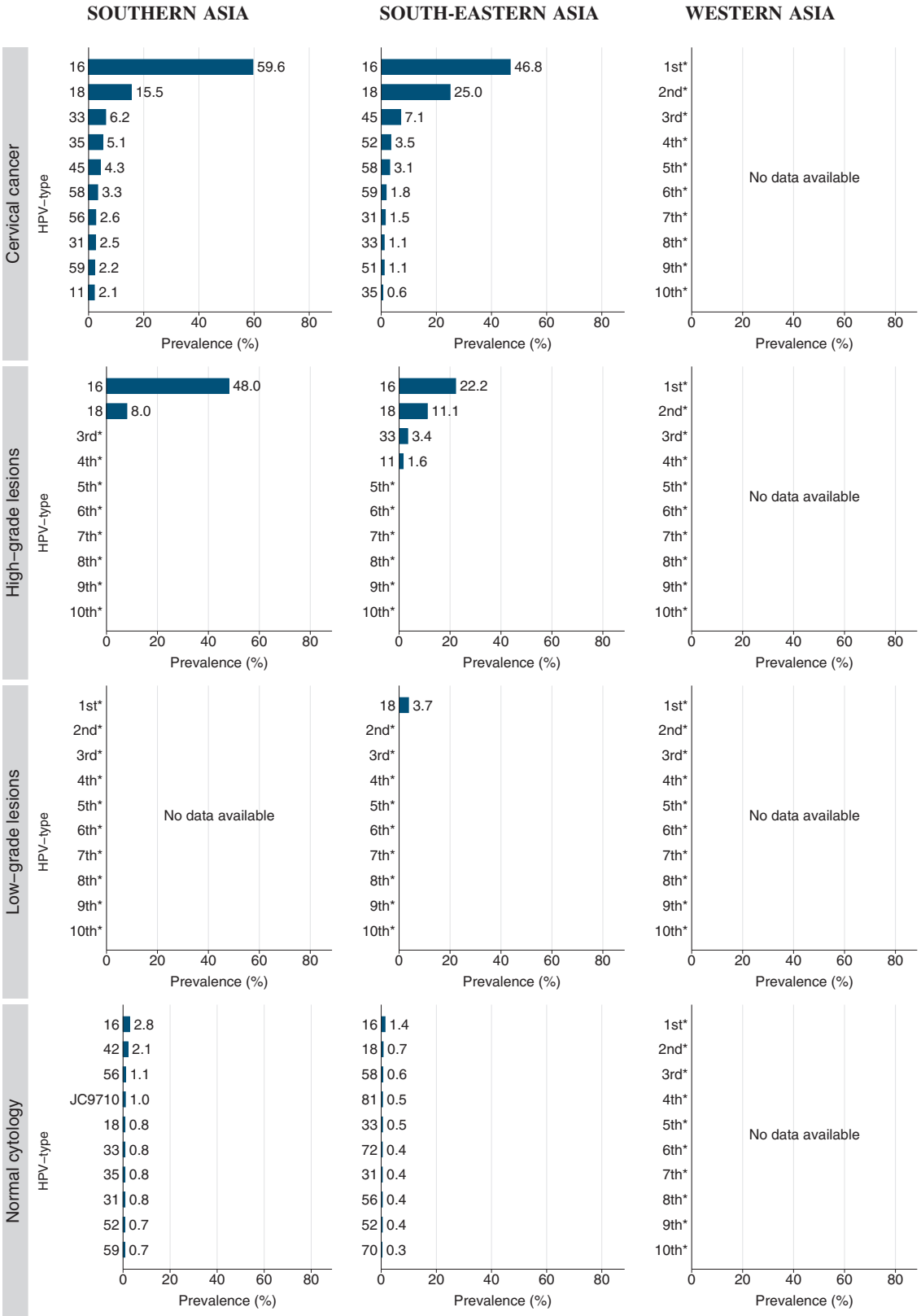
**Fig. 3. Ten most frequent HPV types in women with and without cervical disease in Asia**




*No data available. No more types than shown were tested or were positive.

*Sources of data: see Section III.Methods or visit http://www.who.int/hpvcentre*

**Fig. 3. Ten most frequent HPV types in women with and without cervical disease in Assia (continued)**




*No data available. No more types than shown were tested or were positive.

# EUROPE

Europe has a population of 321.8 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 59,931 women are diagnosed with cervical cancer and 29,812 die from the disease. Cervical cancer ranks as the 7th most frequent cancer in women in Europe, and the 2nd most frequent among women between 15 and 44 years of age.

In Europe, about 6.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 73.3% of invasive cervical cancers in Europe are attributed to HPVs 16 or 18.

**Fig. 1. Age-standardized (World) incidence rates of cervical cancer per 100,000 women in Europe**

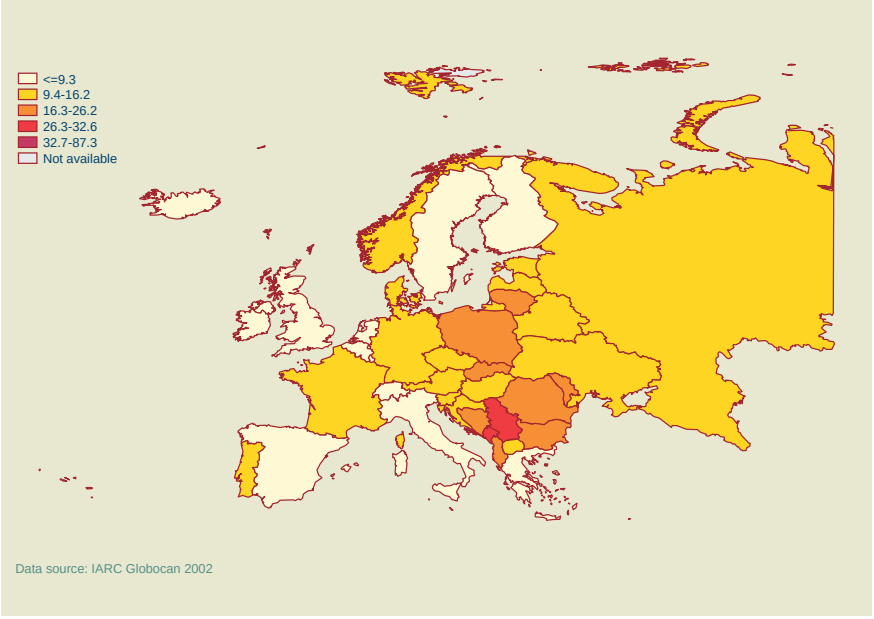



**Fig. 2. Age-specific incidence rates of cervical cancer in Europe and the World**

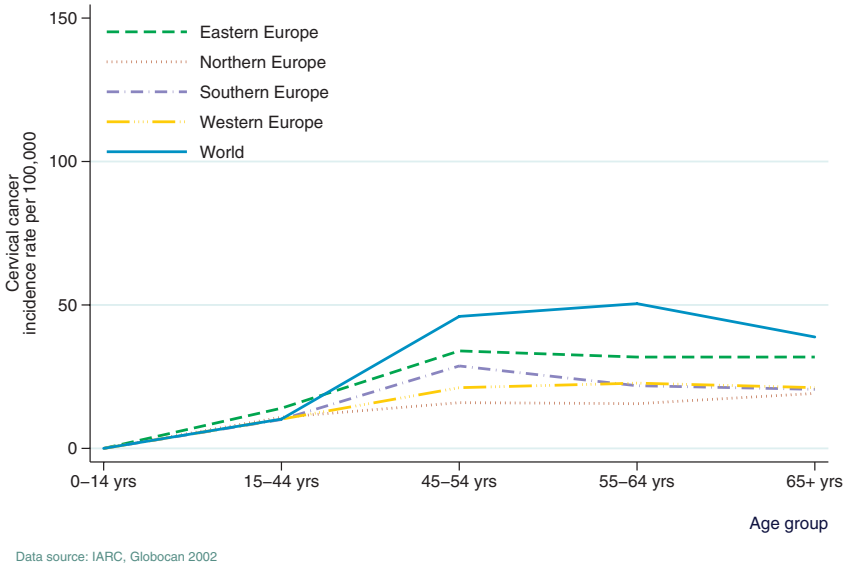


**Table 1. Female population and estimates of incidence and mortality for cervical cancer**

| Region / Country | Female population† | | Incidence | | Ranking | | Mortality | |
|---|---|---|---|---|---|---|---|---|
| | 10-14 years | 15+ years | Cases | ASR‡ | All women | 15-44 years | Deaths | ASR‡ |
| **Europe Continent** | 20.38 | 321.76 | 59931 | 11.9 | 7th | 2nd | 29812 | 5 |
| **Eastern Europe** | 8.56 | 135.29 | 30897 | 14.5 | 4th | 2nd | 17198 | 7.1 |
| Belarus | 0.29 | 4.48 | 1086 | 13.1 | 5th | 3rd | 436 | 5.2 |
| Bulgaria | 0.20 | 3.47 | 979 | 18.7 | 3rd | 2nd | 506 | 8 |
| Czech Republic | 0.29 | 4.52 | 1160 | 16.2 | 6th | 2nd | 476 | 5.5 |
| Hungary | 0.30 | 4.51 | 1042 | 15.7 | 5th | 2nd | 551 | 6.7 |
| Poland | 1.20 | 16.78 | 4901 | 18.4 | 3rd | 2nd | 2278 | 7.8 |
| Republic of Moldova | 0.16 | 1.82 | 476 | 18 | 3rd | 2nd | 220 | 7.8 |
| Romania | 0.59 | 9.50 | 3448 | 23.9 | 2nd | 1st | 2094 | 13 |
| Russian Federation | 3.95 | 66.07 | 12215 | 11.9 | 5th | 2nd | 7784 | 6.5 |
| Slovakia | 0.18 | 2.34 | 654 | 18.5 | 4th | 2nd | 242 | 6.1 |
| Ukraine | 1.41 | 21.81 | 4885 | 14.1 | 5th | 2nd | 2578 | 6.4 |
| **Northern Europe** | 3.00 | 40.61 | 5647 | 9 | 10th | 2nd | 2814 | 3.6 |
| Denmark | 0.17 | 2.25 | 439 | 12.6 | 7th | 2nd | 230 | 5 |
| Estonia | 0.04 | 0.62 | 156 | 15.5 | 6th | 2nd | 74 | 6.6 |
| Finland | 0.16 | 2.23 | 164 | 4.3 | 15th | 4th | 81 | 1.8 |
| Iceland | 0.01 | 0.12 | 13 | 8.3 | 10th | 3rd | 10 | 4.7 |
| Ireland | 0.13 | 1.68 | 164 | 7.2 | 10th | 2nd | 88 | 3.5 |
| Latvia | 0.07 | 1.09 | 291 | 12.9 | 5th | 3rd | 165 | 7.4 |
| Lithuania | 0.12 | 1.55 | 446 | 17.5 | 5th | 2nd | 256 | 9 |
| Norway | 0.15 | 1.88 | 291 | 10.4 | 8th | 2nd | 125 | 3.5 |
| Sweden | 0.30 | 3.79 | 485 | 8.2 | 10th | 3rd | 249 | 3.1 |
| United Kingdom | 1.84 | 25.30 | 3181 | 8.3 | 11th | 2nd | 1529 | 3.1 |
| **Southern Europe** | 3.72 | 65.48 | 10641 | 10.7 | 7th | 2nd | 4131 | 3.3 |
| Albania | 0.15 | 1.17 | 389 | 25.2 | 2nd | 2nd | 146 | 9.8 |
| Andorra | - | - | - | - | - | - | - | - |
| Bosnia & Herzegovina | 0.11 | 1.70 | 545 | 21.3 | 3rd | 2nd | 227 | 8 |
| Croatia | 0.13 | 2.02 | 431 | 13.3 | 7th | 2nd | 209 | 5 |
| Greece | 0.26 | 4.85 | 578 | 7.7 | 9th | 2nd | 239 | 2.5 |
| Italy | 1.37 | 25.94 | 3418 | 8.1 | 10th | 3rd | 1186 | 2.2 |
| Malta | 0.01 | 0.17 | 14 | 4.8 | 14th | 4th | 6 | 1.6 |
| Montenegro* | 0.33 | 4.35 | 1816 | 27.3 | 2nd | 2nd | 815 | 10.1 |
| Portugal | 0.27 | 4.61 | 956 | 13.5 | 4th | 2nd | 378 | 4.5 |
| San Marino | - | - | - | - | - | - | - | - |
| Serbia* | 0.33 | 4.35 | 1816 | 27.3 | 2nd | 2nd | 815 | 10.1 |
| Slovenia | 0.05 | 0.87 | 207 | 16.1 | 5th | 2nd | 79 | 4.7 |
| Spain | 0.96 | 18.91 | 2103 | 7.6 | 7th | 2nd | 739 | 2.2 |
| Macedonia, TFYR | 0.07 | 0.83 | 167 | 13.9 | 4th | 2nd | 99 | 7.6 |
| **Western Europe** | 5.10 | 80.37 | 12744 | 10 | 8th | 2nd | 5671 | 3.4 |
| Austria | 0.23 | 3.57 | 610 | 10.9 | 9th | 3rd | 295 | 4.1 |
| Belgium | 0.30 | 4.45 | 667 | 9.3 | 7th | 2nd | 326 | 3.4 |
| France | 1.76 | 25.67 | 4149 | 9.8 | 7th | 3rd | 1647 | 3.1 |
| Germany | 2.08 | 36.55 | 6133 | 10.8 | 8th | 2nd | 2967 | 3.8 |
| Luxembourg | 0.01 | 0.19 | 24 | 8.7 | 11th | 3rd | 13 | 3.9 |
| Monaco | - | - | - | - | - | - | - | - |
| Netherlands | 0.49 | 6.76 | 753 | 7.3 | 11th | 3rd | 307 | 2.3 |
| Switzerland | 0.22 | 3.16 | 389 | 8.3 | 10th | 3rd | 108 | 1.7 |

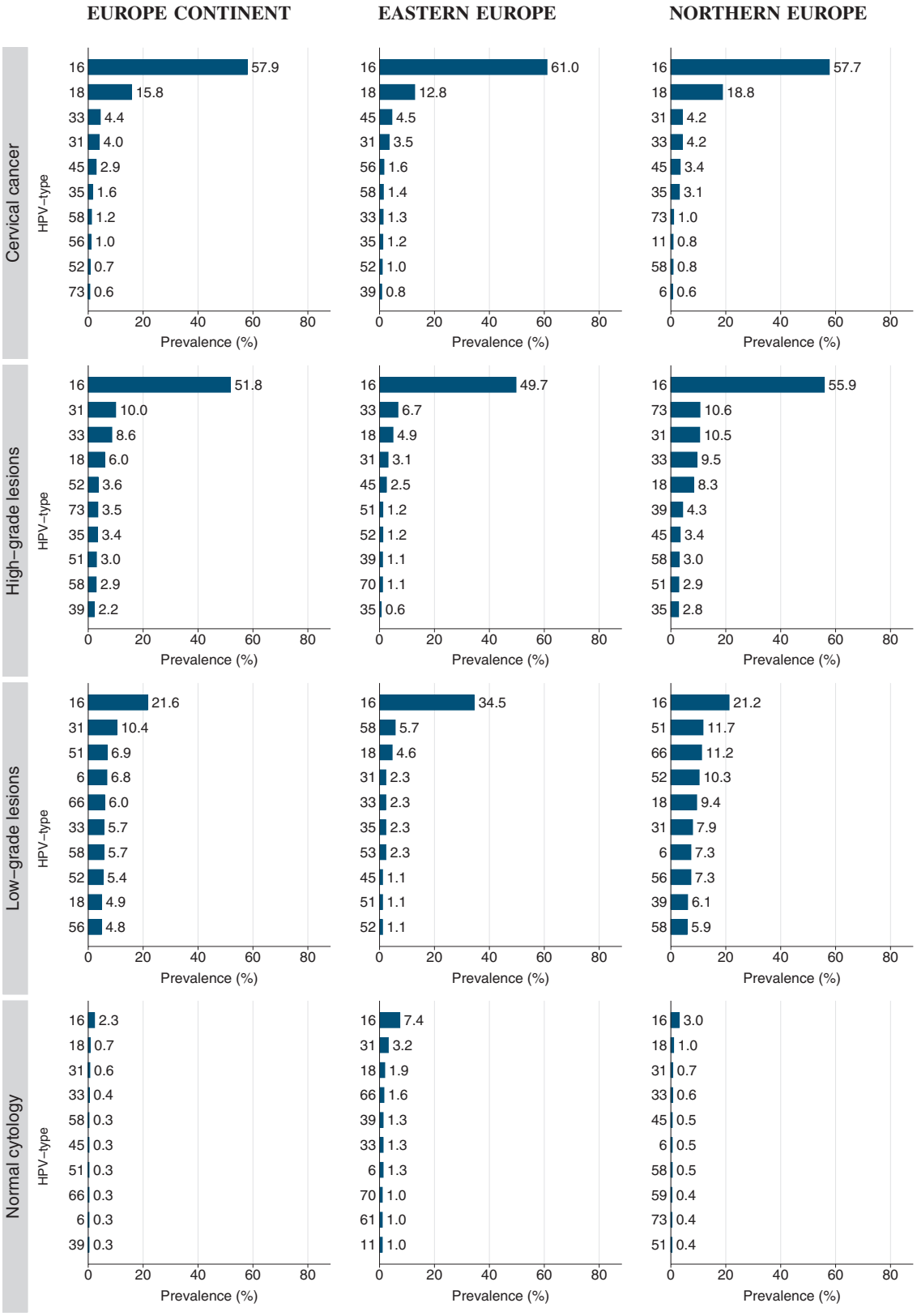
*Estimates are aggregated for Serbia and Montenegro.
†Population in millions.
‡ASR: age-standardized rate per 100,000 women.
Estimates were calculated using the direct method and the World population as the reference.

**Table 2. Prevalence of HPV in women with normal cytology, precancerous cervical lesions and invasive cervical cancer**

| Country /Region | Normal cytology | | Low-grade lesions† | | High-grade lesions‡ | | Cervical cancer | |
|---|---|---|---|---|---|---|---|---|
| | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) |
| **Europe Continent** | 70129 | 6.6 (6.4-6.8) | 4436 | 69.2 (67.8-70.5) | 3464 | 88 (86.9-89.1) | 4341 | 85.8 (84.7-86.8) |
| **Eastern Europe** | 309 | 29.1 (24.1-34.5) | 87 | 52.9 (41.9-63.7) | 163 | 75.5 (68.1-81.9) | 459 | 84.5 (80.9-87.7) |
| Belarus | - | - - | - | - - | - | - - | - | - - |
| Bulgaria | - | - - | - | - - | - | - - | - | - - |
| Czech Republic | - | - - | 87 | 52.9 (41.9-63.7) | 88 | 58 (47.0-68.4) | 49 | 73.5 (58.9-85.1) |
| Hungary | - | - - | - | - - | 75 | 96 (88.8-99.2) | 47 | 97.9 (88.7-99.9) |
| Poland | - | - - | - | - - | - | - - | 183 | 68.9 (61.6-75.5) |
| Republic of Moldova | - | - - | - | - - | - | - - | - | - - |
| Romania | - | - - | - | - - | - | - - | - | - - |
| Russian Federation | 309 | 29.1 (24.1-34.5) | - | - - | - | - - | 180 | 100 (98.0-100.0) |
| Slovakia | - | - - | - | - - | - | - - | - | - - |
| Ukraine | - | - - | - | - - | - | - - | - | - - |
| **Northern Europe** | 16235 | 8.0 (7.5-8.4) | 646 | 85.3 (82.3-87.9) | 987 | 85.8 (83.5-87.9) | 2152 | 86.2 (84.7-87.7) |
| Denmark | 1728 | 15.2 (13.5-16.9) | - | - - | 34 | 91.2 (76.3-98.1) | 84 | 76.2 (65.7-84.8) |
| Estonia | - | - - | - | - - | - | - - | - | - - |
| Finland | - | - - | - | - - | - | - - | 460 | 88 (84.7-90.9) |
| Iceland | - | - - | - | - - | - | - - | - | - - |
| Ireland | - | - - | - | - - | 111 | 90.1 (83.0-94.9) | 39 | 87.2 (72.6-95.7) |
| Latvia | - | - - | - | - - | - | - - | 221 | 82.8 (77.2-87.5) |
| Lithuania | - | - - | - | - - | 29 | 79.3 (60.3-92.0) | 191 | 92.7 (88.0-95.9) |
| Norway | - | - - | - | - - | 67 | 79.1 (67.4-88.1) | 361 | 98.3 (96.4-99.4) |
| Sweden | 617 | 5.8 (4.1-8.0) | 186 | 76.3 (69.6-82.3) | 383 | 80.4 (76.1-84.3) | 562 | 75.4 (71.7-79.0) |
| United Kingdom | 13890 | 7.1 (6.7-7.6) | 460 | 88.9 (85.7-91.6) | 363 | 91.5 (88.1-94.1) | 234 | 91.5 (87.1-94.7) |
| **Southern Europe** | 4884 | 5.7 (5.0-6.3) | 3391 | 66.6 (64.9-68.1) | 650 | 81.1 (77.9-84.0) | 732 | 83.7 (80.9-86.3) |
| Albania | - | - - | - | - - | - | - - | - | - - |
| Andorra | - | - - | - | - - | - | - - | - | - - |
| Bosnia & Herzegovina | - | - - | - | - - | - | - - | - | - - |
| Croatia | - | - - | 1211 | 51.6 (48.8-54.5) | 158 | 75.3 (67.8-81.8) | - | - - |
| Greece | 2010 | 3.6 (2.9-4.5) | 51 | 90.2 (78.6-96.7) | 78 | 88.5 (79.2-94.6) | 151 | 72.2 (64.3-79.2) |
| Italy | 1698 | 10.3 (8.9-11.9) | 1713 | 72.4 (70.3-74.6) | 125 | 85.6 (78.2-91.2) | 279 | 92.1 (88.3-95.0) |
| Malta | - | - - | - | - - | - | - - | - | - - |
| Montenegro | - | - - | - | - - | - | - - | - | - - |
| Portugal | - | - - | 416 | 82.9 (79.0-86.4) | 132 | 91.7 (85.6-95.8) | 60 | 98.3 (91.1-100.0) |
| San Marino | - | - - | - | - - | - | - - | - | - - |
| Serbia | - | - - | - | - - | - | - - | - | - - |
| Slovenia | - | - - | - | - - | - | - - | - | - - |
| Spain | 1176 | 2.4 (1.6-3.4) | - | - - | 157 | 70.7 (62.9-77.7) | 242 | 77.7 (71.9-82.8) |
| Macedonia, TFYR[c] | - | - - | - | - - | - | - - | - | - - |
| **Western Europe** | 48701 | 6.1 (5.9-6.4) | 312 | 68.6 (63.1-73.7) | 1664 | 93.3 (92.0-94.5) | 998 | 86.8 (84.5-88.8) |
| Austria | - | - - | - | - - | - | - - | 200 | 90.5 (85.6-94.2) |
| Belgium | 287 | 24.0 (19.2-29.4) | 58 | 69 (55.5-80.5) | 354 | 90.7 (87.2-93.5) | 115 | 87.8 (80.4-93.2) |
| France | 9070 | 12.1 (11.5-12.8) | 40 | 60 (43.3-75.1) | 53 | 92.5 (81.8-97.9) | 403 | 83.1 (79.1-86.7) |
| Germany | 12436 | 6.3 (5.9-6.8) | 179 | 64.8 (57.3-71.8) | 526 | 89.2 (86.2-91.7) | 68 | 83.8 (72.9-91.6) |
| Luxembourg | - | - - | - | - - | - | - - | - | - - |
| Monaco | - | - - | - | - - | - | - - | - | - - |
| Netherlands | 26908 | 3.9 (3.6-4.1) | 35 | 97.1 (85.1-99.9) | 731 | 97.7 (96.3-98.6) | 212 | 90.6 (85.8-94.1) |
| Switzerland | - | - - | - | - - | - | - - | - | - - |

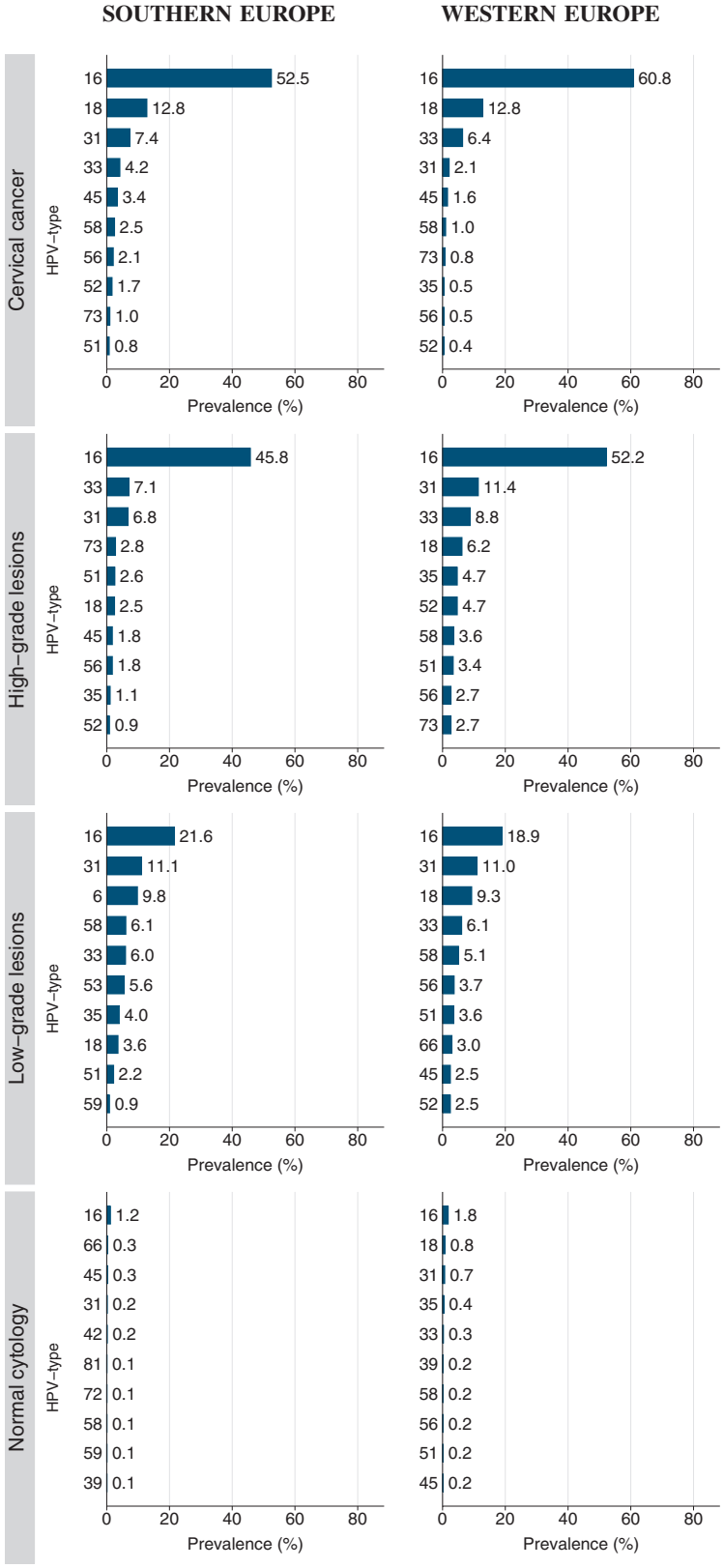
†Low-grade lesions: LSIL or CIN-1
‡High-grade lesions: CIN-2, CIN-3, CIS or HSIL

**Fig. 3. Ten most frequent HPV types in women with and without cervical disease in Europe**




*Sources of data: see Section III.Methods or visit http://www.who.int/hpvcentre*

**Fig. 3. Ten most frequent HPV types in women with and without cervical disease in Europe (continued)**




*Sources of data: see Section III.Methods or visit http://www.who.int/hpvcentre*

# OCEANIA

Oceania has a population of 12.6 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 2002 women are diagnosed with cervical cancer and 844 die from the disease. Cervical cancer ranks as the 6th most frequent cancer in women in Oceania, and the 3rd most frequent among women between 15 and 44 years of age.

In Oceania, about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Fig. 1. Age-standardized (World) incidence rates of cervical cancer per 100,000 women in Oceania**

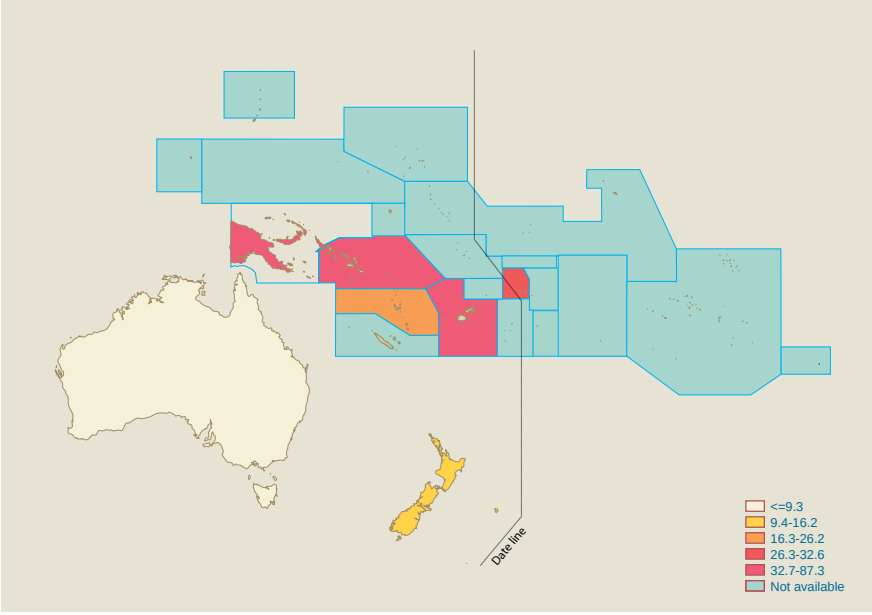
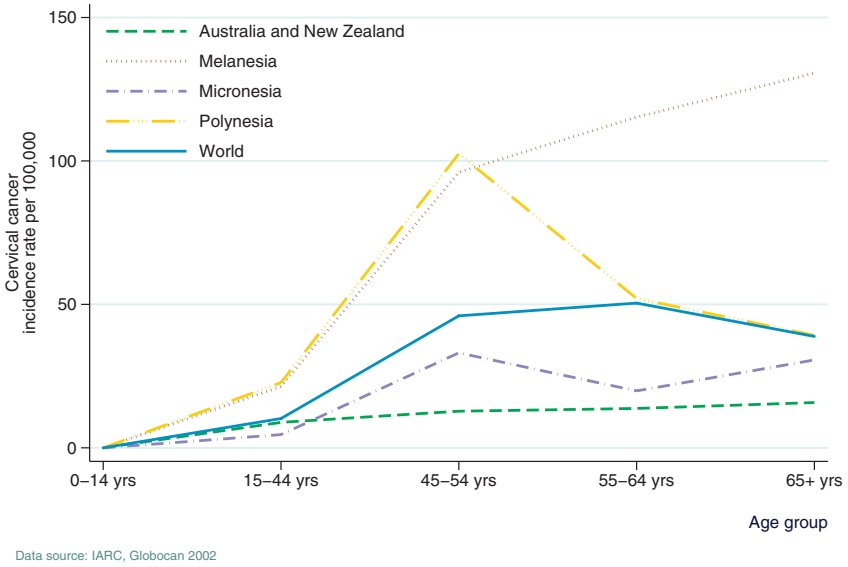



**Fig. 2. Age-specific incidence rates of cervical cancer in Oceania and the World**




Data source: IARC, Globocan 2002

**Table 1. Female population and estimates of incidence and mortality for cervical cancer**

| Region / Country | Female population† | | Incidence | | Ranking | | Mortality | |
|---|---|---|---|---|---|---|---|---|
| | 10-14 years | 15+ years | Cases | ASR‡ | All women | 15-44 years | Deaths | ASR‡ |
| **Oceania Continent** | 1.34 | 12.58 | 2002 | 11.5 | 6th | 3rd | 844 | 4.6 |
| **Australia & New Zealand** | 0.82 | 9.91 | 1063 | 7.4 | 10th | 3rd | 330 | 2 |
| Australia | 0.68 | 8.27 | 835 | 6.9 | 11th | 3rd | 249 | 1.7 |
| New Zealand | 0.14 | 1.63 | 228 | 10 | 8th | 3rd | 82 | 3.2 |
| **Melanesia** | 0.46 | 2.28 | 850 | 38.1 | 1st | 1st | 466 | 21.7 |
| Fiji | 0.04 | 0.29 | 113 | 33.4 | 1st | 1st | 61 | 18.7 |
| Papua New Guinea | 0.36 | 1.70 | 637 | 40.4 | 1st | 1st | 341 | 22.6 |
| Solomon Islands | 0.03 | 0.14 | 58 | 42.8 | 1st | 1st | 31 | 23.9 |
| Vanuatu | 0.01 | 0.06 | 14 | 21.7 | 2nd | 2nd | 8 | 12.1 |
| **Micronesia** | 0.03 | 0.19 | 19 | 9.4 | 4th | 3rd | 10 | 5.2 |
| Kiribati | - | - | - | - | - | - | - | - |
| Marshall Islands | - | - | - | - | - | - | - | - |
| Micronesia | 0.01 | 0.03 | - | - | - | - | - | - |
| Nauru | - | - | - | - | - | - | - | - |
| Palau | - | - | - | - | - | - | - | - |
| **Polynesia** | 0.03 | 0.21 | 72 | 28 | 2nd | 1st | 38 | 15 |
| Cook Islands | - | - | - | - | - | - | - | - |
| Niue | - | - | - | - | - | - | - | - |
| Samoa | 0.01 | 0.05 | 16 | 28 | 2nd | 1st | 8 | 15 |
| Tonga | 0.01 | 0.03 | - | - | - | - | - | - |
| Tuvalu | - | - | - | - | - | - | - | - |

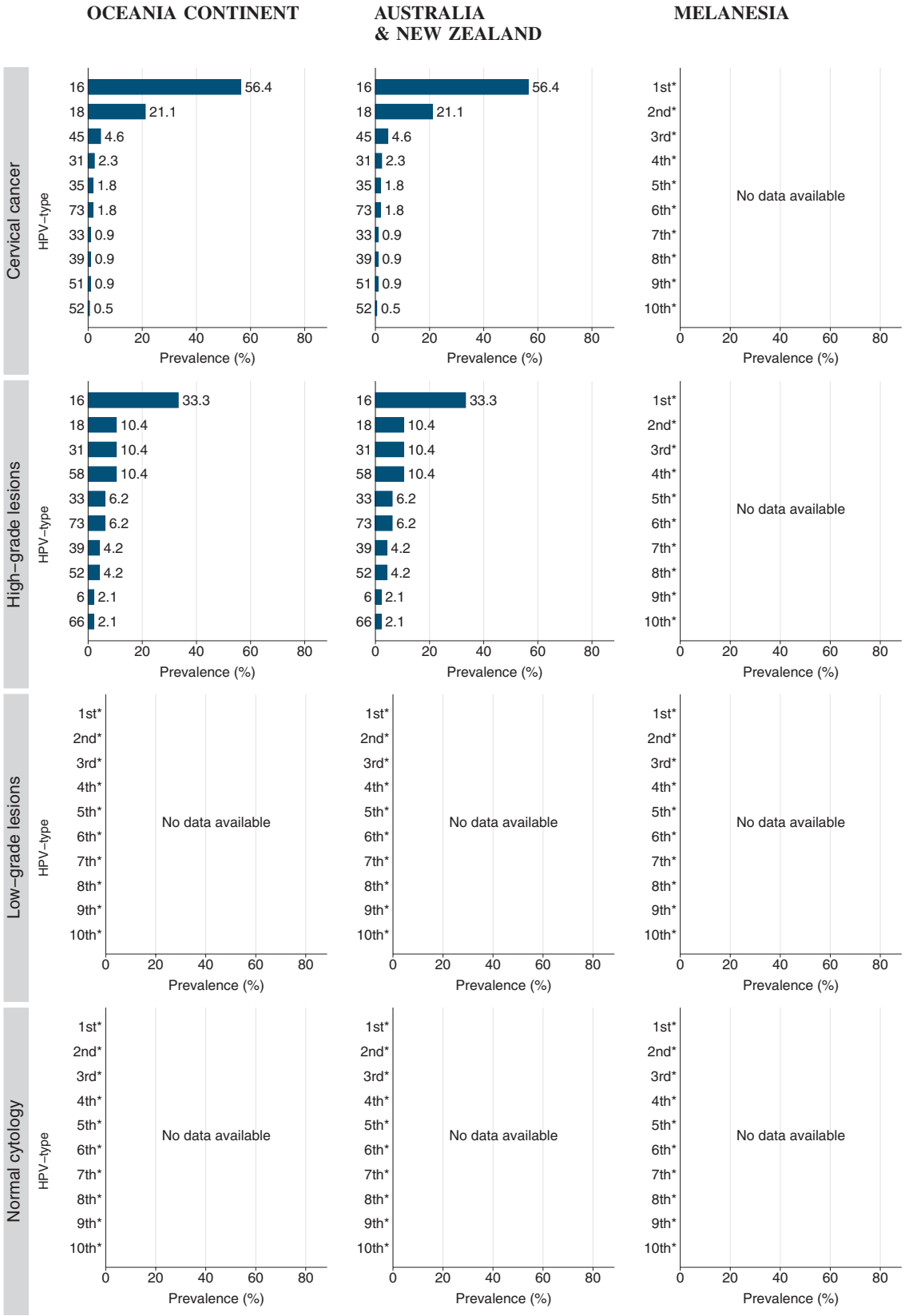
†Population in millions.
‡ASR: age-standardized rate per 100,000 women.
Estimates were calculated using the direct method and the World population as the reference.

**Table 2. Prevalence of HPV in women with normal cytology, precancerous cervical lesions and invasive cervical cancer**

| Country /Region | Normal cytology | | Low-grade lesions† | | High-grade lesions‡ | | Cervical cancer | |
|---|---|---|---|---|---|---|---|---|
| | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) | Women tested | HPV Prev % (95%CI) |
| **Oceania Continent** | - | - - | - | - - | 48 | 95.8 (85.7-99.5) | 450 | 88.4 (85.1-91.2) |
| **Australia & New Zealand** | - | - - | - | - - | 48 | 95.8 (85.7-99.5) | 450 | 88.4 (85.1-91.2) |
| Australia | - | - - | - | - - | 48 | 95.8 (85.7-99.5) | 450 | 88.4 (85.1-91.2) |
| New Zealand | - | - - | - | - - | - | - - | - | - - |
| **Melanesia** | - | - - | - | - - | - | - - | - | - - |
| Fiji | - | - - | - | - - | - | - - | - | - - |
| Papua New Guinea | - | - - | - | - - | - | - - | - | - - |
| Solomon Islands | - | - - | - | - - | - | - - | - | - - |
| Vanuatu | - | - - | - | - - | - | - - | - | - - |
| **Micronesia** | - | - - | - | - - | - | - - | - | - - |
| Kiribati | - | - - | - | - - | - | - - | - | - - |
| Marshall Islands | - | - - | - | - - | - | - - | - | - - |
| Micronesia | - | - - | - | - - | - | - - | - | - - |
| Nauru | - | - - | - | - - | - | - - | - | - - |
| Palau | - | - - | - | - - | - | - - | - | - - |
| **Polynesia** | - | - - | - | - - | - | - - | - | - - |
| Cook Islands | - | - - | - | - - | - | - - | - | - - |
| Niue | - | - - | - | - - | - | - - | - | - - |
| Samoa | - | - - | - | - - | - | - - | - | - - |
| Tonga | - | - - | - | - - | - | - - | - | - - |
| Tuvalu | - | - - | - | - - | - | - - | - | - - |

†Low-grade lesions: LSIL or CIN-1
‡High-grade lesions: CIN-2, CIN-3, CIS or HSIL

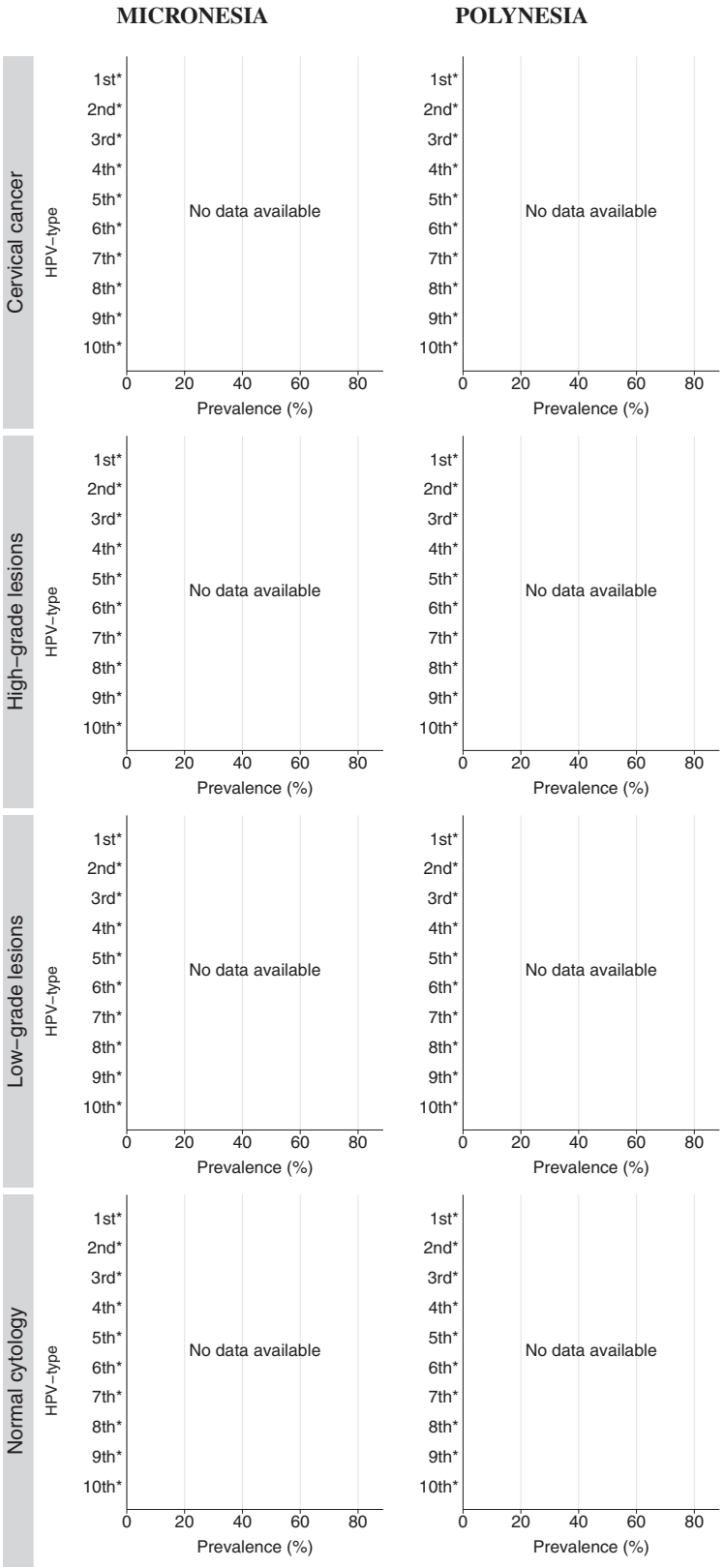
**Fig. 3. Ten most frequent HPV types in women with and without cervical disease in Oceania**




*No data available. No more types than shown were tested or were positive.

*Sources of data: see Section III.Methods or visit http://www.who.int/hpvcentre*

**Fig. 3. Ten most frequent HPV types in women with and without cervical disease in Oceania (continued)**




*No data available. No more types than shown were tested or were positive.

# SECTION II. COUNTRIES

# AFGHANISTAN

has a population of 7.73 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 511 women are diagnosed with cervical cancer and 254 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in Afghanistan, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Afghanistan. However, in Southern Asia, the region Afghanistan belongs to, about 6.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 75.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 4.5 | 2.2 |
| Age-standardized rate | 6.9 | 3.6 |
| Cumulative risk 0-64 years (%) | 0.6 | 0.3 |
| SIR/SMR | 42 | 40 |
| Annual number of new cases/deaths | 511 | 254 |
| Ranking of cervical cancer (all ages) † | 4th | 5th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 5th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

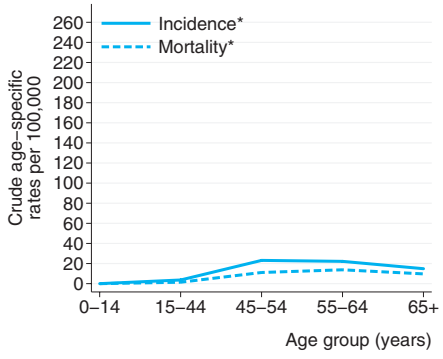



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

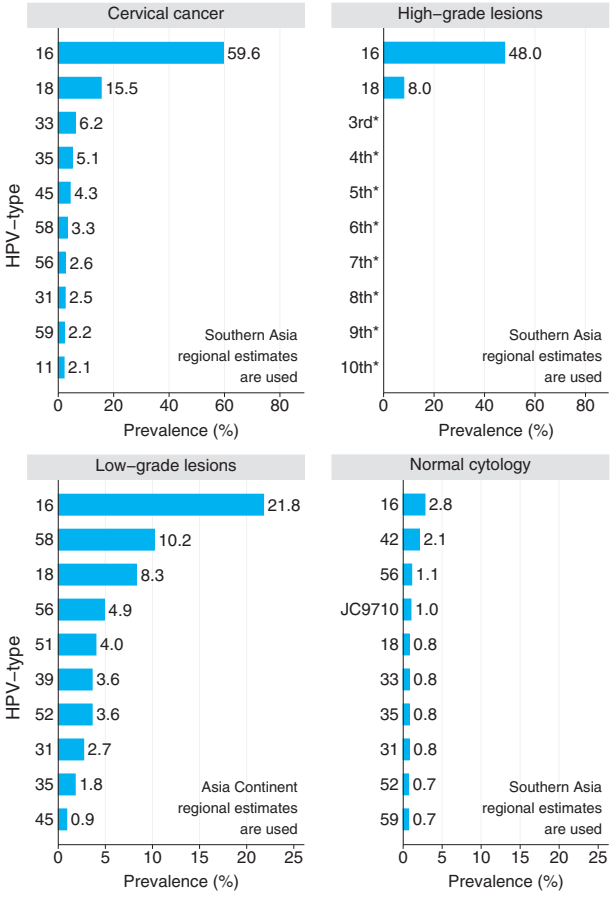
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 17 |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | 1.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 19164 | 6.6 (6.2-6.9) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions† | 25 | 64 (42.5-82.0) |
| Cervical cancer: any type† | 386 | 90.2* (86.7-92.9) |
| Cervical cancer: HPV 16/18† | 386 | 75.1 (70.5-79.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Asia regional estimate
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 77 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# ALBANIA

has a population of 1.17 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 389 women are diagnosed with cervical cancer and 146 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Albania, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Albania. However, in Southern Europe, the region Albania belongs to, about 5.7% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 65.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 25.1 | 9.4 |
| Age-standardized rate | 25.2 | 9.8 |
| Cumulative risk 0-64 years (%) | 1.9 | 0.6 |
| SIR/SMR | 163 | 112 |
| Annual number of new cases/deaths | 389 | 146 |
| Ranking of cervical cancer (all ages) † | 2nd | 4th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

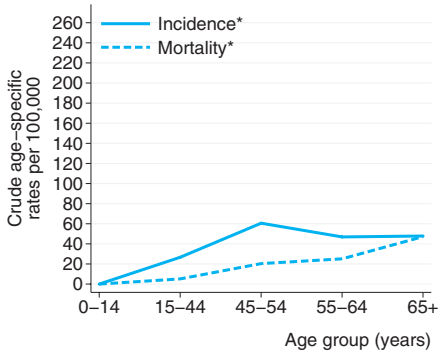



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 18 |
| Fertility rate (live births per women) | 2.1 |
| Oral Contraceptive Use (%) | 1.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4884 | 5.7 (5.0-6.3) |
| Low-grade lesions† | 3391 | 66.6 (64.9-68.1) |
| High-grade lesions† | 650 | 81.1 (77.9-84.0) |
| Cervical cancer: any type† | 732 | 83.7* (80.9-86.3) |
| Cervical cancer: HPV 16/18† | 732 | 65.3 (61.7-68.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

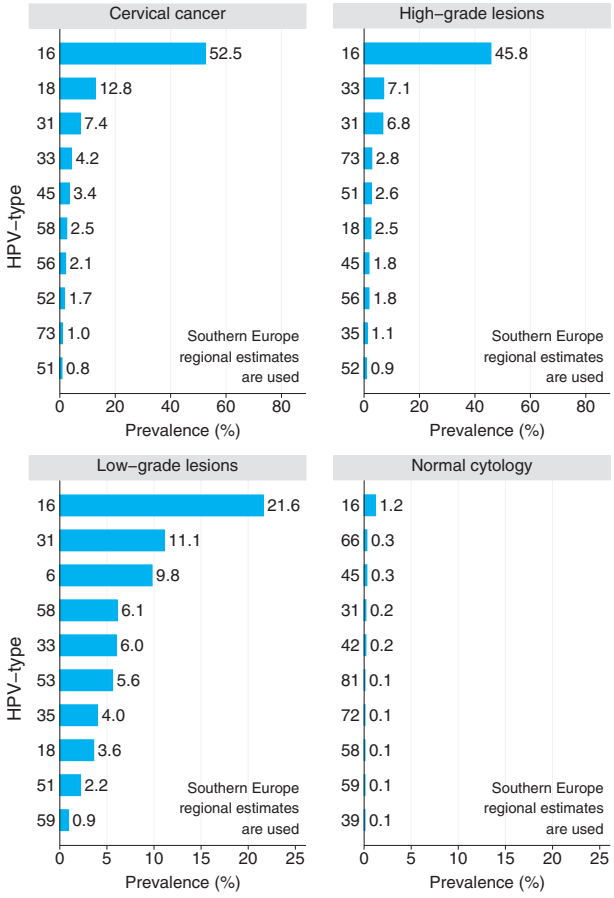
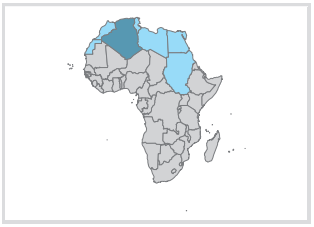



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# ALGERIA



has a population of 11.51 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1726 women are diagnosed with cervical cancer and 1391 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Algeria, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Algeria. However, in Northern Africa, the region Algeria belongs to, about 21.5% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Algeria 77.0% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 11.2 | 9 |
| Age-standardized rate | 15.6 | 12.7 |
| Cumulative risk 0-64 years (%) | 1.3 | 1 |
| SIR/SMR | 89 | 137 |
| Annual number of new cases/deaths | 1726 | 1391 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

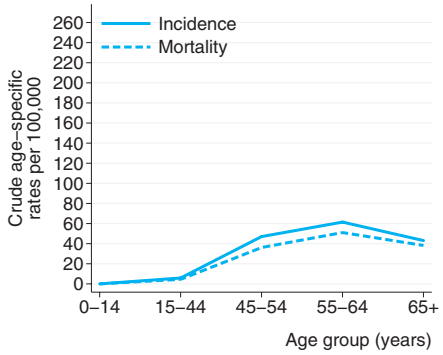



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

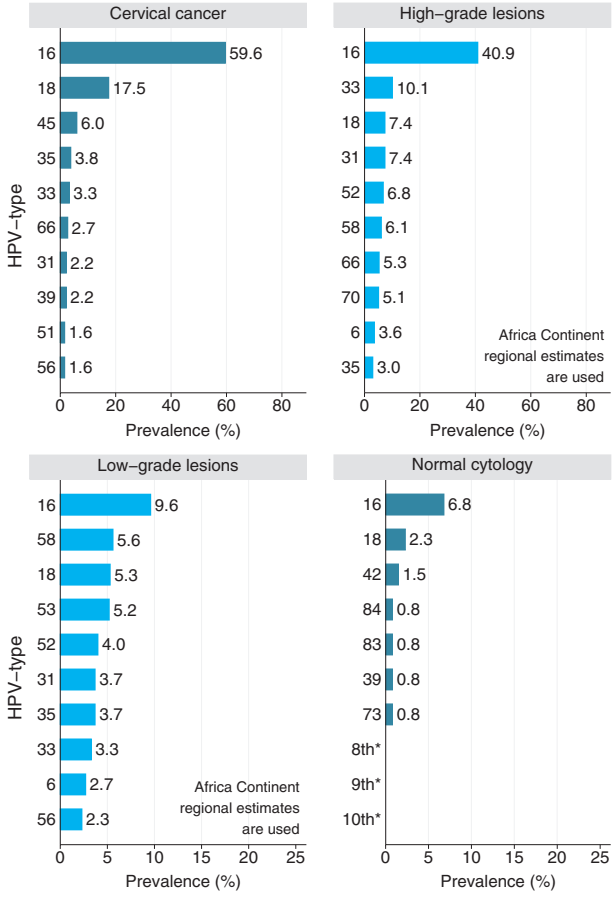
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 0.4 |
| Fertility rate (live births per women) | 3.1 |
| Oral Contraceptive Use (%) | 44.3 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 172 | 21.5 (15.6-28.4) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type | 183 | 96.2* (92.3-98.4) |
| Cervical cancer: HPV 16/18 | 183 | 77.0 (70.3-82.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Northern Africa regional estimate
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# ANDORRA

Data is not yet available on the burden of cervical cancer in Andorra. However, in Southern Europe, the region Andorra belongs to, current estimates indicate that every year 10641 women are diagnosed with cervical cancer and 4131 die from the disease. Cervical cancer ranks as the 7th most frequent cancer in women in Southern Europe, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Andorra. However, in Southern Europe about 5.7% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 65.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

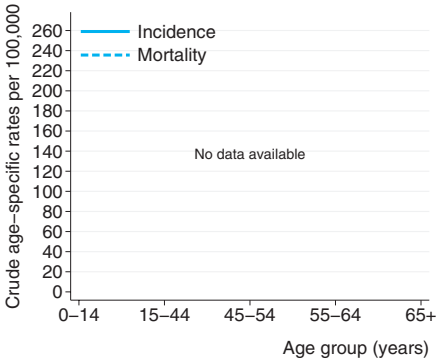



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4884 | 5.7 (5.0-6.3) |
| Low-grade lesions† | 3391 | 66.6 (64.9-68.1) |
| High-grade lesions† | 650 | 81.1 (77.9-84.0) |
| Cervical cancer: any type† | 732 | 83.7* (80.9-86.3) |
| Cervical cancer: HPV 16/18† | 732 | 65.3 (61.7-68.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

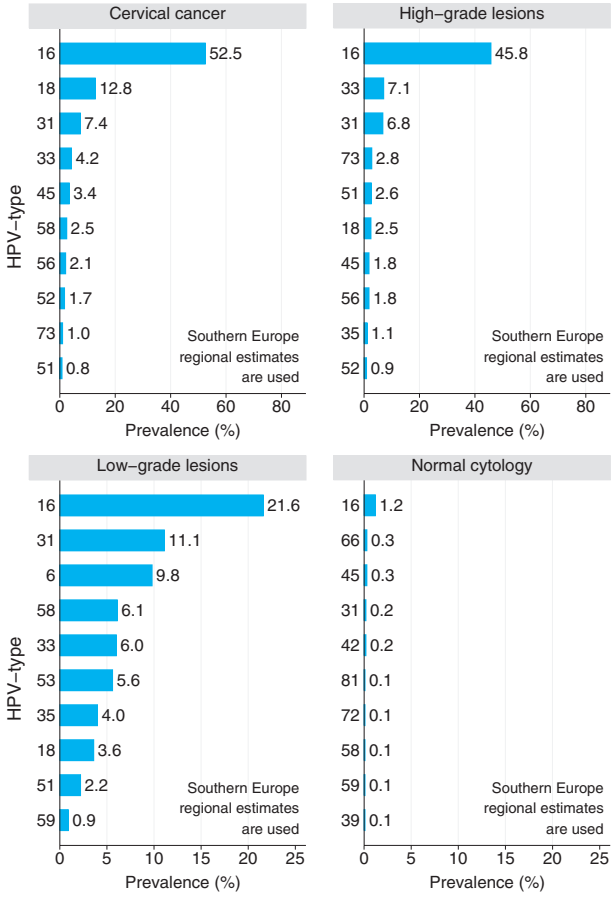
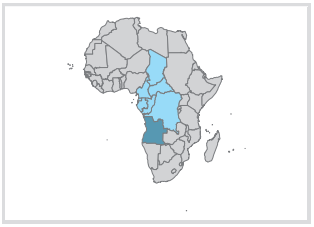



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 93 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# ANGOLA



has a population of 4.37 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1158 women are diagnosed with cervical cancer and 926 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Angola, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Angola. However, in Africa Continent about 23.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 16.4 | 13.2 |
| Age-standardized rate | 28.6 | 23.2 |
| Cumulative risk 0-64 years (%) | 2.2 | 1.8 |
| SIR/SMR | 167 | 259 |
| Annual number of new cases/deaths | 1158 | 926 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

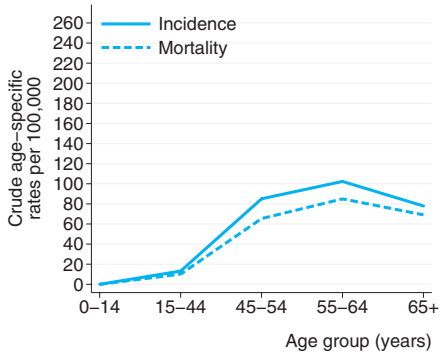



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 3.7 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | 2.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 6226 | 23.0 (21.9-24.0) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type‡ | 1339 | 93.9* (92.5-95.1) |
| Cervical cancer: HPV 16/18‡ | 1339 | 70.1 (67.5-72.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

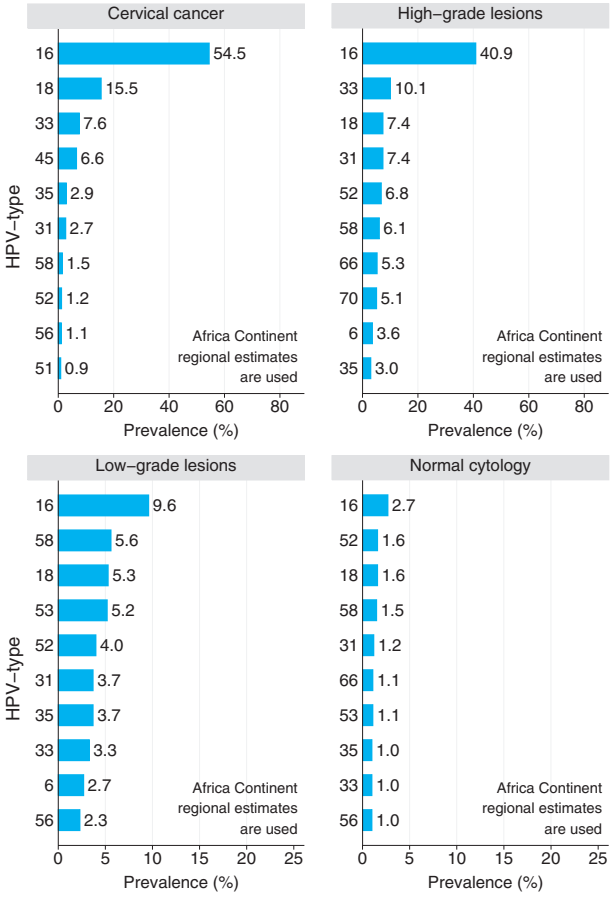



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 44 |
| Percentage of districts with >=80% DTP3 coverage | 4 |

DTP: Diphtheria, Tetanus and Pertussis

# ANTIGUA & BARBUDA

Data is not yet available on the burden of cervical cancer in Antigua & Barbuda. However, in Caribbean, the region Antigua & Barbuda belongs to, current estimates indicate that every year 6369 women are diagnosed with cervical cancer and 3113 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Caribbean, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Antigua & Barbuda. However, in Americas Continent about 15.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Caribbean about 64.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

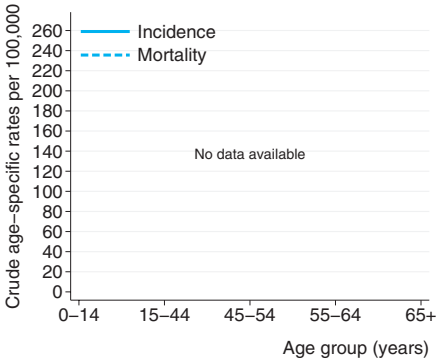



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

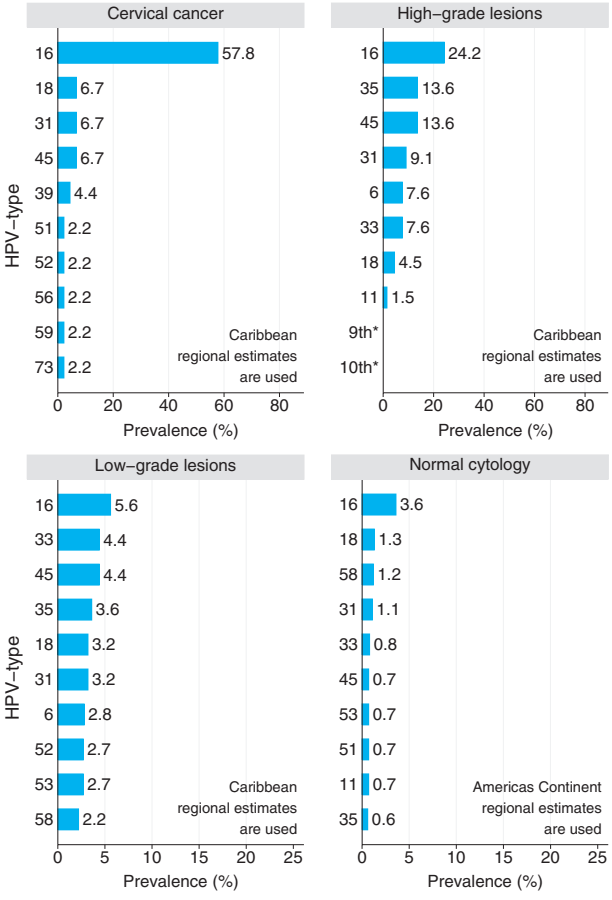
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | 26.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 40399 | 15.6 (15.2-15.9) |
| Low-grade lesions† | 248 | 60.9 (54.5-67.0) |
| High-grade lesions† | 66 | 80.3 (68.7-89.1) |
| Cervical cancer: any type† | 45 | 97.8* (88.2-99.9) |
| Cervical cancer: HPV 16/18† | 45 | 64.4 (48.8-78.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Caribbean regional estimate
‡Americas Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# ARGENTINA

has a population of 14.76 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 4924 women are diagnosed with cervical cancer and 1679 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Argentina, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 15.4% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 77.9% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 25.5 | 8.7 |
| Age-standardized rate | 23.2 | 7.8 |
| Cumulative risk 0-64 years (%) | 1.7 | 0.6 |
| SIR/SMR | 143 | 84 |
| Annual number of new cases/deaths | 4924 | 1679 |
| Ranking of cervical cancer (all ages) † | 2nd | 4th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

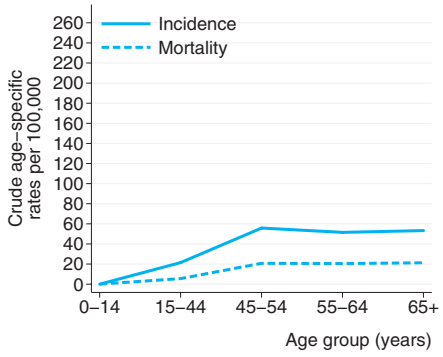



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

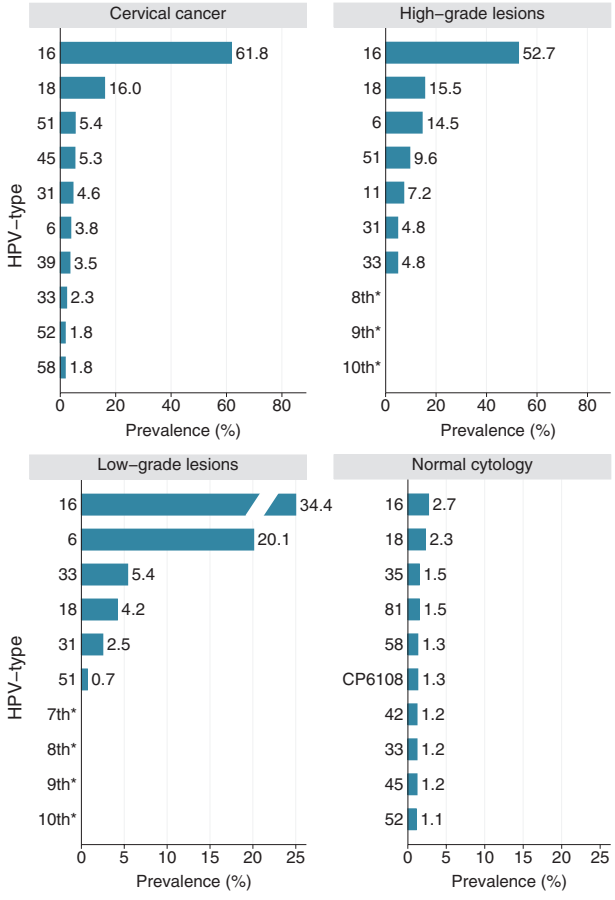
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.6 |
| Smoking prevalence in women (%) | 24.9 |
| Fertility rate (live births per women) | 2.5 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 843 | 15.4 (13.0-18.0) |
| Low-grade lesions | 334 | 82.9 (78.5-86.8) |
| High-grade lesions | 207 | 94.7 (90.7-97.3) |
| Cervical cancer: any type | 131 | 97.7* (93.5-99.5) |
| Cervical cancer: HPV 16/18 | 131 | 77.9 (69.8-84.6) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 91 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# ARMENIA

has a population of 1.31 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 380 women are diagnosed with cervical cancer and 130 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Armenia, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Armenia. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 19.6 | 6.7 |
| Age-standardized rate | 16.8 | 5.6 |
| Cumulative risk 0-64 years (%) | 1.2 | 0.4 |
| SIR/SMR | 105 | 64 |
| Annual number of new cases/deaths | 380 | 130 |
| Ranking of cervical cancer (all ages) † | 2nd | 6th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

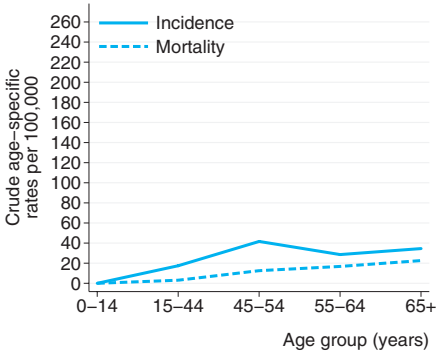



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 2.4 |
| Fertility rate (live births per women) | 1.9 |
| Oral Contraceptive Use (%) | 1.1 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

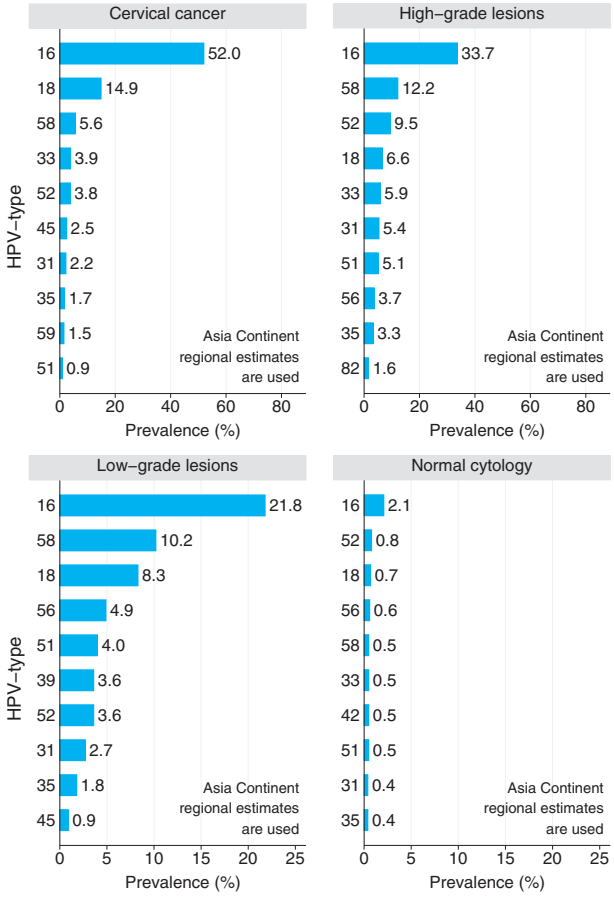



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 87 |
| Percentage of districts with >=80% DTP3 coverage | 88 |

DTP: Diphtheria, Tetanus and Pertussis

# AUSTRALIA

has a population of 8.27 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 835 women are diagnosed with cervical cancer and 249 die from the disease. Cervical cancer ranks as the 11th most frequent cancer in women in Australia, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Australia , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Australia 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 8.5 | 2.5 |
| Age-standardized rate | 6.9 | 1.7 |
| Cumulative risk 0-64 years (%) | 0.5 | 0.1 |
| SIR/SMR | 41 | 21 |
| Annual number of new cases/deaths | 835 | 249 |
| Ranking of cervical cancer (all ages) † | 11th | 17th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 7th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

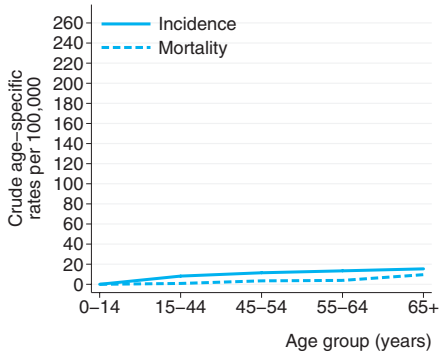



**Table 2. Cervical screening coverage**

| |
|---|
| 61.8% (2000-2001) |

**Table 3. Factors contributing to cervical cancer**

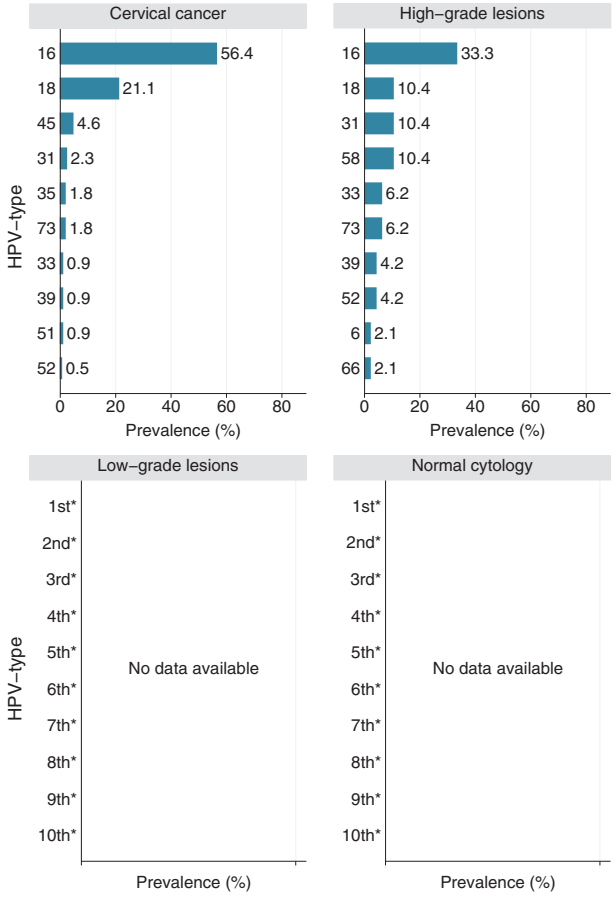
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 16.3 |
| Fertility rate (live births per women) | 1.7 |
| Oral Contraceptive Use (%) | 24.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18 | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 92 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# AUSTRIA

has a population of 3.57 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 610 women are diagnosed with cervical cancer and 295 die from the disease. Cervical cancer ranks as the 9th most frequent cancer in women in Austria, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Austria. However, in Western Europe, the region Austria belongs to, about 6.1% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Austria 78.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 14.8 | 7.2 |
| Age-standardized rate | 10.9 | 4.1 |
| Cumulative risk 0-64 years (%) | 0.9 | 0.2 |
| SIR/SMR | 63 | 50 |
| Annual number of new cases/deaths | 610 | 295 |
| Ranking of cervical cancer (all ages) † | 9th | 8th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

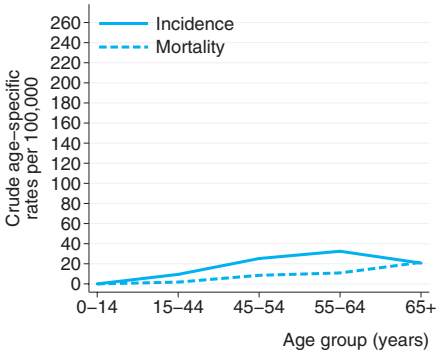



**Table 2. Cervical screening coverage**

| |
|---|
| Lifetime: 60% had 2 or more smears, 10% had only one smear, 30% never had any smears (1999) |

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.3 |
| Smoking prevalence in women (%) | 24.2 |
| Fertility rate (live births per women) | 1.3 |
| Oral Contraceptive Use (%) | 30.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 48701 | 6.1 (5.9-6.4) |
| Low-grade lesions† | 312 | 68.6 (63.1-73.7) |
| High-grade lesions† | 1664 | 93.3 (92.0-94.5) |
| Cervical cancer: any type | 200 | 90.5* (85.6-94.2) |
| Cervical cancer: HPV 16/18 | 200 | 78.5 (72.2-84.0) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

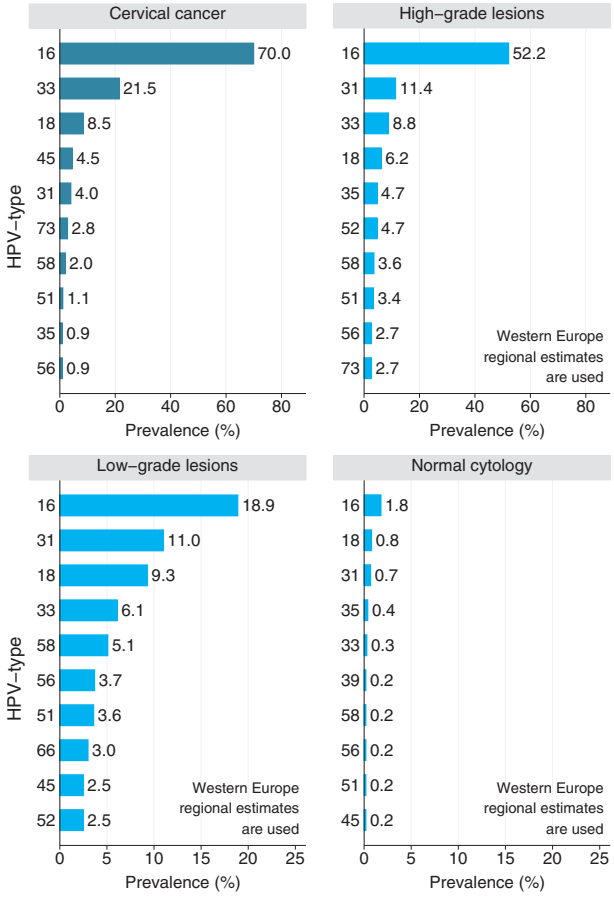



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 83 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# AZERBAIJAN

has a population of 3.28 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 345 women are diagnosed with cervical cancer and 113 die from the disease. Cervical cancer ranks as the 5th most frequent cancer in women in Azerbaijan, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Azerbaijan. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 8.4 | 2.8 |
| Age-standardized rate | 8.2 | 2.8 |
| Cumulative risk 0-64 years (%) | 0.6 | 0.2 |
| SIR/SMR | 53 | 31 |
| Annual number of new cases/deaths | 345 | 113 |
| Ranking of cervical cancer (all ages) † | 5th | 8th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 8th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

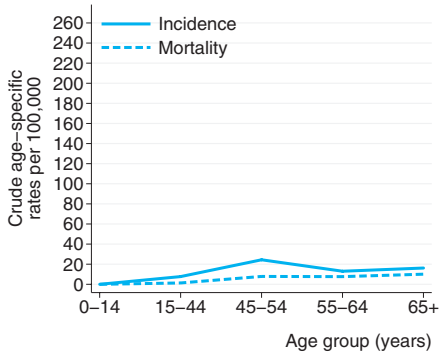



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 0.6 |
| Fertility rate (live births per women) | 2.1 |
| Oral Contraceptive Use (%) | 1.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

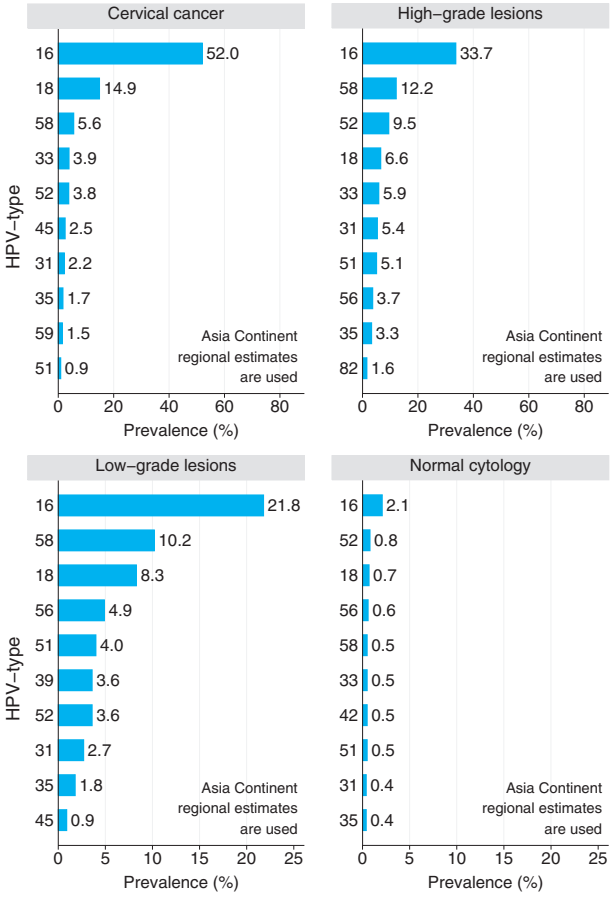



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | 97 |

DTP: Diphtheria, Tetanus and Pertussis

# BAHAMAS

has a population of 120667 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 25 women are diagnosed with cervical cancer and 9 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Bahamas, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Bahamas. However, in Americas Continent about 15.6% of women in the general population are estimated to harbour cervical HPV infection at a given time. In Caribbean, the region Bahamas belongs to, about 64.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 15.7 | 5.7 |
| Age-standardized rate | 16.7 | 6.2 |
| Cumulative risk 0-64 years (%) | 1.1 | 0.4 |
| SIR/SMR | 103 | 69 |
| Annual number of new cases/deaths | 25 | 9 |
| Ranking of cervical cancer (all ages) † | 2nd | 3rd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

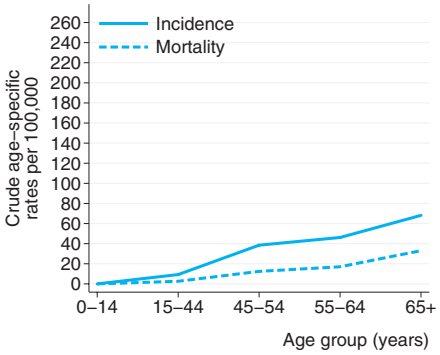



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

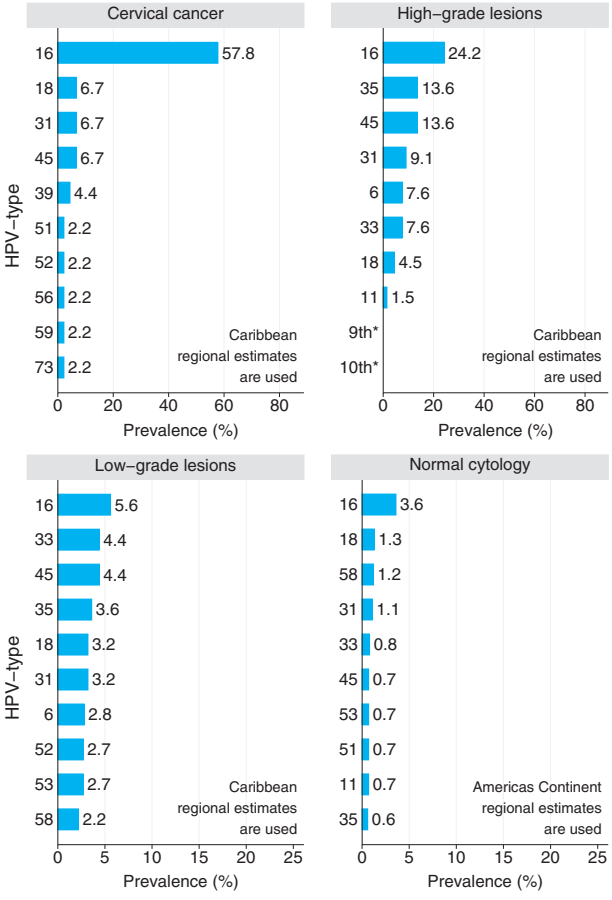
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 3.3 |
| Smoking prevalence in women (%) | 3.8 |
| Fertility rate (live births per women) | 2.3 |
| Oral Contraceptive Use (%) | 31.5 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 40399 | 15.6 (15.2-15.9) |
| Low-grade lesions† | 248 | 60.9 (54.5-67.0) |
| High-grade lesions† | 66 | 80.3 (68.7-89.1) |
| Cervical cancer: any type† | 45 | 97.8* (88.2-99.9) |
| Cervical cancer: HPV 16/18† | 45 | 64.4 (48.8-78.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Caribbean regional estimate
‡Americas Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# BAHRAIN

has a population of 215948 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 17 women are diagnosed with cervical cancer and 9 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in Bahrain, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Bahrain. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 6 | 3.1 |
| Age-standardized rate | 8.5 | 4.8 |
| Cumulative risk 0-64 years (%) | 0.7 | 0.4 |
| SIR/SMR | 44 | 46 |
| Annual number of new cases/deaths | 17 | 9 |
| Ranking of cervical cancer (all ages) † | 4th | 5th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

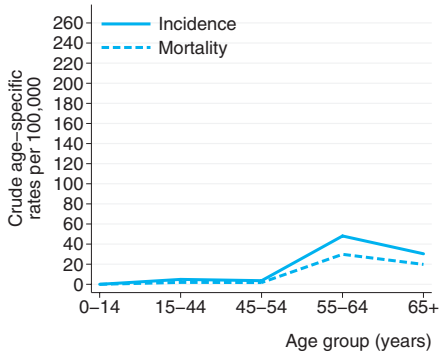



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 3.1 |
| Fertility rate (live births per women) | 2.8 |
| Oral Contraceptive Use (%) | 10.9 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

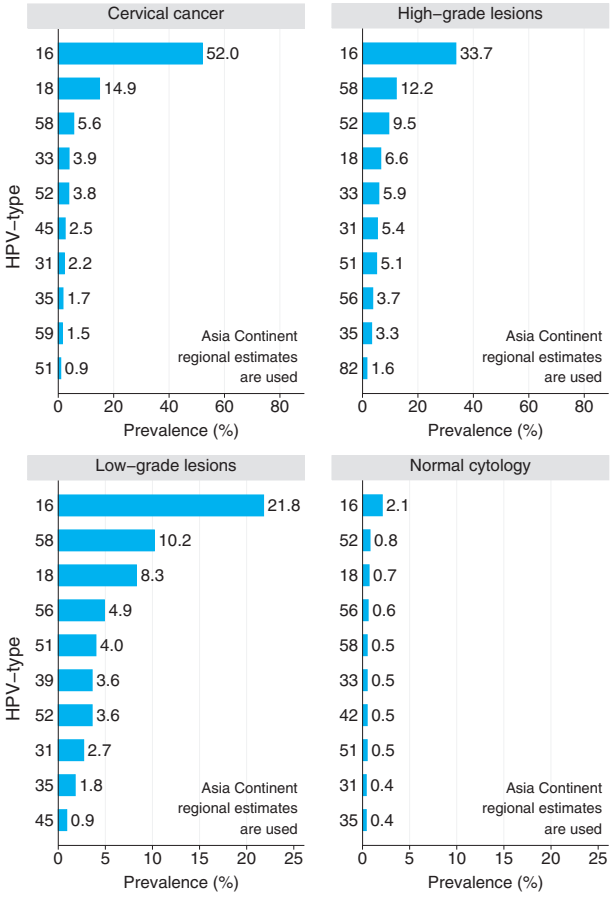



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# BANGLADESH

has a population of 44.78 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 12931 women are diagnosed with cervical cancer and 6561 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Bangladesh, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Bangladesh. However, in Southern Asia, the region Bangladesh belongs to, about 6.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 75.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 18.6 | 9.4 |
| Age-standardized rate | 27.6 | 14.8 |
| Cumulative risk 0-64 years (%) | 2.2 | 1.2 |
| SIR/SMR | 161 | 160 |
| Annual number of new cases/deaths | 12931 | 6561 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

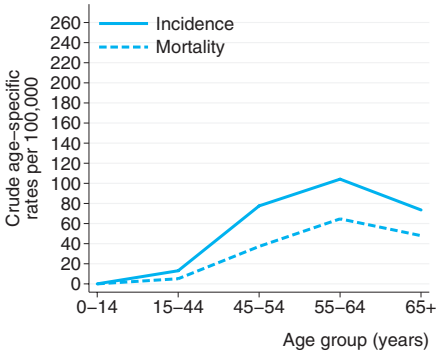



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

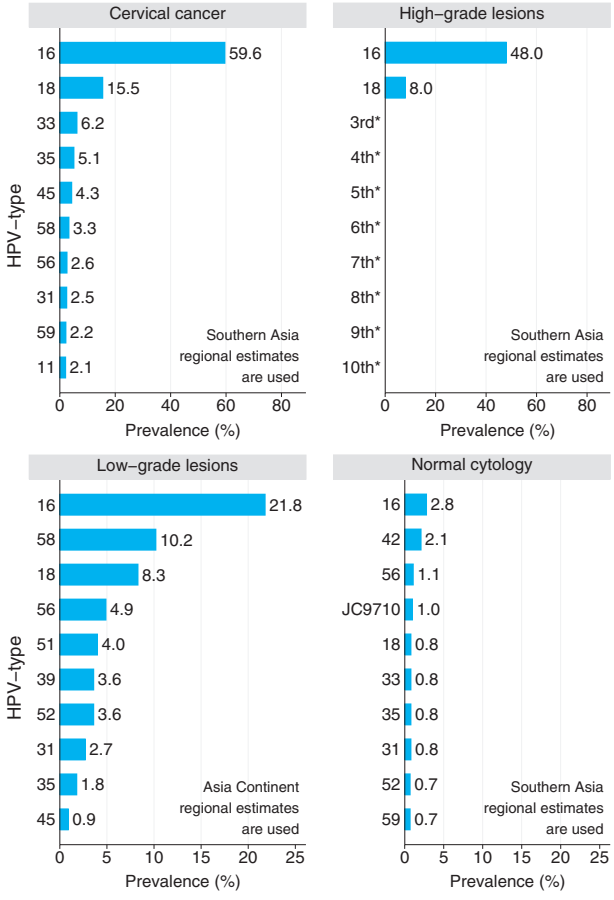
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 26.7 |
| Fertility rate (live births per women) | 3.4 |
| Oral Contraceptive Use (%) | 26.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 19164 | 6.6 (6.2-6.9) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions† | 25 | 64 (42.5-82.0) |
| Cervical cancer: any type† | 386 | 90.2* (86.7-92.9) |
| Cervical cancer: HPV 16/18† | 386 | 75.1 (70.5-79.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Asia regional estimate
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 88 |
| Percentage of districts with >=80% DTP3 coverage | 80 |

DTP: Diphtheria, Tetanus and Pertussis

# BARBADOS

has a population of 114483 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 46 women are diagnosed with cervical cancer and 18 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Barbados, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Barbados. However, in Americas Continent about 15.6% of women in the general population are estimated to harbour cervical HPV infection at a given time. In Caribbean, the region Barbados belongs to, about 64.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 32.5 | 12.9 |
| Age-standardized rate | 24.9 | 9.4 |
| Cumulative risk 0-64 years (%) | 1.6 | 0.5 |
| SIR/SMR | 168 | 116 |
| Annual number of new cases/deaths | 46 | 18 |
| Ranking of cervical cancer (all ages) † | 2nd | 3rd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

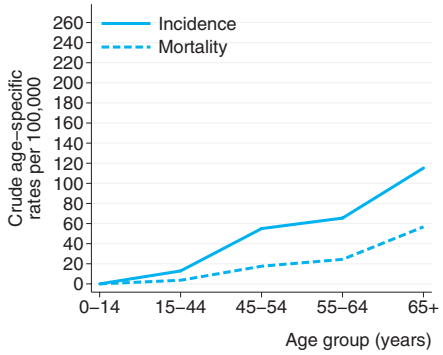



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

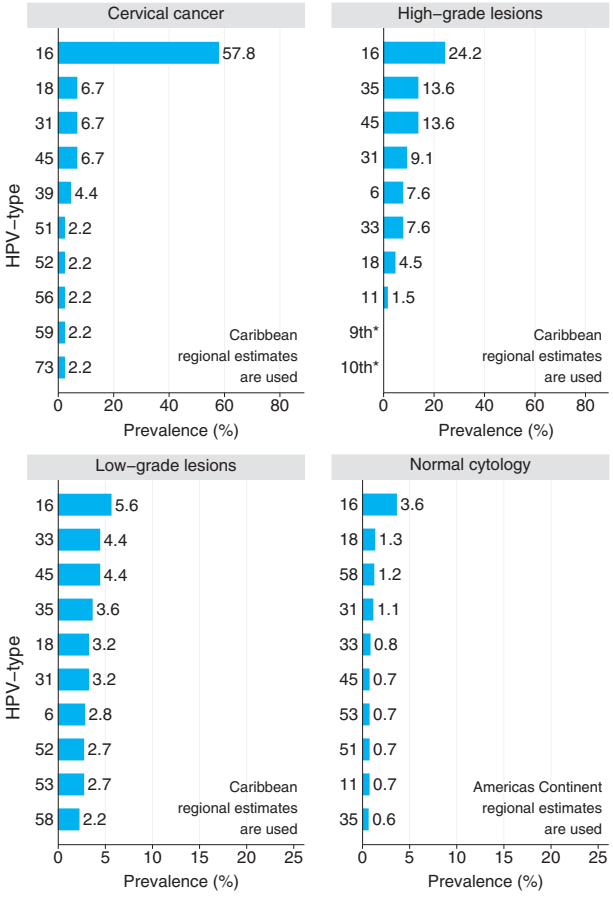
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.5 |
| Smoking prevalence in women (%) | 0.8 |
| Fertility rate (live births per women) | 1.6 |
| Oral Contraceptive Use (%) | 26.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 40399 | 15.6 (15.2-15.9) |
| Low-grade lesions† | 248 | 60.9 (54.5-67.0) |
| High-grade lesions† | 66 | 80.3 (68.7-89.1) |
| Cervical cancer: any type† | 45 | 97.8* (88.2-99.9) |
| Cervical cancer: HPV 16/18† | 45 | 64.4 (48.8-78.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Caribbean regional estimate
‡Americas Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 84 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# BELARUS

has a population of 4.48 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1086 women are diagnosed with cervical cancer and 436 die from the disease. Cervical cancer ranks as the 5th most frequent cancer in women in Belarus, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Belarus. However, in Eastern Europe, the region Belarus belongs to, about 29.1% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 20.2 | 8.1 |
| Age-standardized rate | 13.1 | 5.2 |
| Cumulative risk 0-64 years (%) | 0.9 | 0.3 |
| SIR/SMR | 90 | 61 |
| Annual number of new cases/deaths | 1086 | 436 |
| Ranking of cervical cancer (all ages) † | 5th | 6th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

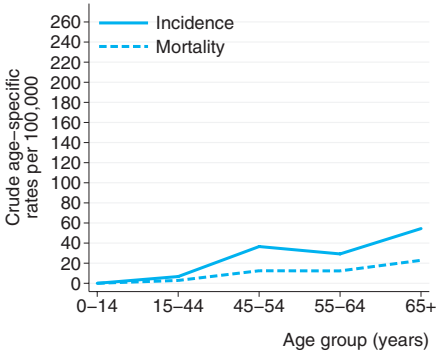



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.3 |
| Smoking prevalence in women (%) | 7.1 |
| Fertility rate (live births per women) | 1.3 |
| Oral Contraceptive Use (%) | 6.7 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 309 | 29.1 (24.1-34.5) |
| Low-grade lesions† | 87 | 52.9 (41.9-63.7) |
| High-grade lesions† | 163 | 75.5 (68.1-81.9) |
| Cervical cancer: any type† | 459 | 84.5* (80.9-87.7) |
| Cervical cancer: HPV 16/18† | 459 | 70.8 (66.4-74.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

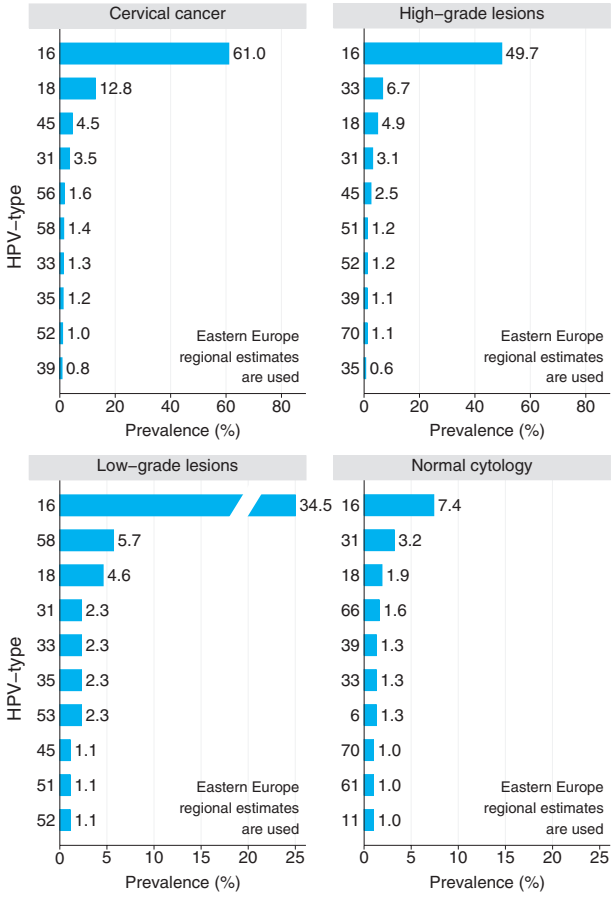



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# BELGIUM

has a population of 4.45 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 667 women are diagnosed with cervical cancer and 326 die from the disease. Cervical cancer ranks as the 7th most frequent cancer in women in Belgium, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 24.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 80.0% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 12.8 | 6.2 |
| Age-standardized rate | 9.3 | 3.4 |
| Cumulative risk 0-64 years (%) | 0.7 | 0.2 |
| SIR/SMR | 54 | 44 |
| Annual number of new cases/deaths | 667 | 326 |
| Ranking of cervical cancer (all ages) † | 7th | 10th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 4th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

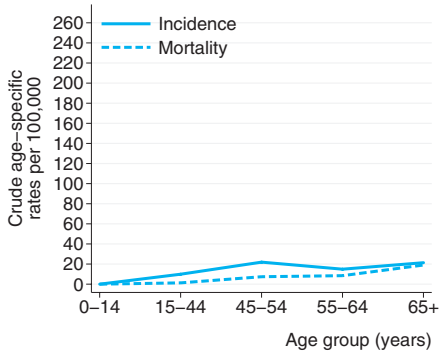



**Table 2. Cervical screening coverage**

74% in the last 3 years (Flemish region), 64% in the last 3 years (Walloon region)

**Table 3. Factors contributing to cervical cancer**

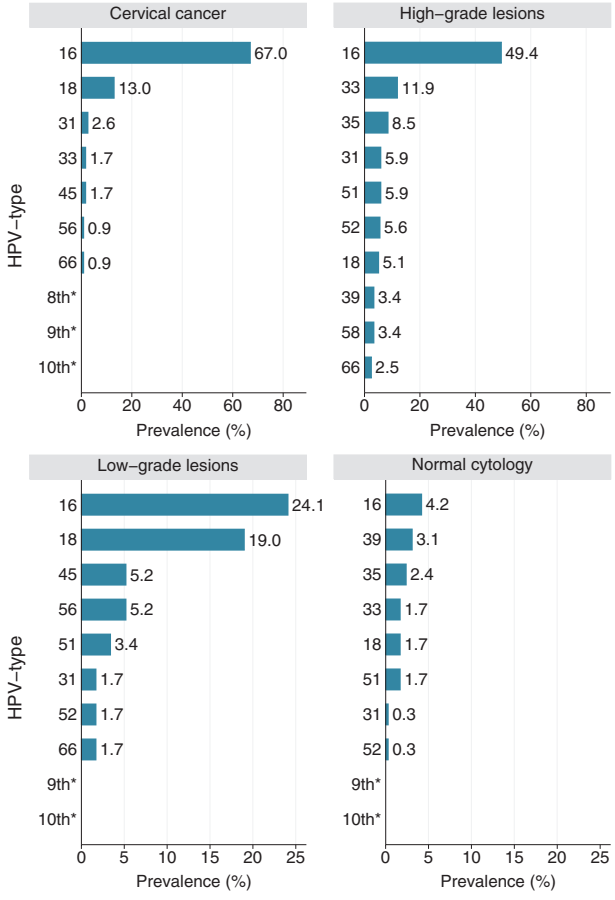
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.3 |
| Smoking prevalence in women (%) | 25 |
| Fertility rate (live births per women) | 1.5 |
| Oral Contraceptive Use (%) | 46.7 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 287 | 24.0 (19.2-29.4) |
| Low-grade lesions | 58 | 69 (55.5-80.5) |
| High-grade lesions | 354 | 90.7 (87.2-93.5) |
| Cervical cancer: any type | 115 | 87.8* (80.4-93.2) |
| Cervical cancer: HPV 16/18 | 115 | 80.0 (71.5-86.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 97 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# BELIZE

has a population of 84128 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 40 women are diagnosed with cervical cancer and 16 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Belize, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Belize. However, in Central America, the region Belize belongs to, about 20.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 58.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 34.6 | 14.6 |
| Age-standardized rate | 52.4 | 23 |
| Cumulative risk 0-64 years (%) | 3.9 | 1.5 |
| SIR/SMR | 300 | 244 |
| Annual number of new cases/deaths | 40 | 16 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

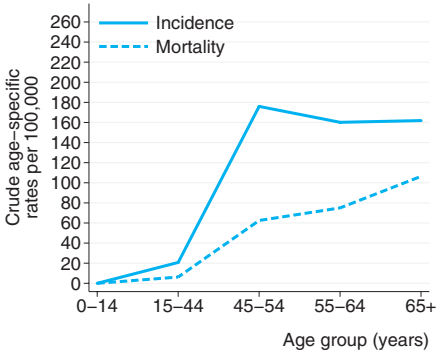



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 2.5 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 3.2 |
| Oral Contraceptive Use (%) | 14.9 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 10232 | 20.5 (19.7-21.3) |
| Low-grade lesions† | 390 | 55.1 (50.0-60.1) |
| High-grade lesions† | 280 | 86.8 (82.2-90.5) |
| Cervical cancer: any type† | 341 | 90.3* (86.7-93.2) |
| Cervical cancer: HPV 16/18† | 341 | 58.4 (52.9-63.6) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Central America regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

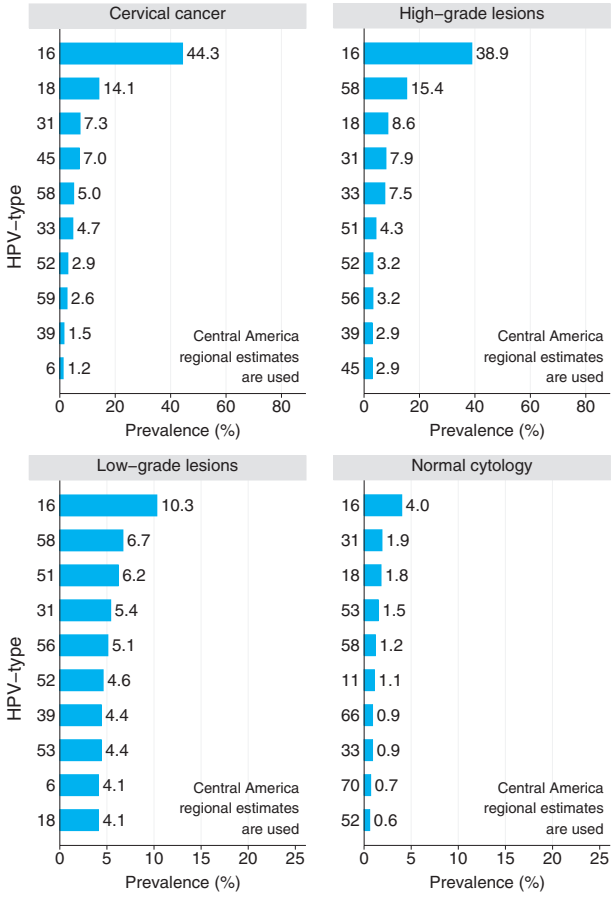
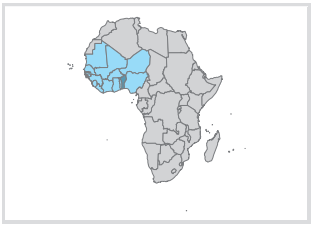



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# BENIN



has a population of 2.35 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 561 women are diagnosed with cervical cancer and 448 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Benin, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Benin. However, in Western Africa, the region Benin belongs to, about 16.5% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Benin 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 16.7 | 13.3 |
| Age-standardized rate | 29.3 | 23.8 |
| Cumulative risk 0-64 years (%) | 2.2 | 1.8 |
| SIR/SMR | 168 | 266 |
| Annual number of new cases/deaths | 561 | 448 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

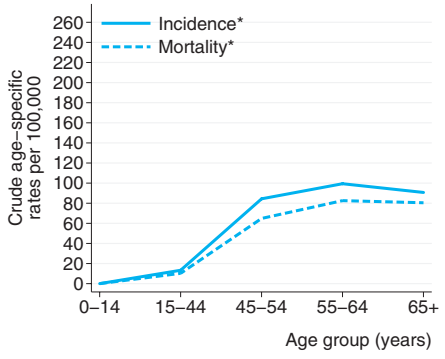



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

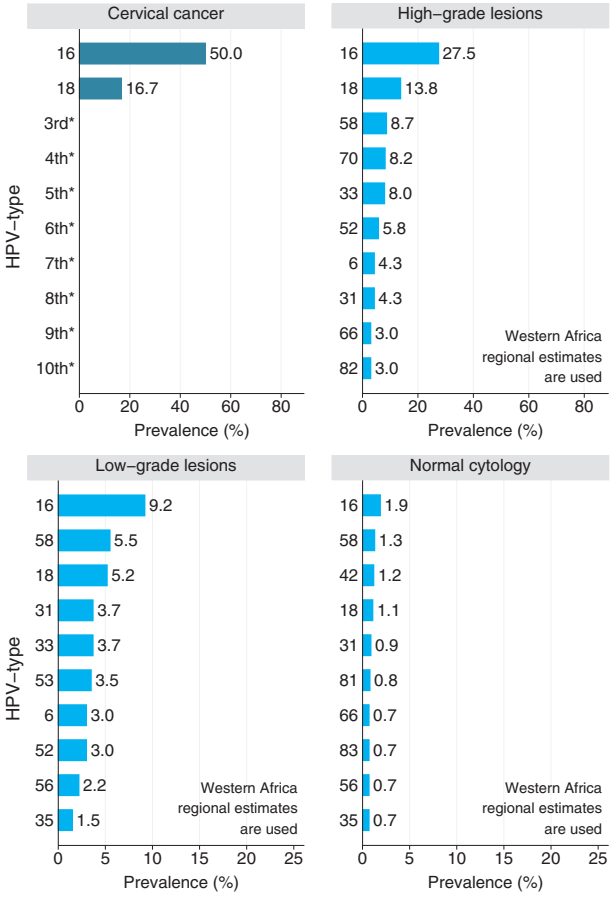
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.8 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 5.8 |
| Oral Contraceptive Use (%) | 1.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2641 | 16.5 (15.1-18.0) |
| Low-grade lesions† | 271 | 59 (52.9-65.0) |
| High-grade lesions† | 138 | 79.7 (72.0-86.1) |
| Cervical cancer: any type | 6 | 83.3* (35.9-99.6) |
| Cervical cancer: HPV 16/18 | 6 | 66.7 (22.3-95.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 93 |
| Percentage of districts with >=80% DTP3 coverage | 83 |

DTP: Diphtheria, Tetanus and Pertussis

# BHUTAN

has a population of 660332 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 200 women are diagnosed with cervical cancer and 105 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Bhutan, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Bhutan. However, in Southern Asia, the region Bhutan belongs to, about 6.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 75.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 18.5 | 9.6 |
| Age-standardized rate | 26.4 | 14.1 |
| Cumulative risk 0-64 years (%) | 2.1 | 1.1 |
| SIR/SMR | 157 | 154 |
| Annual number of new cases/deaths | 200 | 105 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

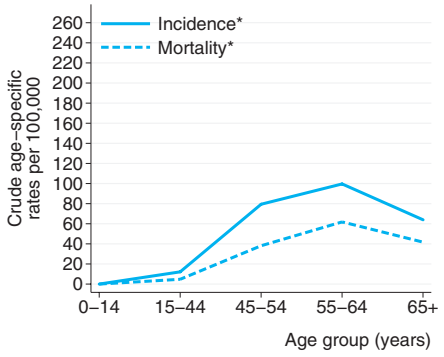



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

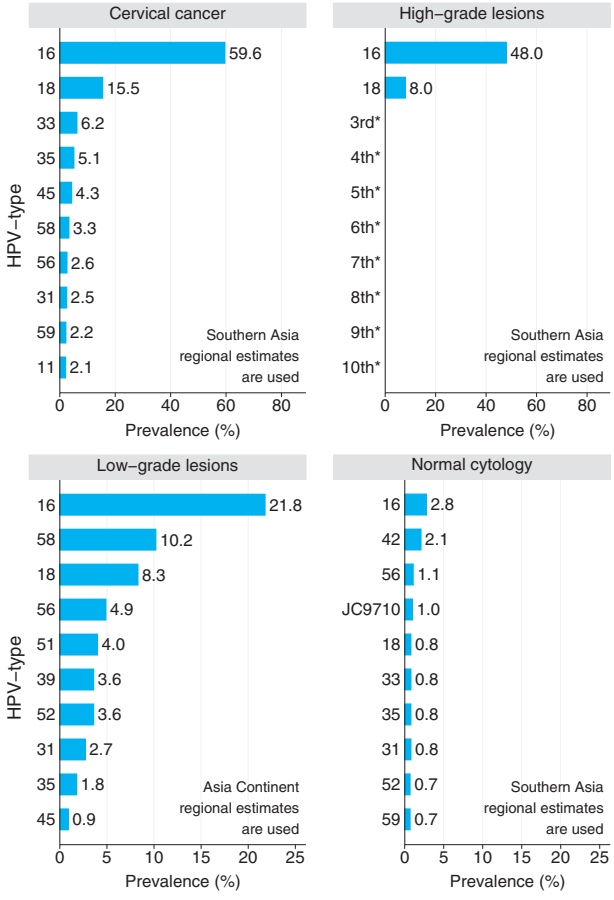
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 5.6 |
| Oral Contraceptive Use (%) | 2.4 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 19164 | 6.6 (6.2-6.9) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions† | 25 | 64 (42.5-82.0) |
| Cervical cancer: any type† | 386 | 90.2* (86.7-92.9) |
| Cervical cancer: HPV 16/18† | 386 | 75.1 (70.5-79.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Asia regional estimate
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# BOLIVIA

has a population of 2.89 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1831 women are diagnosed with cervical cancer and 987 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Bolivia, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Bolivia. However, in South America, the region Bolivia belongs to, about 14.3% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Bolivia 38.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 42 | 22.6 |
| Age-standardized rate | 55 | 30.4 |
| Cumulative risk 0-64 years (%) | 3.9 | 2.2 |
| SIR/SMR | 339 | 347 |
| Annual number of new cases/deaths | 1831 | 987 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

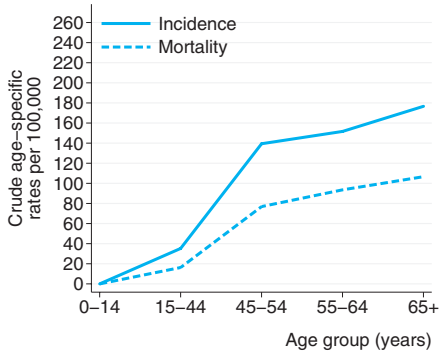



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

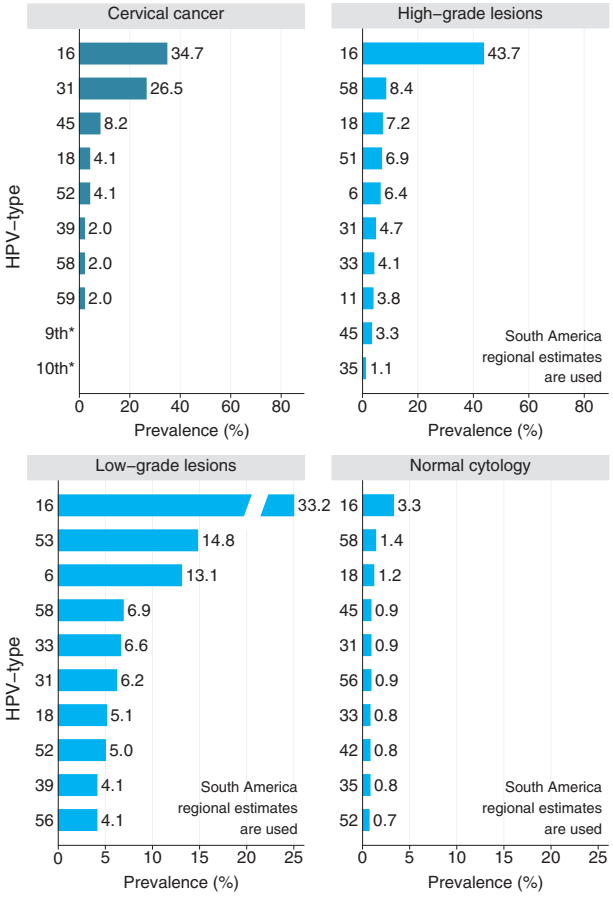
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 194 |
| Fertility rate (live births per women) | 4.4 |
| Oral Contraceptive Use (%) | 3.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4354 | 14.3 (13.3-15.4) |
| Low-grade lesions† | 548 | 79 (75.4-82.4) |
| High-grade lesions† | 487 | 80.1 (76.3-83.5) |
| Cervical cancer: any type | 49 | 95.9* (86.0-99.5) |
| Cervical cancer: HPV 16/18 | 49 | 38.8 (25.2-53.8) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South America regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 81 |
| Percentage of districts with >=80% DTP3 coverage | 60 |

DTP: Diphtheria, Tetanus and Pertussis

# BOSNIA & HERZEGOVINA

has a population of 1.70 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 545 women are diagnosed with cervical cancer and 227 die from the disease. Cervical cancer ranks as the 3rd most frequent cancer in women in Bosnia & Herzegovina, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Bosnia & Herzegovina. However, in Southern Europe, the region Bosnia & Herzegovina belongs to, about 5.7% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 65.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 26.6 | 11.1 |
| Age-standardized rate | 21.3 | 8 |
| Cumulative risk 0-64 years (%) | 1.6 | 0.5 |
| SIR/SMR | 126 | 92 |
| Annual number of new cases/deaths | 545 | 227 |
| Ranking of cervical cancer (all ages) † | 3rd | 4th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

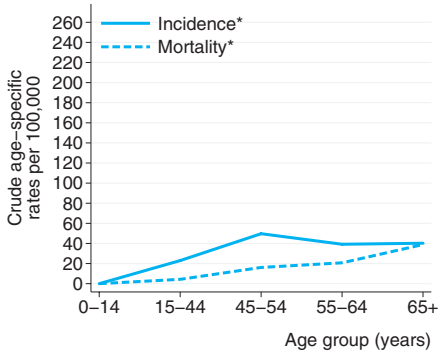



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 29.7 |
| Fertility rate (live births per women) | 1.6 |
| Oral Contraceptive Use (%) | 4.5 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4884 | 5.7 (5.0-6.3) |
| Low-grade lesions† | 3391 | 66.6 (64.9-68.1) |
| High-grade lesions† | 650 | 81.1 (77.9-84.0) |
| Cervical cancer: any type† | 732 | 83.7* (80.9-86.3) |
| Cervical cancer: HPV 16/18† | 732 | 65.3 (61.7-68.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

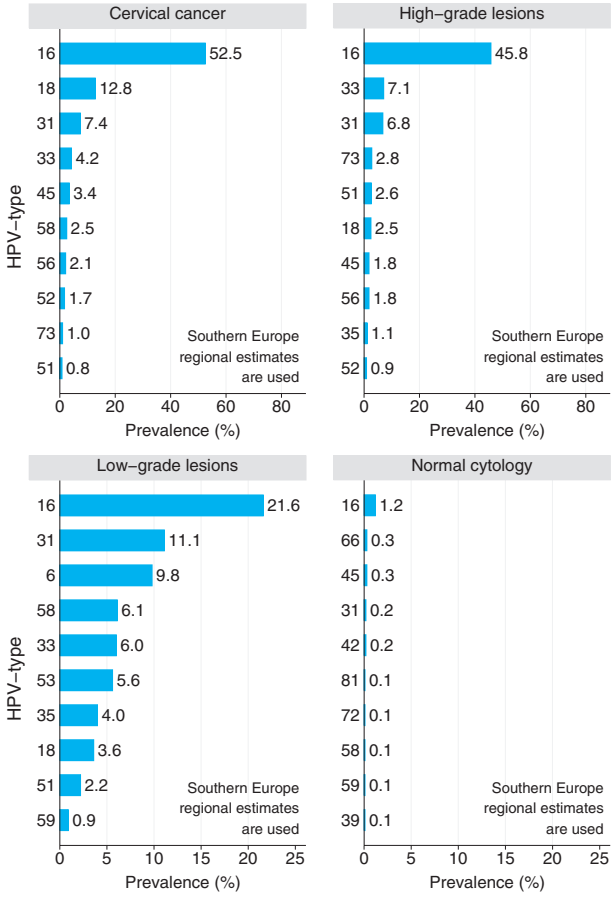
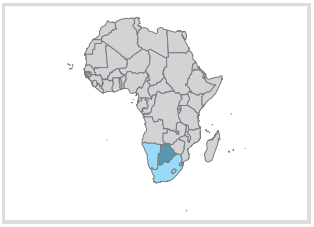



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 87 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# BOTSWANA



has a population of 567950 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 156 women are diagnosed with cervical cancer and 126 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Botswana, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Botswana. However, in Southern Africa, the region Botswana belongs to, about 15.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 63.0% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 19.8 | 15.9 |
| Age-standardized rate | 30.4 | 24.7 |
| Cumulative risk 0-64 years (%) | 2.2 | 1.8 |
| SIR/SMR | 177 | 275 |
| Annual number of new cases/deaths | 156 | 126 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 3rd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

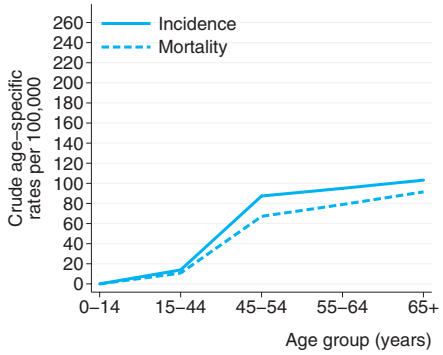



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

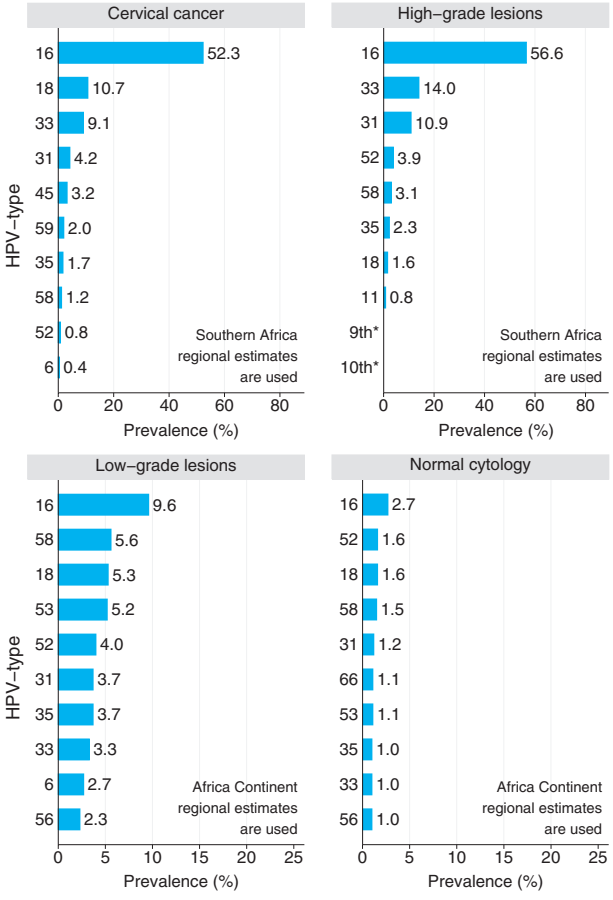
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 24.1 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 5.0 |
| Oral Contraceptive Use (%) | 14.7 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 1269 | 15.5 (13.6-17.6) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions† | 129 | 88.4 (81.5-93.3) |
| Cervical cancer: any type† | 308 | 93.8* (90.5-96.2) |
| Cervical cancer: HPV 16/18† | 308 | 63.0 (57.3-68.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Africa regional estimate
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 97 |
| Percentage of districts with >=80% DTP3 coverage | 96 |

DTP: Diphtheria, Tetanus and Pertussis

# BRAZIL

has a population of 69.05 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 19603 women are diagnosed with cervical cancer and 8286 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Brazil, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 17.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 69.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 22.2 | 9.4 |
| Age-standardized rate | 23.4 | 10.2 |
| Cumulative risk 0-64 years (%) | 1.8 | 0.7 |
| SIR/SMR | 144 | 113 |
| Annual number of new cases/deaths | 19603 | 8286 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

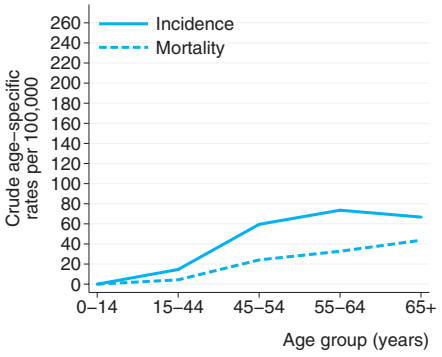



**Table 2. Cervical screening coverage**

68.9% ever screened among women aged 15-69 years in Sao Paulo: (1987); 65% among women aged 20-69 years in Pelotas (1992); 72% among women aged 20-69 years in Pelotas (2000)

**Table 3. Factors contributing to cervical cancer**

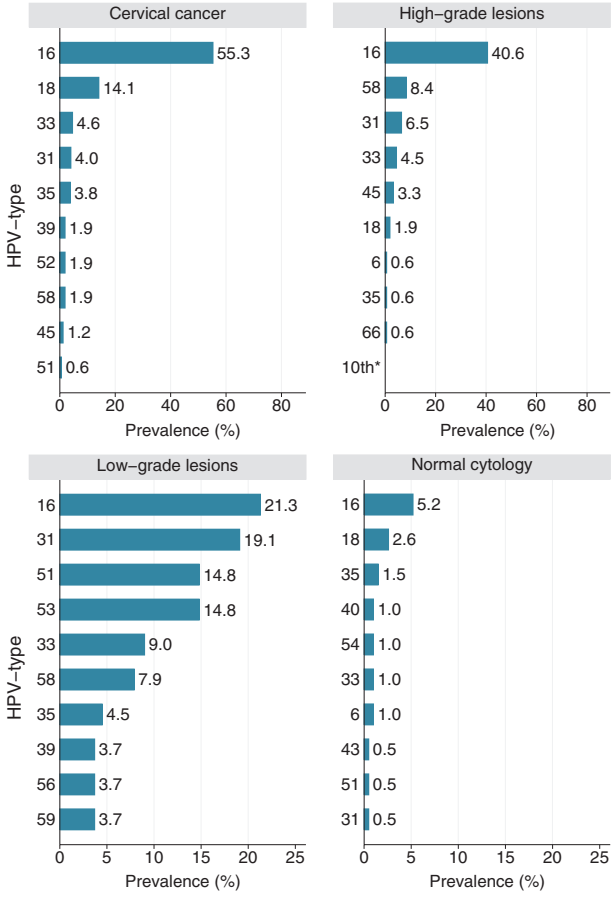
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.5 |
| Smoking prevalence in women (%) | 14 |
| Fertility rate (live births per women) | 2.6 |
| Oral Contraceptive Use (%) | 20.7 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 194 | 17.0 (12.0-23.1) |
| Low-grade lesions | 89 | 71.9 (61.4-80.9) |
| High-grade lesions | 155 | 74.2 (66.6-80.9) |
| Cervical cancer: any type | 347 | 86.2* (82.1-89.6) |
| Cervical cancer: HPV 16/18 | 347 | 69.5 (64.3-74.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 95 |

DTP: Diphtheria, Tetanus and Pertussis

# BRUNEI

has a population of 126527 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 26 women are diagnosed with cervical cancer and 13 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Brunei, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Brunei. However, in South-Eastern Asia, the region Brunei belongs to, about 6.2% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 71.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 16.5 | 8 |
| Age-standardized rate | 18.7 | 9.6 |
| Cumulative risk 0-64 years (%) | 1.4 | 0.7 |
| SIR/SMR | 118 | 111 |
| Annual number of new cases/deaths | 26 | 13 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

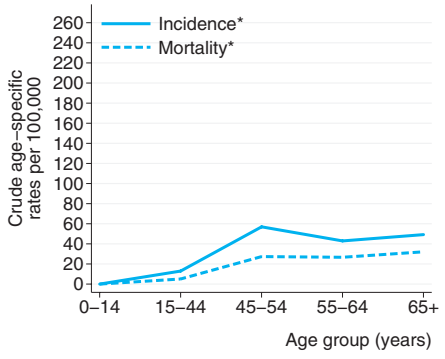



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

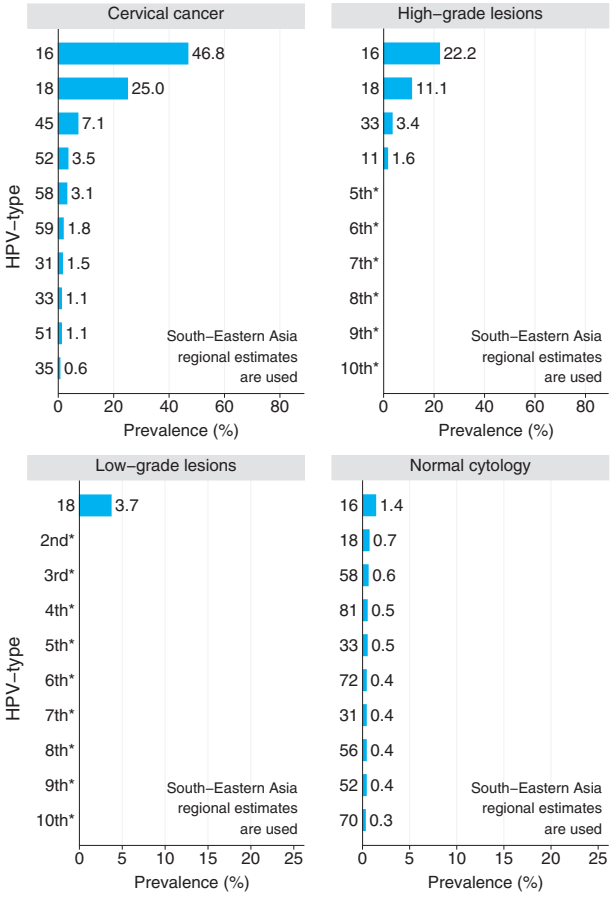
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 2.4 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4194 | 6.2 (5.5-6.9) |
| Low-grade lesions† | 27 | 33.3 (16.5-54.0) |
| High-grade lesions† | 207 | 61.8 (54.8-68.5) |
| Cervical cancer: any type† | 1090 | 92.1* (90.3-93.6) |
| Cervical cancer: HPV 16/18† | 1090 | 71.8 (69.1-74.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South-Eastern Asia regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



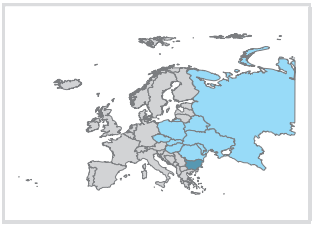

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# BULGARIA



has a population of 3.47 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 979 women are diagnosed with cervical cancer and 506 die from the disease. Cervical cancer ranks as the 3rd most frequent cancer in women in Bulgaria, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Bulgaria. However, in Eastern Europe, the region Bulgaria belongs to, about 29.1% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 24.4 | 12.6 |
| Age-standardized rate | 18.7 | 8 |
| Cumulative risk 0-64 years (%) | 1.4 | 0.5 |
| SIR/SMR | 101 | 87 |
| Annual number of new cases/deaths | 979 | 506 |
| Ranking of cervical cancer (all ages) † | 3rd | 5th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

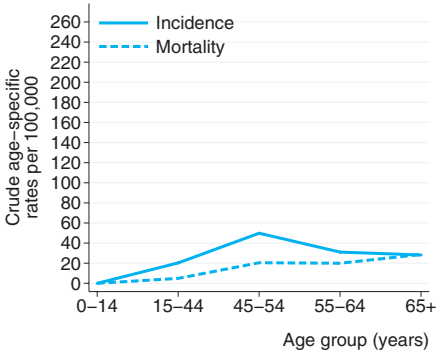



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 23 |
| Fertility rate (live births per women) | 1.2 |
| Oral Contraceptive Use (%) | 7.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 309 | 29.1 (24.1-34.5) |
| Low-grade lesions† | 87 | 52.9 (41.9-63.7) |
| High-grade lesions† | 163 | 75.5 (68.1-81.9) |
| Cervical cancer: any type† | 459 | 84.5* (80.9-87.7) |
| Cervical cancer: HPV 16/18† | 459 | 70.8 (66.4-74.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

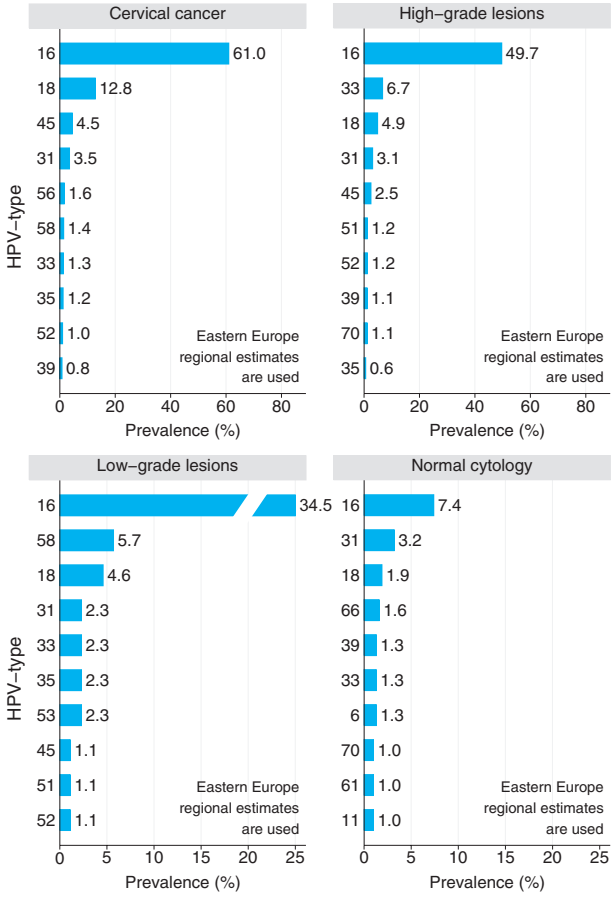
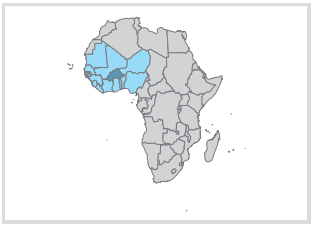



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# BURKINA FASO



has a population of 3.51 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 921 women are diagnosed with cervical cancer and 724 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Burkina Faso, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Burkina Faso. However, in Western Africa, the region Burkina Faso belongs to, about 16.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 50.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 14.6 | 11.5 |
| Age-standardized rate | 23.4 | 18.5 |
| Cumulative risk 0-64 years (%) | 1.9 | 1.5 |
| SIR/SMR | 150 | 227 |
| Annual number of new cases/deaths | 921 | 724 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

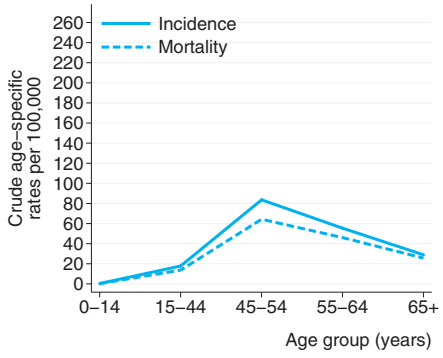



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 2.0 |
| Smoking prevalence in women (%) | 0.6 |
| Fertility rate (live births per women) | 6.8 |
| Oral Contraceptive Use (%) | 2.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2641 | 16.5 (15.1-18.0) |
| Low-grade lesions† | 271 | 59 (52.9-65.0) |
| High-grade lesions† | 138 | 79.7 (72.0-86.1) |
| Cervical cancer: any type† | 218 | 85.8* (80.4-90.1) |
| Cervical cancer: HPV 16/18† | 218 | 50.5 (43.6-57.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

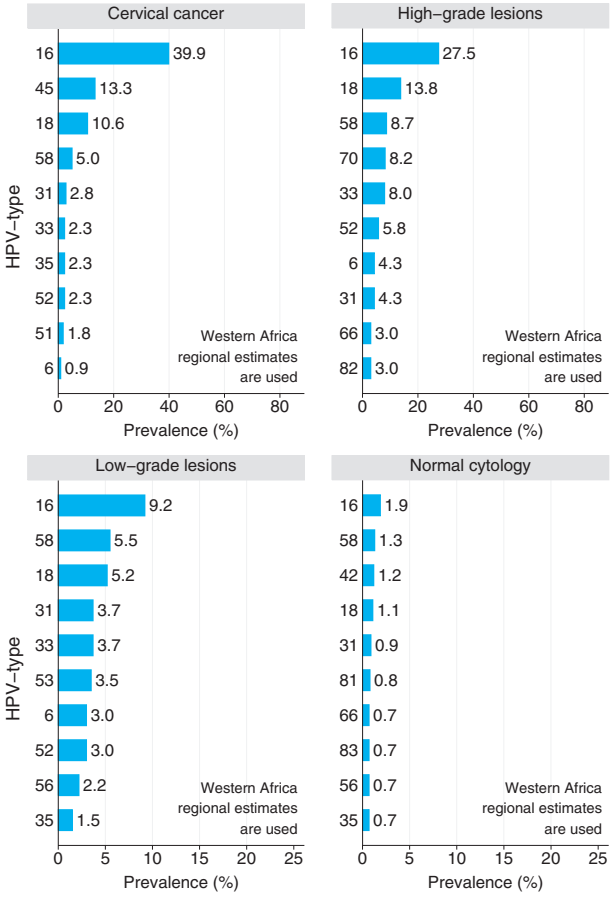
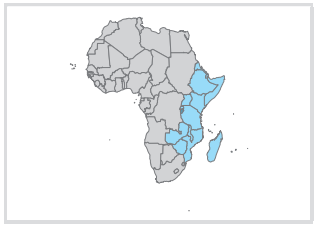



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | 95 |

DTP: Diphtheria, Tetanus and Pertussis

# BURUNDI



has a population of 2.17 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 899 women are diagnosed with cervical cancer and 722 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Burundi, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Burundi. However, in Eastern Africa, the region Burundi belongs to, about 35.4% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 81.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 26 | 20.9 |
| Age-standardized rate | 42.7 | 34.6 |
| Cumulative risk 0-64 years (%) | 3.2 | 2.6 |
| SIR/SMR | 251 | 391 |
| Annual number of new cases/deaths | 899 | 722 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

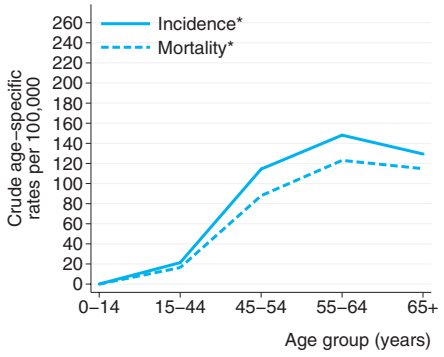



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 3.3 |
| Smoking prevalence in women (%) | 11.4 |
| Fertility rate (live births per women) | 7.0 |
| Oral Contraceptive Use (%) | 3.9 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2144 | 35.4 (33.4-37.5) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type† | 478 | 96.4* (94.4-97.9) |
| Cervical cancer: HPV 16/18† | 478 | 81.8 (78.0-85.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

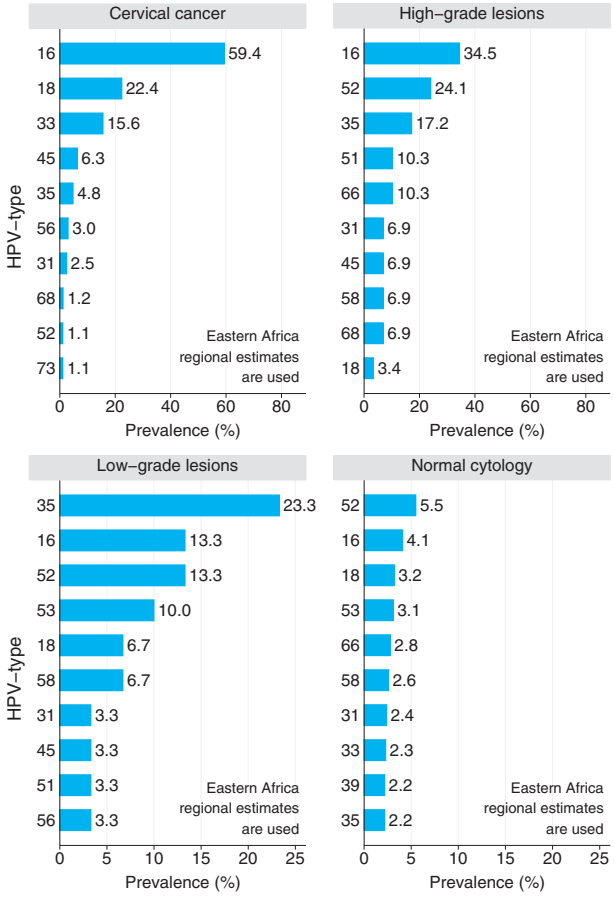



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 74 |
| Percentage of districts with >=80% DTP3 coverage | 71 |

DTP: Diphtheria, Tetanus and Pertussis

# CAMBODIA

has a population of 4.71 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1768 women are diagnosed with cervical cancer and 949 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Cambodia, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Cambodia. However, in South-Eastern Asia, the region Cambodia belongs to, about 6.2% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 71.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 25.3 | 13.5 |
| Age-standardized rate | 38.7 | 21.6 |
| Cumulative risk 0-64 years (%) | 2.8 | 1.5 |
| SIR/SMR | 219 | 225 |
| Annual number of new cases/deaths | 1768 | 949 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

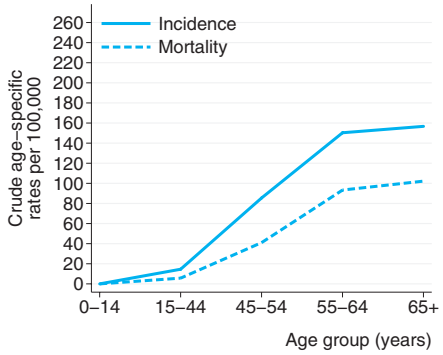



**Table 2. Cervical screening coverage**

| |
|---|
| No data available |

**Table 3. Factors contributing to cervical cancer**

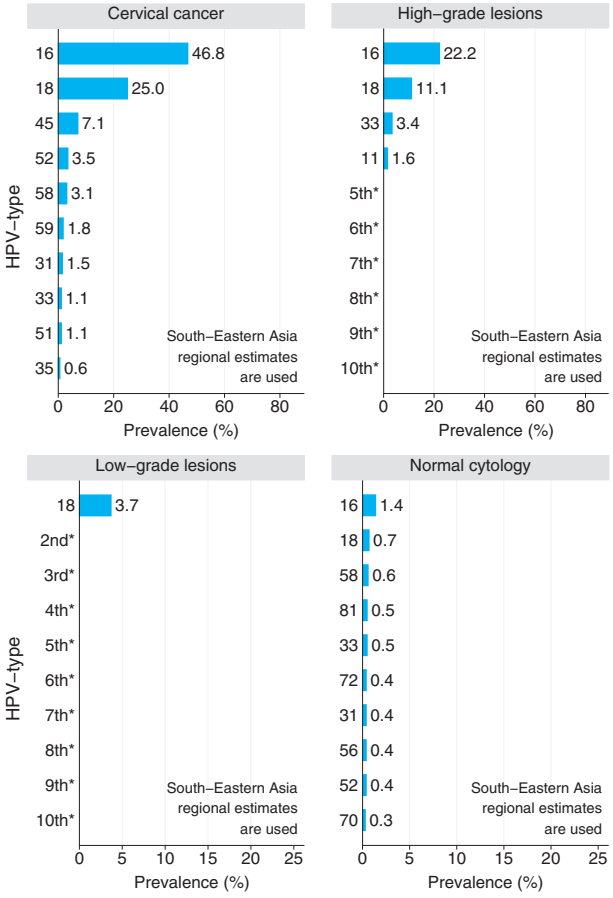
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.6 |
| Smoking prevalence in women (%) | 10 |
| Fertility rate (live births per women) | 5.2 |
| Oral Contraceptive Use (%) | 7.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4194 | 6.2 (5.5-6.9) |
| Low-grade lesions† | 27 | 33.3 (16.5-54.0) |
| High-grade lesions† | 207 | 61.8 (54.8-68.5) |
| Cervical cancer: any type† | 1090 | 92.1* (90.3-93.6) |
| Cervical cancer: HPV 16/18† | 1090 | 71.8 (69.1-74.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South-Eastern Asia regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



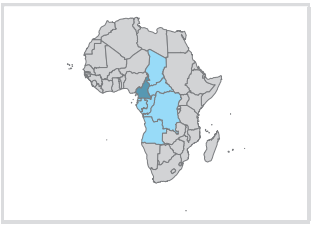

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 80 |
| Percentage of districts with >=80% DTP3 coverage | 38 |

DTP: Diphtheria, Tetanus and Pertussis

# CAMEROON



has a population of 4.86 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1759 women are diagnosed with cervical cancer and 1419 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Cameroon, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Cameroon. However, in Africa Continent about 23.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 22.6 | 18.2 |
| Age-standardized rate | 35.7 | 28.9 |
| Cumulative risk 0-64 years (%) | 2.7 | 2.2 |
| SIR/SMR | 204 | 313 |
| Annual number of new cases/deaths | 1759 | 1419 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

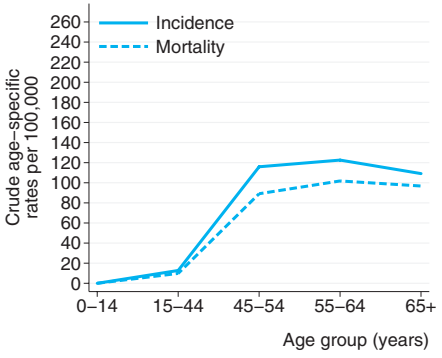



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 5.4 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 5.2 |
| Oral Contraceptive Use (%) | 1.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 6226 | 23.0 (21.9-24.0) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type‡ | 1339 | 93.9* (92.5-95.1) |
| Cervical cancer: HPV 16/18‡ | 1339 | 70.1 (67.5-72.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

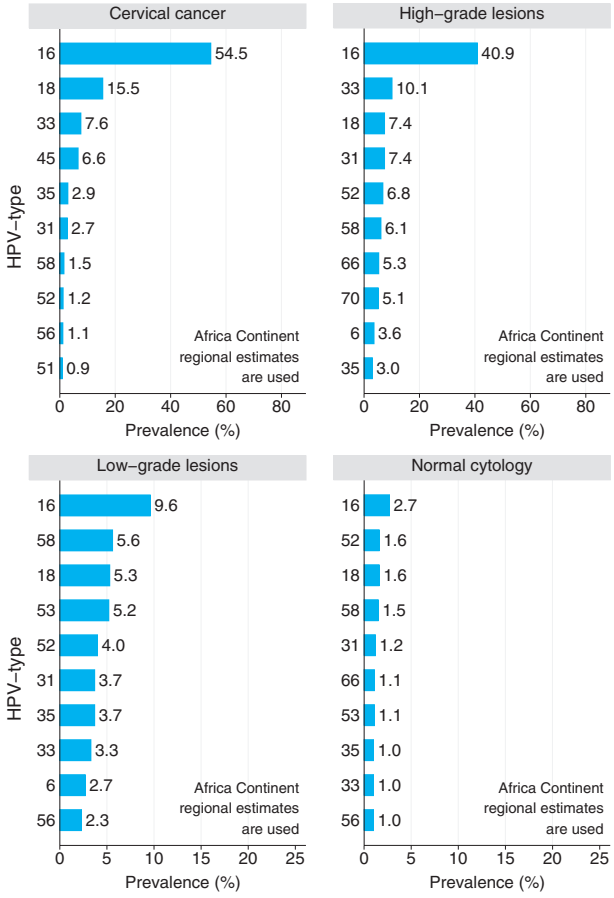
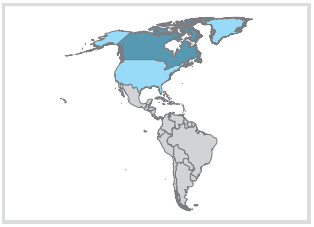



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 81 |
| Percentage of districts with >=80% DTP3 coverage | 46 |

DTP: Diphtheria, Tetanus and Pertussis

# CANADA



has a population of 13.51 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1502 women are diagnosed with cervical cancer and 581 die from the disease. Cervical cancer ranks as the 11th most frequent cancer in women in Canada, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 21.7% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.9% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 9.5 | 3.7 |
| Age-standardized rate | 7.7 | 2.5 |
| Cumulative risk 0-64 years (%) | 0.6 | 0.1 |
| SIR/SMR | 44 | 29 |
| Annual number of new cases/deaths | 1502 | 581 |
| Ranking of cervical cancer (all ages) † | 11th | 10th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

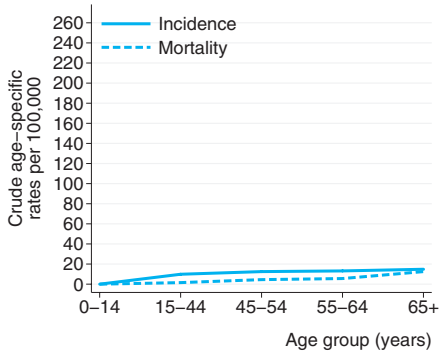



**Table 2. Cervical screening coverage**

79% were screened in the previous 3 years among women aged 20-69 years (1998-99); 89% ever screened coverage, 53% in the last 12 months, and 73% in the previous 3 years among women aged 18-69 years (2000-2001)

**Table 3. Factors contributing to cervical cancer**

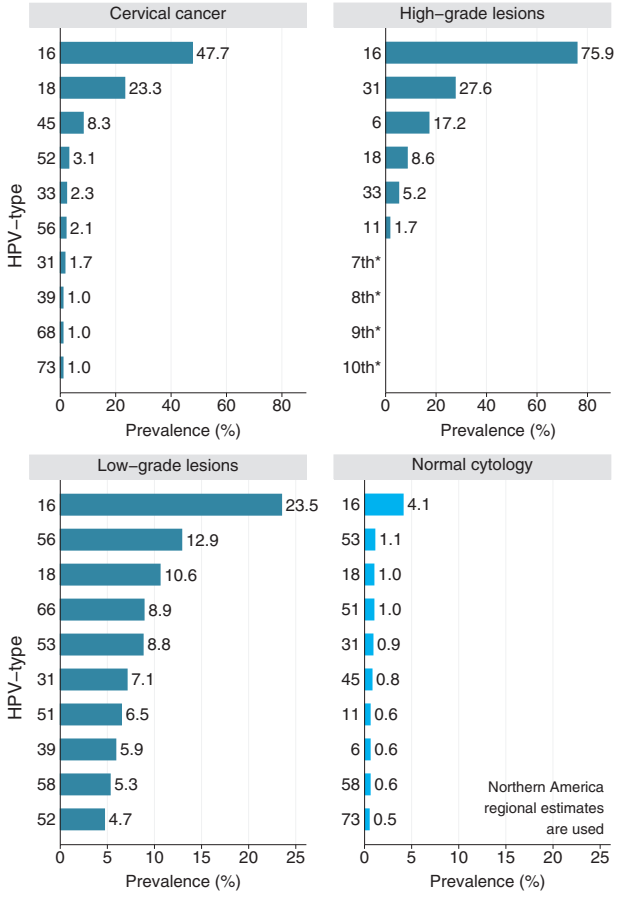
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.3 |
| Smoking prevalence in women (%) | 17 |
| Fertility rate (live births per women) | 1.6 |
| Oral Contraceptive Use (%) | 14.4 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 2010 | 21.7 (19.9-23.6) |
| Low-grade lesions | 170 | 87.6 (81.7-92.2) |
| High-grade lesions | 58 | 98.3 (90.8-100.0) |
| Cervical cancer: any type | 172 | 83.7* (77.3-88.9) |
| Cervical cancer: HPV 16/18 | 172 | 70.9 (63.5-77.6) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



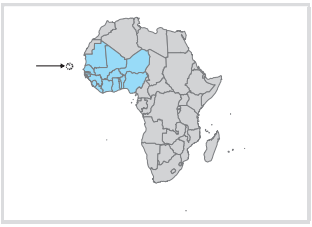

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 94 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# CAPE VERDE



has a population of 163052 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 47 women are diagnosed with cervical cancer and 38 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Cape Verde, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Cape Verde. However, in Western Africa, the region Cape Verde belongs to, about 16.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 50.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 19.7 | 16 |
| Age-standardized rate | 29.3 | 23.8 |
| Cumulative risk 0-64 years (%) | 2.2 | 1.8 |
| SIR/SMR | 172 | 264 |
| Annual number of new cases/deaths | 47 | 38 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

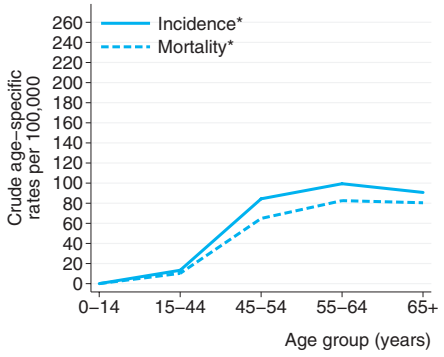



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 4.2 |
| Oral Contraceptive Use (%) | 18.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2641 | 16.5 (15.1-18.0) |
| Low-grade lesions† | 271 | 59 (52.9-65.0) |
| High-grade lesions† | 138 | 79.7 (72.0-86.1) |
| Cervical cancer: any type† | 218 | 85.8* (80.4-90.1) |
| Cervical cancer: HPV 16/18† | 218 | 50.5 (43.6-57.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

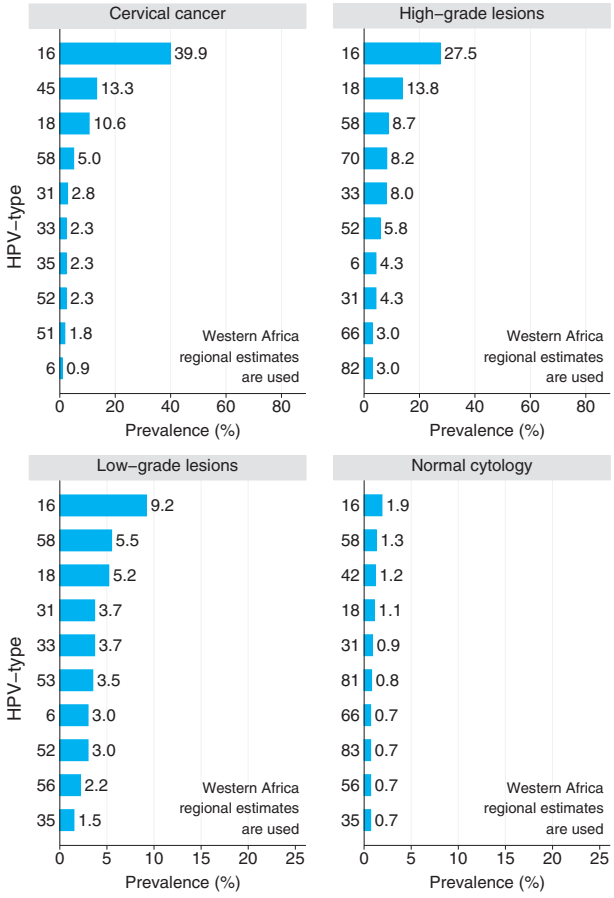
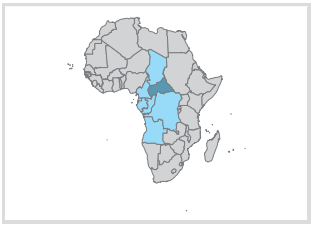



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 72 |
| Percentage of districts with >=80% DTP3 coverage | 29 |

DTP: Diphtheria, Tetanus and Pertussis

# CENTRAL AFRICAN REPUBLIC



has a population of 1.20 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 374 women are diagnosed with cervical cancer and 306 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Central African Republic, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Central African Republic. However, in Africa Continent about 23.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 19 | 15.5 |
| Age-standardized rate | 28 | 23 |
| Cumulative risk 0-64 years (%) | 1.9 | 1.5 |
| SIR/SMR | 164 | 252 |
| Annual number of new cases/deaths | 374 | 306 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 3rd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

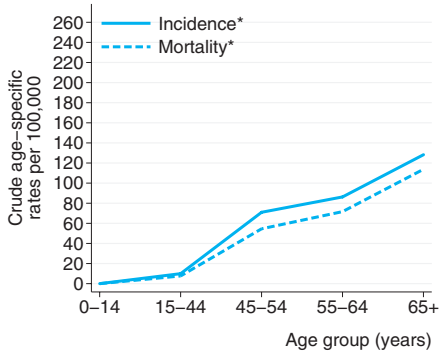



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 10.7 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 5.2 |
| Oral Contraceptive Use (%) | 4.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 6226 | 23.0 (21.9-24.0) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type‡ | 1339 | 93.9* (92.5-95.1) |
| Cervical cancer: HPV 16/18‡ | 1339 | 70.1 (67.5-72.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

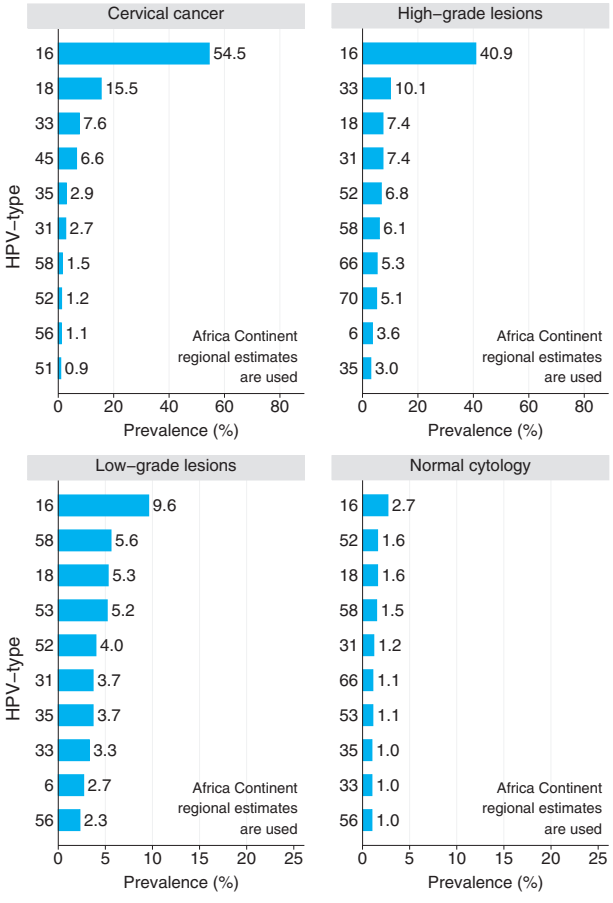
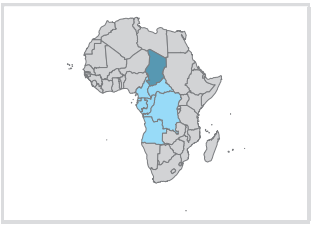



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 40 |
| Percentage of districts with >=80% DTP3 coverage | 63 |

DTP: Diphtheria, Tetanus and Pertussis

# CHAD



has a population of 2.62 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 681 women are diagnosed with cervical cancer and 555 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Chad, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Chad. However, in Africa Continent about 23.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 16.1 | 13.1 |
| Age-standardized rate | 28 | 23 |
| Cumulative risk 0-64 years (%) | 1.9 | 1.5 |
| SIR/SMR | 157 | 247 |
| Annual number of new cases/deaths | 681 | 555 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

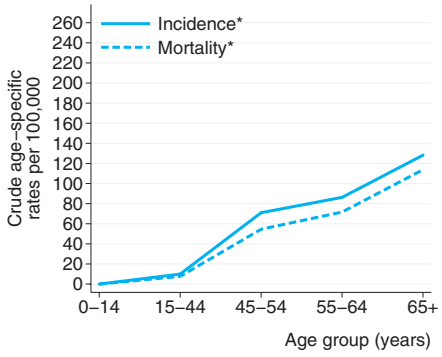



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 3.5 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 6.6 |
| Oral Contraceptive Use (%) | 1.1 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 6226 | 23.0 (21.9-24.0) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type‡ | 1339 | 93.9* (92.5-95.1) |
| Cervical cancer: HPV 16/18‡ | 1339 | 70.1 (67.5-72.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

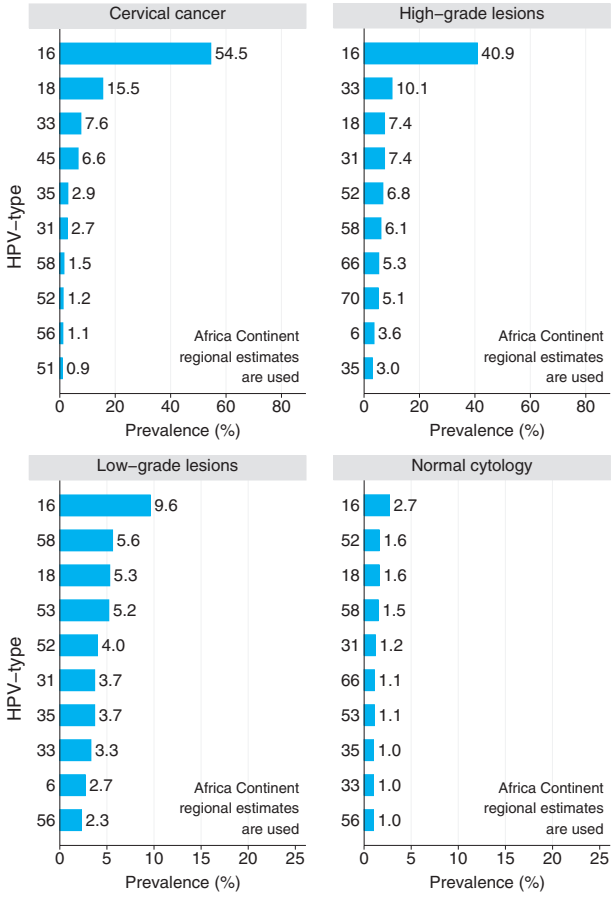



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 20 |
| Percentage of districts with >=80% DTP3 coverage | 43 |

DTP: Diphtheria, Tetanus and Pertussis

# CHILE

has a population of 6.24 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 2163 women are diagnosed with cervical cancer and 931 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Chile, and the 1st most frequent cancer among women between 15 and 44 years of age. About 11.2% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 56.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 27.5 | 11.9 |
| Age-standardized rate | 25.8 | 10.9 |
| Cumulative risk 0-64 years (%) | 1.7 | 0.6 |
| SIR/SMR | 163 | 126 |
| Annual number of new cases/deaths | 2163 | 931 |
| Ranking of cervical cancer (all ages) † | 2nd | 3rd |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

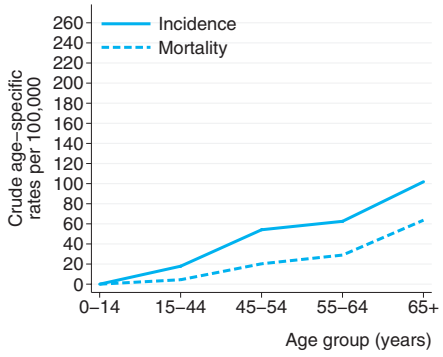



**Table 2. Cervical screening coverage**

| |
|---|
| 68.3% in the past 3 years among women aged 25-64 years (2000) |

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.3 |
| Smoking prevalence in women (%) | 36.8 |
| Fertility rate (live births per women) | 2.1 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 913 | 11.2 (9.2-13.4) |
| Low-grade lesions† | 548 | 79 (75.4-82.4) |
| High-grade lesions† | 487 | 80.1 (76.3-83.5) |
| Cervical cancer: any type | 80 | 98.8* (93.2-100.0) |
| Cervical cancer: HPV 16/18 | 80 | 56.3 (44.7-67.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South America regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

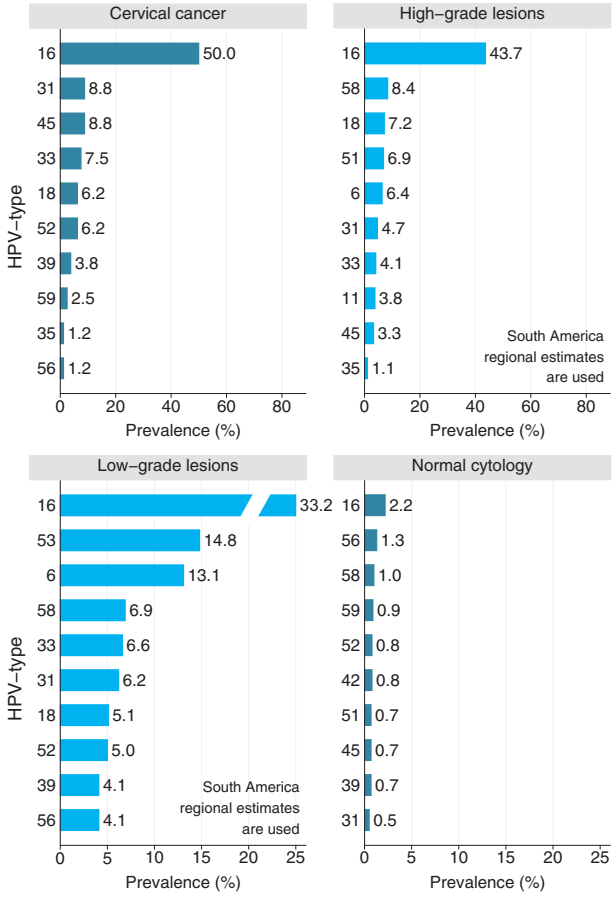



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 94 |
| Percentage of districts with >=80% DTP3 coverage | 73 |

DTP: Diphtheria, Tetanus and Pertussis

# CHINA

has a population of 506.73 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 45689 women are diagnosed with cervical cancer and 25561 die from the disease. Cervical cancer ranks as the 7th most frequent cancer in women in China, and the 5th most frequent cancer among women between 15 and 44 years of age. About 13.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 69.0% of invasive cervical cancers are attributed to HPVs 16 or 18.
Separate HPV estimates for Taiwan are provided at http://www.who.int/hpvcentre

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 7.3 | 4.1 |
| Age-standardized rate | 6.8 | 3.8 |
| Cumulative risk 0-64 years (%) | 0.5 | 0.2 |
| SIR/SMR | 42 | 43 |
| Annual number of new cases/deaths | 45689 | 25561 |
| Ranking of cervical cancer (all ages) † | 7th | 7th |
| Ranking of cervical cancer (15-44 years) † | 5th | 7th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

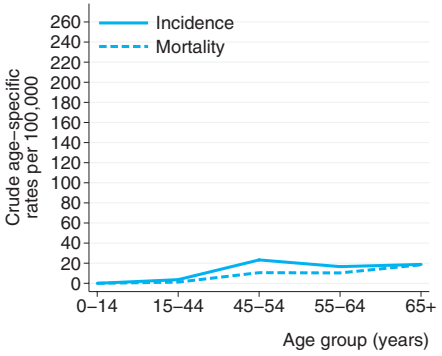



**Table 2. Cervical screening coverage**

| |
|---|
| No data available |

**Table 3. Factors contributing to cervical cancer**

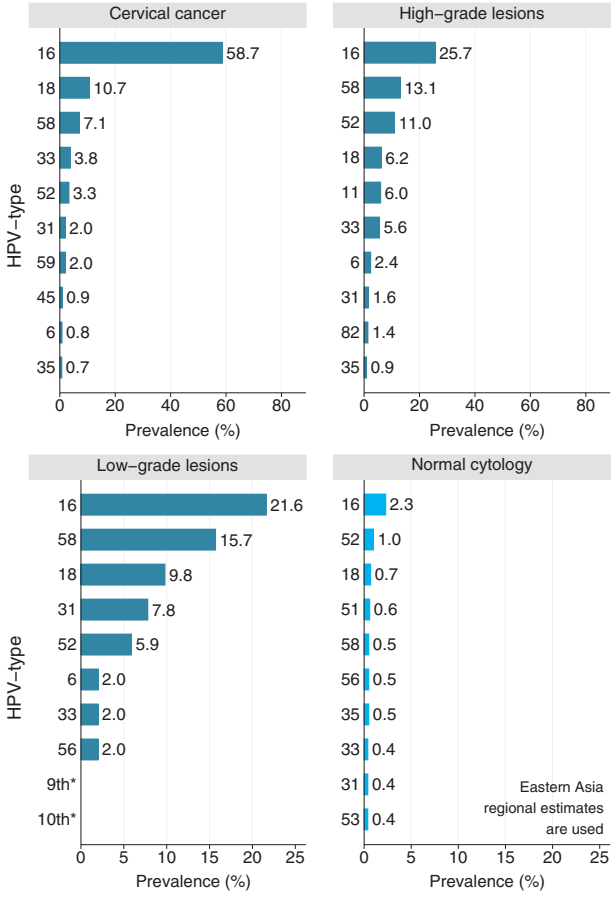
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 4 |
| Fertility rate (live births per women) | 1.4 |
| Oral Contraceptive Use (%) | 1.7 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 2044 | 13.6 (12.1-15.1) |
| Low-grade lesions | 51 | 64.7 (50.1-77.6) |
| High-grade lesions | 416 | 66.6 (61.8-71.1) |
| Cervical cancer: any type | 2698 | 84.1* (82.7-85.5) |
| Cervical cancer: HPV 16/18 | 2698 | 69.0 (67.2-70.8) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 93 |
| Percentage of districts with >=80% DTP3 coverage | 99 |

DTP: Diphtheria, Tetanus and Pertussis

# COLOMBIA

has a population of 16.15 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 6815 women are diagnosed with cervical cancer and 3296 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Colombia, and the 1st most frequent cancer among women between 15 and 44 years of age. About 14.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 57.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 31 | 15 |
| Age-standardized rate | 36.4 | 18.2 |
| Cumulative risk 0-64 years (%) | 2.4 | 1.1 |
| SIR/SMR | 218 | 199 |
| Annual number of new cases/deaths | 6815 | 3296 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

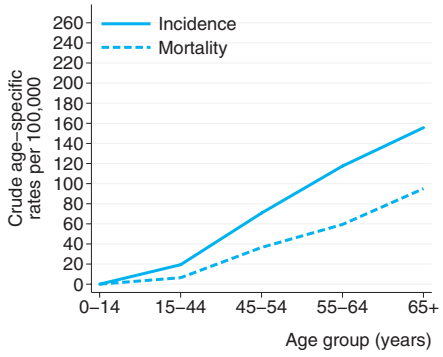



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

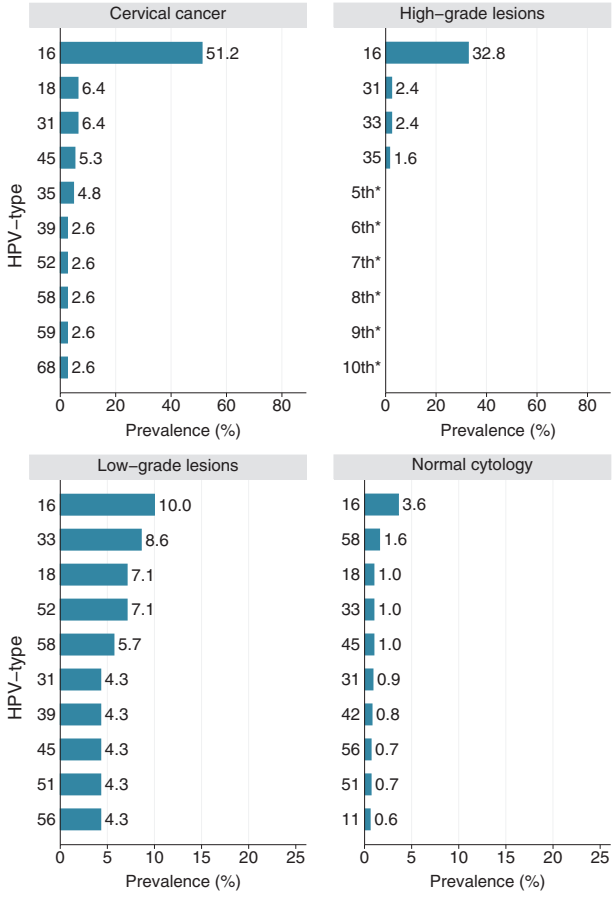
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.6 |
| Smoking prevalence in women (%) | 11.3 |
| Fertility rate (live births per women) | 2.6 |
| Oral Contraceptive Use (%) | 11.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 2138 | 14.5 (13.0-16.0) |
| Low-grade lesions | 70 | 55.7 (43.3-67.6) |
| High-grade lesions | 125 | 63.2 (54.1-71.6) |
| Cervical cancer: any type | 125 | 80* (71.9-86.6) |
| Cervical cancer: HPV 16/18 | 125 | 57.6 (48.4-66.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



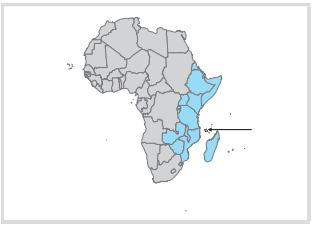

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 86 |
| Percentage of districts with >=80% DTP3 coverage | 52 |

DTP: Diphtheria, Tetanus and Pertussis

# COMOROS



has a population of 232207 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 97 women are diagnosed with cervical cancer and 79 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Comoros, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Comoros. However, in Eastern Africa, the region Comoros belongs to, about 35.4% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 81.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 26.1 | 20.9 |
| Age-standardized rate | 42.7 | 34.6 |
| Cumulative risk 0-64 years (%) | 3.2 | 2.6 |
| SIR/SMR | 249 | 392 |
| Annual number of new cases/deaths | 97 | 79 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

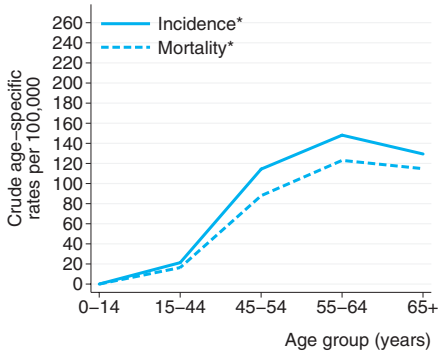



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 5.1 |
| Oral Contraceptive Use (%) | 8.3 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2144 | 35.4 (33.4-37.5) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type† | 478 | 96.4* (94.4-97.9) |
| Cervical cancer: HPV 16/18† | 478 | 81.8 (78.0-85.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

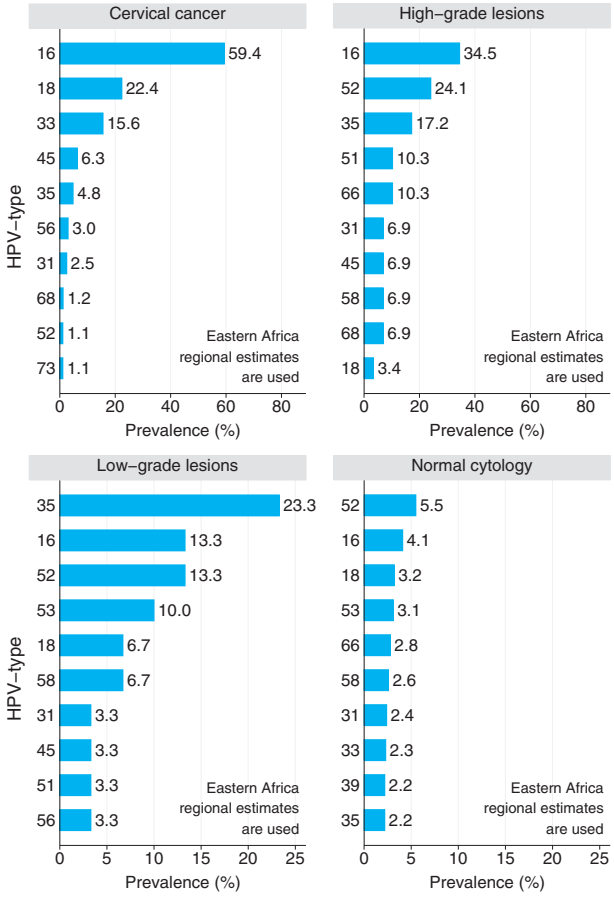
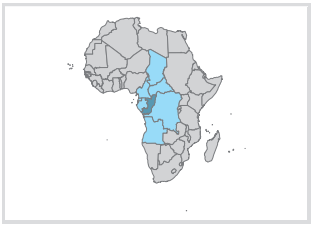



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 69 |
| Percentage of districts with >=80% DTP3 coverage | 41 |

DTP: Diphtheria, Tetanus and Pertussis

# CONGO



has a population of 1.08 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 303 women are diagnosed with cervical cancer and 242 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Congo, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Congo. However, in Africa Continent about 23.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 18.5 | 14.8 |
| Age-standardized rate | 30.5 | 24.6 |
| Cumulative risk 0-64 years (%) | 2.5 | 2 |
| SIR/SMR | 179 | 275 |
| Annual number of new cases/deaths | 303 | 242 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

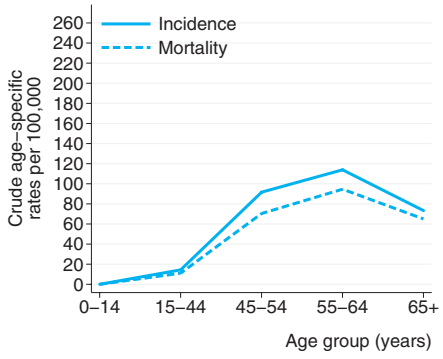



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 5.3 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 5.9 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 6226 | 23.0 (21.9-24.0) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type‡ | 1339 | 93.9* (92.5-95.1) |
| Cervical cancer: HPV 16/18‡ | 1339 | 70.1 (67.5-72.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

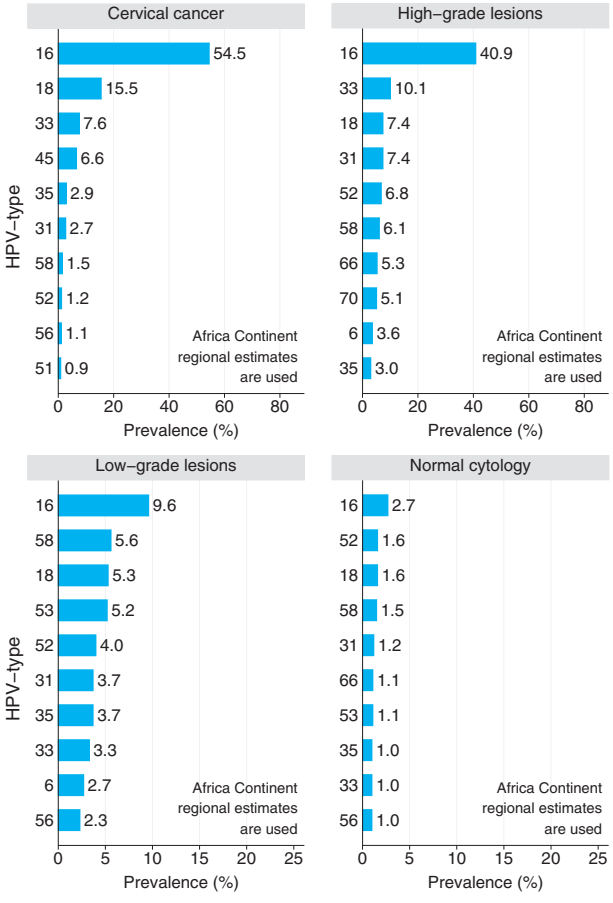



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 79 |
| Percentage of districts with >=80% DTP3 coverage | 44 |

DTP: Diphtheria, Tetanus and Pertussis

# COOK ISLANDS

Data is not yet available on the burden of cervical cancer in Cook Islands. However, in Polynesia, the region Cook Islands belongs to, current estimates indicate that every year 72 women are diagnosed with cervical cancer and 38 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Polynesia, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Cook Islands , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Oceania Continent about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

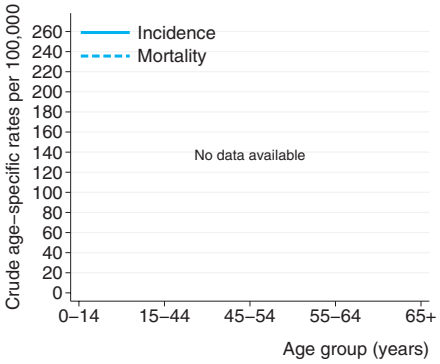



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

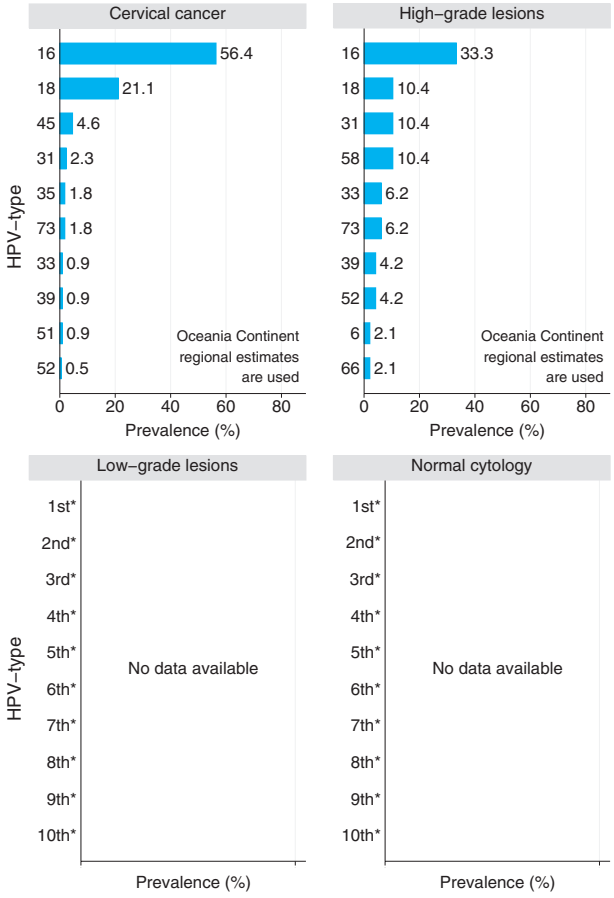
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | 22.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions‡ | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type‡ | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18‡ | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# COSTA RICA

has a population of 1.53 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 392 women are diagnosed with cervical cancer and 210 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Costa Rica, and the 1st most frequent cancer among women between 15 and 44 years of age. About 22.4% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 62.9% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 19 | 10.2 |
| Age-standardized rate | 21.5 | 12 |
| Cumulative risk 0-64 years (%) | 1.5 | 0.7 |
| SIR/SMR | 132 | 133 |
| Annual number of new cases/deaths | 392 | 210 |
| Ranking of cervical cancer (all ages) † | 2nd | 3rd |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

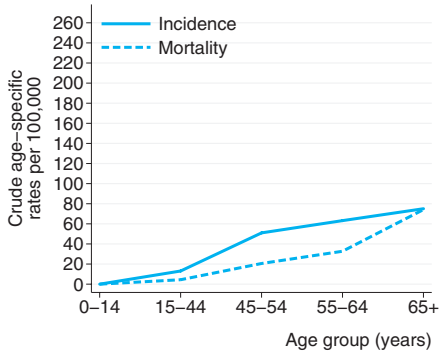



**Table 2. Cervical screening coverage**

66.9% in the last 12 months among women aged 15-49 years (1993); 87.8% ever had a smear among women aged 18 years and over (1995/96 Guanacaste)

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.3 |
| Smoking prevalence in women (%) | 9.7 |
| Fertility rate (live births per women) | 2.4 |
| Oral Contraceptive Use (%) | 25.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 7459 | 22.4 (21.5-23.4) |
| Low-grade lesions | 181 | 72.9 (65.8-79.3) |
| High-grade lesions | 108 | 89.8 (82.5-94.8) |
| Cervical cancer: any type | 35 | 97.1* (85.1-99.9) |
| Cervical cancer: HPV 16/18 | 35 | 62.9 (44.9-78.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

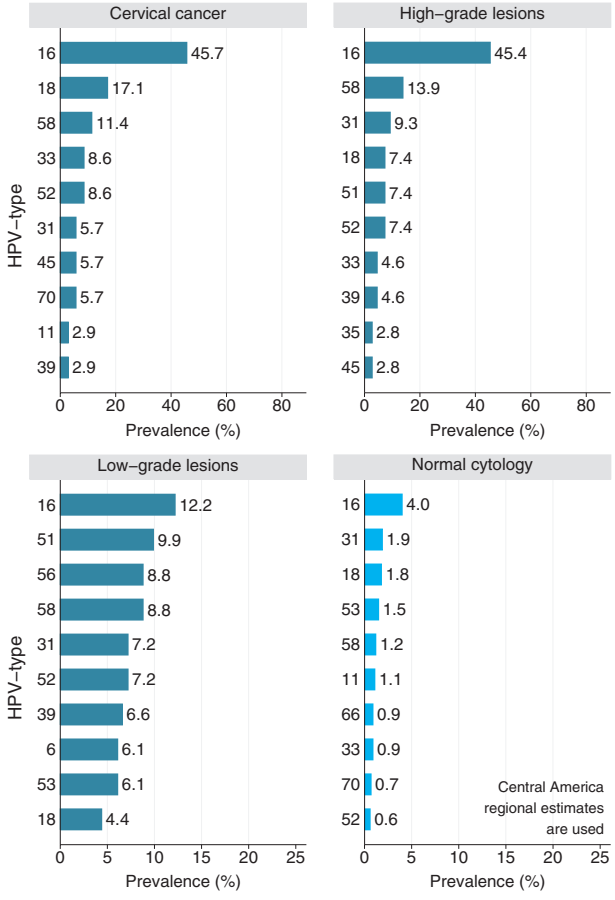



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 91 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# CROATIA

has a population of 2.02 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 431 women are diagnosed with cervical cancer and 209 die from the disease. Cervical cancer ranks as the 7th most frequent cancer in women in Croatia, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Croatia. However, in Southern Europe, the region Croatia belongs to, about 5.7% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 65.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 18 | 8.7 |
| Age-standardized rate | 13.3 | 5 |
| Cumulative risk 0-64 years (%) | 1 | 0.3 |
| SIR/SMR | 78 | 63 |
| Annual number of new cases/deaths | 431 | 209 |
| Ranking of cervical cancer (all ages) † | 7th | 7th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

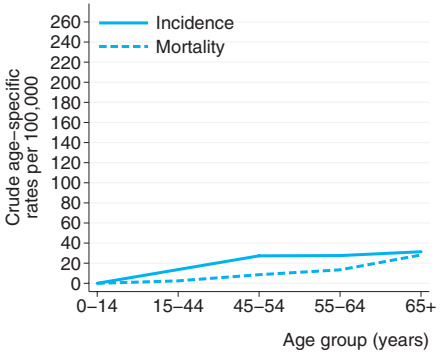



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

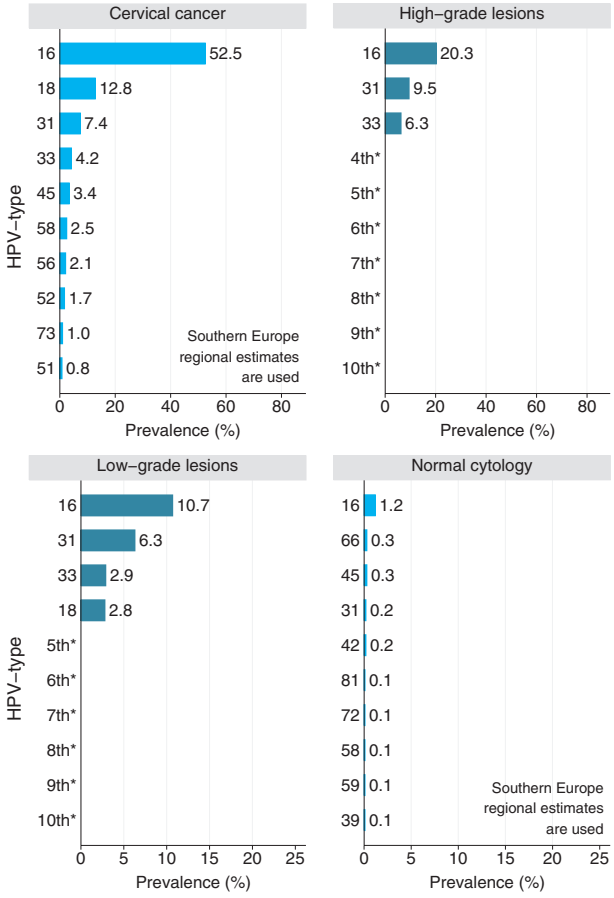
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 26.6 |
| Fertility rate (live births per women) | 1.4 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4884 | 5.7 (5.0-6.3) |
| Low-grade lesions | 1211 | 51.6 (48.8-54.5) |
| High-grade lesions | 158 | 75.3 (67.8-81.8) |
| Cervical cancer: any type† | 732 | 83.7* (80.9-86.3) |
| Cervical cancer: HPV 16/18† | 732 | 65.3 (61.7-68.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 96 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# CUBA

has a population of 4.58 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1346 women are diagnosed with cervical cancer and 567 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Cuba, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Cuba. However, in Americas Continent about 15.6% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Cuba 64.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 24 | 10.1 |
| Age-standardized rate | 20.2 | 8.3 |
| Cumulative risk 0-64 years (%) | 1.5 | 0.6 |
| SIR/SMR | 124 | 91 |
| Annual number of new cases/deaths | 1346 | 567 |
| Ranking of cervical cancer (all ages) † | 2nd | 4th |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

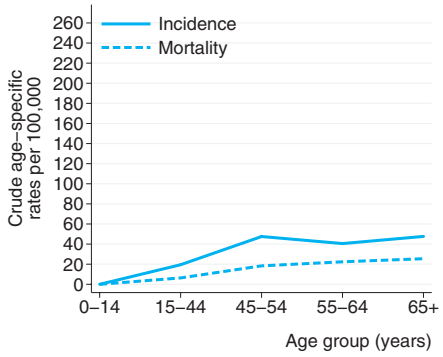



**Table 2. Cervical screening coverage**

| |
|---|
| 70% (2004) |

**Table 3. Factors contributing to cervical cancer**

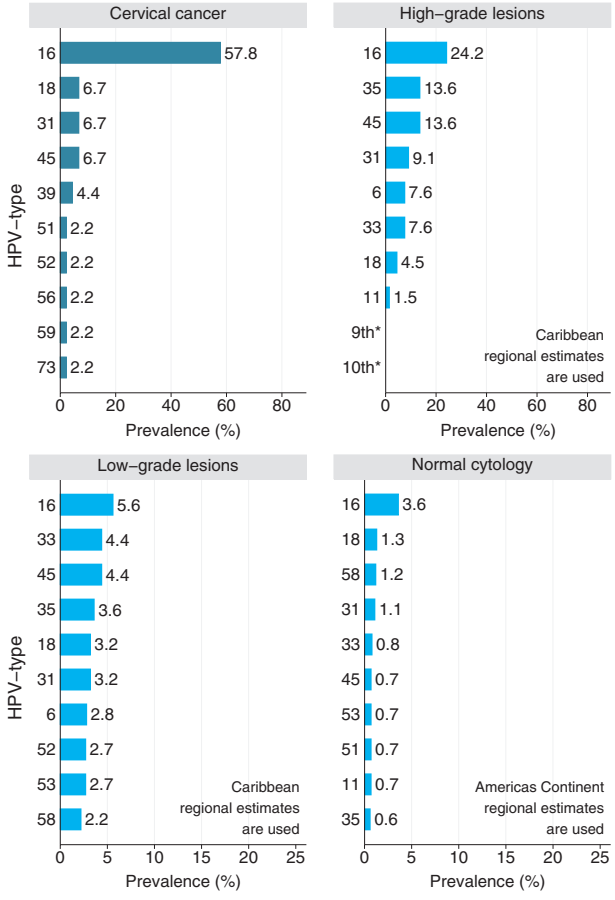
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 26.2 |
| Fertility rate (live births per women) | 1.6 |
| Oral Contraceptive Use (%) | 3.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 40399 | 15.6 (15.2-15.9) |
| Low-grade lesions† | 248 | 60.9 (54.5-67.0) |
| High-grade lesions† | 66 | 80.3 (68.7-89.1) |
| Cervical cancer: any type | 45 | 97.8* (88.2-99.9) |
| Cervical cancer: HPV 16/18 | 45 | 64.4 (48.8-78.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Caribbean regional estimate
‡Americas Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 89 |
| Percentage of districts with >=80% DTP3 coverage | 86 |

DTP: Diphtheria, Tetanus and Pertussis

# CYPRUS

has a population of 347472 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 53 women are diagnosed with cervical cancer and 25 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in Cyprus, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Cyprus. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 13.1 | 6.2 |
| Age-standardized rate | 11.6 | 5.3 |
| Cumulative risk 0-64 years (%) | 0.9 | 0.4 |
| SIR/SMR | 64 | 52 |
| Annual number of new cases/deaths | 53 | 25 |
| Ranking of cervical cancer (all ages) † | 4th | 7th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

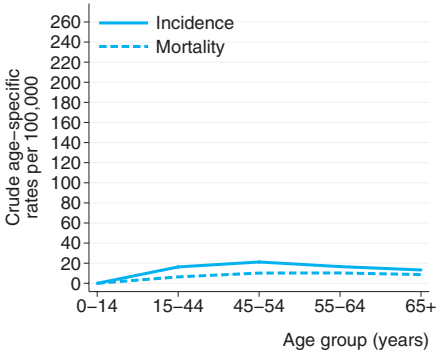



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 7.6 |
| Fertility rate (live births per women) | 1.6 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

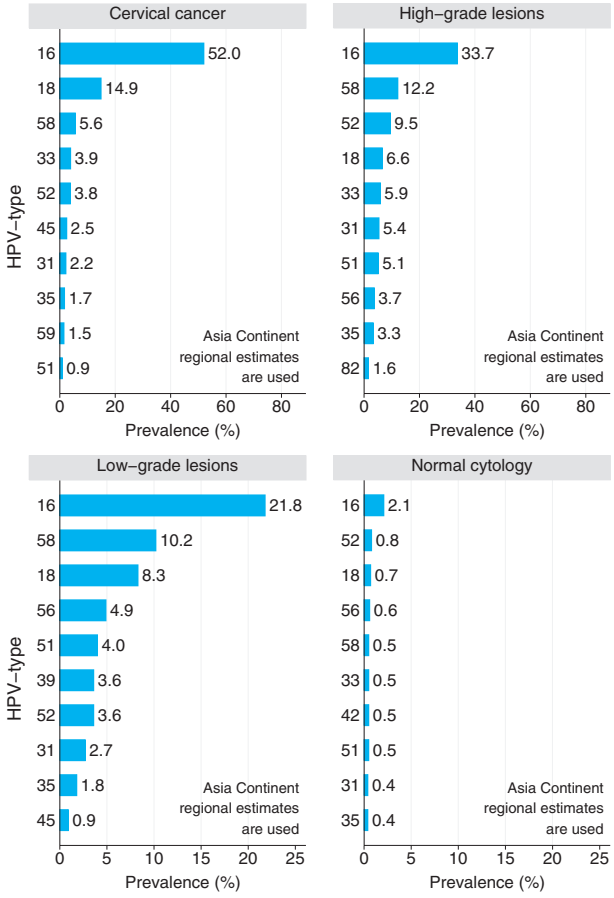
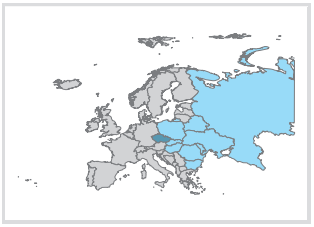



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 97 |
| Percentage of districts with >=80% DTP3 coverage | 83 |

DTP: Diphtheria, Tetanus and Pertussis

# CZECH REPUBLIC



has a population of 4.52 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1160 women are diagnosed with cervical cancer and 476 die from the disease. Cervical cancer ranks as the 6th most frequent cancer in women in Czech Republic, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Czech Republic. However, in Eastern Europe, the region Czech Republic belongs to, about 29.1% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Czech Republic 69.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 22.1 | 9.1 |
| Age-standardized rate | 16.2 | 5.5 |
| Cumulative risk 0-64 years (%) | 1.2 | 0.4 |
| SIR/SMR | 94 | 64 |
| Annual number of new cases/deaths | 1160 | 476 |
| Ranking of cervical cancer (all ages) † | 6th | 9th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

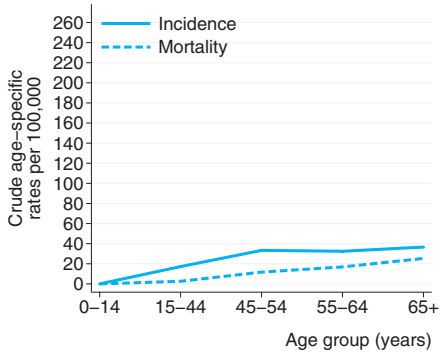



**Table 2. Cervical screening coverage**

| |
|---|
| No data available |

**Table 3. Factors contributing to cervical cancer**

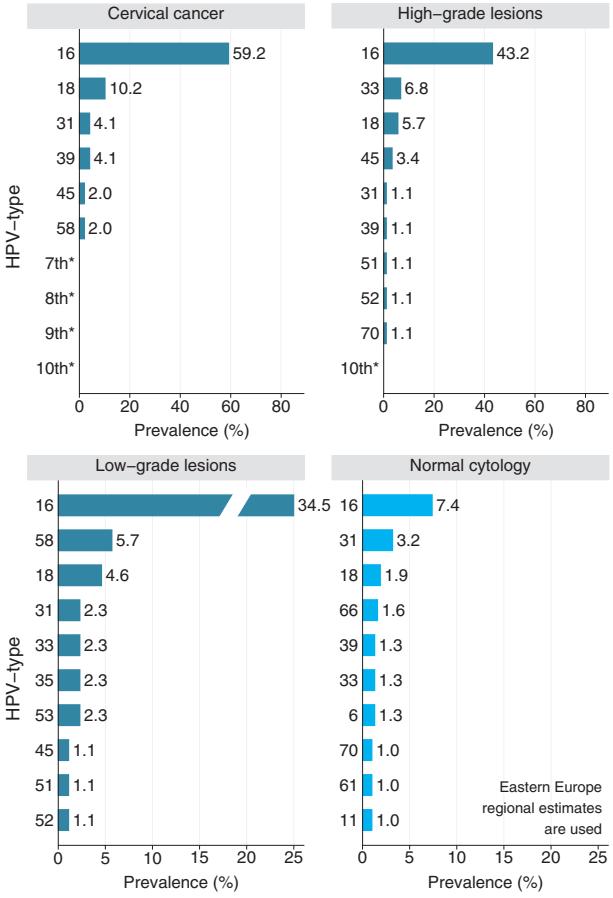
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 20.1 |
| Fertility rate (live births per women) | 1.1 |
| Oral Contraceptive Use (%) | 23.1 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 309 | 29.1 (24.1-34.5) |
| Low-grade lesions | 87 | 52.9 (41.9-63.7) |
| High-grade lesions | 88 | 58 (47.0-68.4) |
| Cervical cancer: any type | 49 | 73.5* (58.9-85.1) |
| Cervical cancer: HPV 16/18 | 49 | 69.4 (54.6-81.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



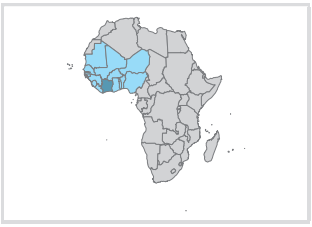

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# CôTE D'IVOIRE



has a population of 5.13 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1497 women are diagnosed with cervical cancer and 1192 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Côte d'Ivoire, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Côte d'Ivoire. However, in Western Africa, the region Côte d'Ivoire belongs to, about 16.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 50.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 18.4 | 14.7 |
| Age-standardized rate | 30.1 | 24.3 |
| Cumulative risk 0-64 years (%) | 2.4 | 1.9 |
| SIR/SMR | 173 | 270 |
| Annual number of new cases/deaths | 1497 | 1192 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

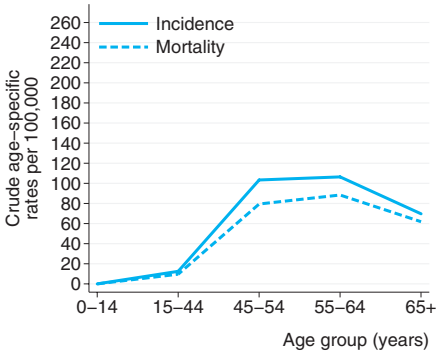



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

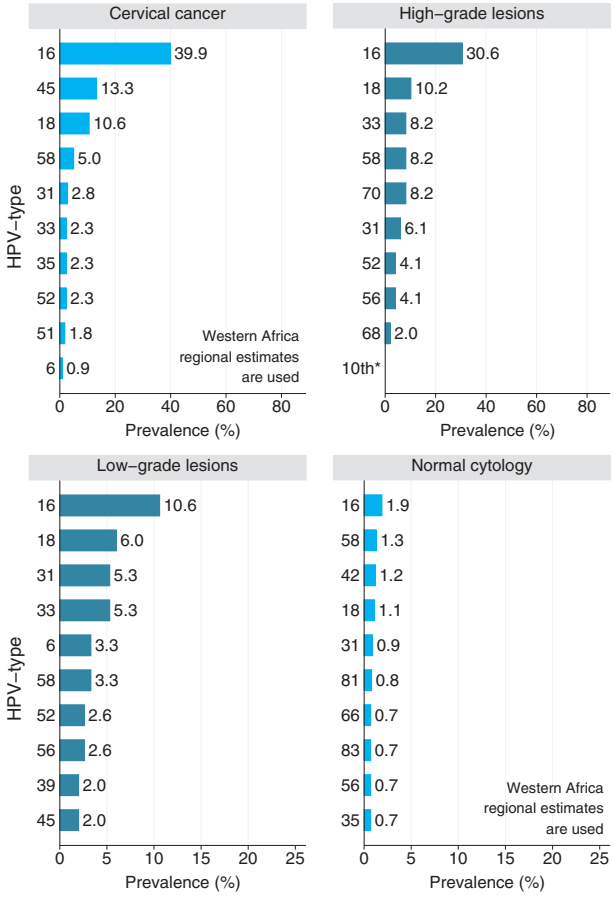
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 7.1 |
| Smoking prevalence in women (%) | 1.8 |
| Fertility rate (live births per women) | 5.1 |
| Oral Contraceptive Use (%) | 3.5 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2641 | 16.5 (15.1-18.0) |
| Low-grade lesions | 151 | 68.2 (60.1-75.5) |
| High-grade lesions | 49 | 77.6 (63.4-88.2) |
| Cervical cancer: any type† | 218 | 85.8* (80.4-90.1) |
| Cervical cancer: HPV 16/18† | 218 | 50.5 (43.6-57.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 77 |
| Percentage of districts with >=80% DTP3 coverage | 46 |

DTP: Diphtheria, Tetanus and Pertussis

# DPR KOREA

has a population of 8.50 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 2150 women are diagnosed with cervical cancer and 558 die from the disease. Cervical cancer ranks as the 3rd most frequent cancer in women in DPR Korea, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of DPR Korea. However, in Eastern Asia, the region DPR Korea belongs to, about 10.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 64.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 19.2 | 5 |
| Age-standardized rate | 17.9 | 4.7 |
| Cumulative risk 0-64 years (%) | 1.3 | 0.3 |
| SIR/SMR | 112 | 52 |
| Annual number of new cases/deaths | 2150 | 558 |
| Ranking of cervical cancer (all ages) † | 3rd | 5th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

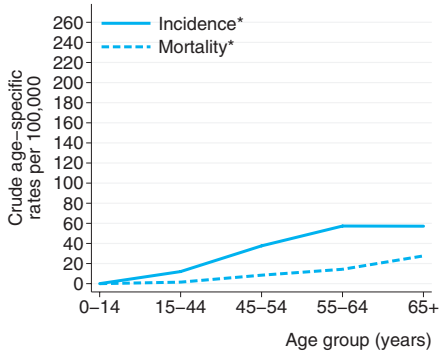



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 2.2 |
| Oral Contraceptive Use (%) | 0.1 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 17767 | 10.6 (10.1-11.0) |
| Low-grade lesions† | 225 | 71.1 (64.7-76.9) |
| High-grade lesions† | 1132 | 81.3 (78.9-83.5) |
| Cervical cancer: any type† | 4176 | 83.8* (82.7-84.9) |
| Cervical cancer: HPV 16/18† | 4176 | 64.5 (63.1-66.0) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Asia regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

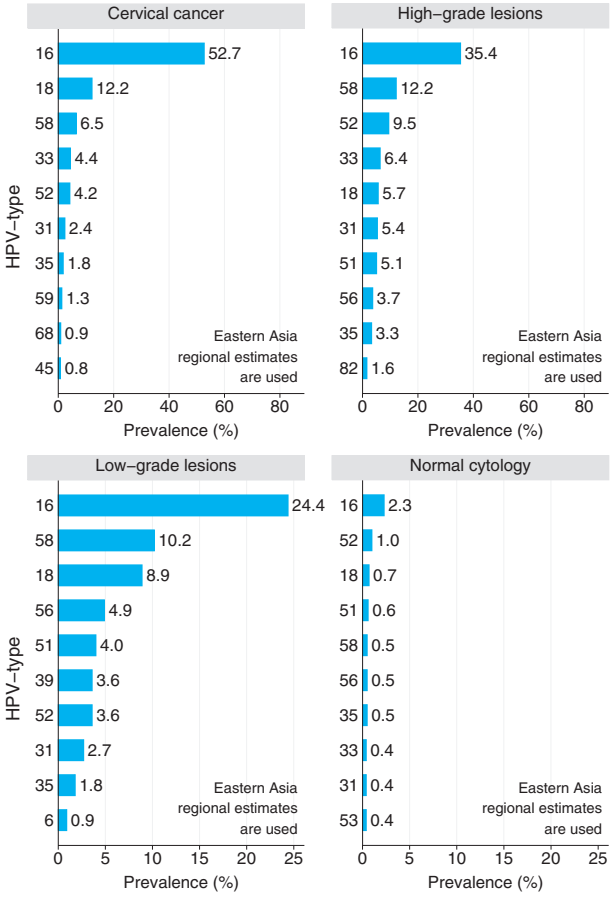
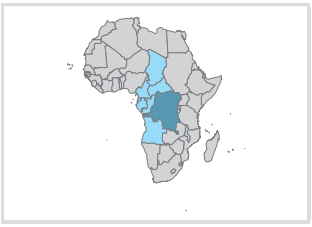



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 89 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# DR CONGO



has a population of 15.43 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 3709 women are diagnosed with cervical cancer and 3058 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in DR Congo, and the 4th most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of DR Congo. However, in Africa Continent about 23.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 13.5 | 11.1 |
| Age-standardized rate | 25.1 | 20.9 |
| Cumulative risk 0-64 years (%) | 1.4 | 1.1 |
| SIR/SMR | 138 | 220 |
| Annual number of new cases/deaths | 3709 | 3058 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 4th | 4th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

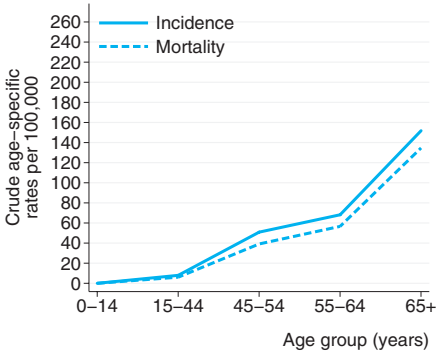



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 3.2 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 6.7 |
| Oral Contraceptive Use (%) | 1.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 6226 | 23.0 (21.9-24.0) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type‡ | 1339 | 93.9* (92.5-95.1) |
| Cervical cancer: HPV 16/18‡ | 1339 | 70.1 (67.5-72.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

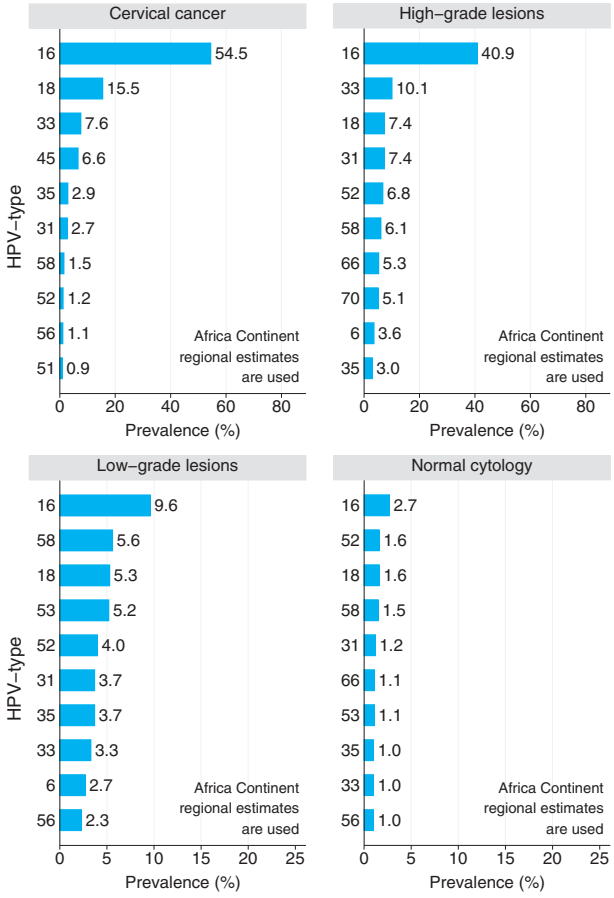
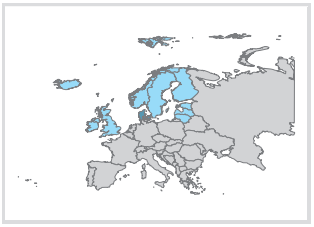



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 77 |
| Percentage of districts with >=80% DTP3 coverage | 44 |

DTP: Diphtheria, Tetanus and Pertussis

# DENMARK



has a population of 2.25 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 439 women are diagnosed with cervical cancer and 230 die from the disease. Cervical cancer ranks as the 7th most frequent cancer in women in Denmark, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 15.2% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.2% of invasive cervical cancers are attributed to HPVs 16 or 18.
Separate HPV estimates for Greenland are provided at http://www.who.int/hpvcentre

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 16.3 | 8.6 |
| Age-standardized rate | 12.6 | 5 |
| Cumulative risk 0-64 years (%) | 0.9 | 0.3 |
| SIR/SMR | 70 | 61 |
| Annual number of new cases/deaths | 439 | 230 |
| Ranking of cervical cancer (all ages) † | 7th | 6th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

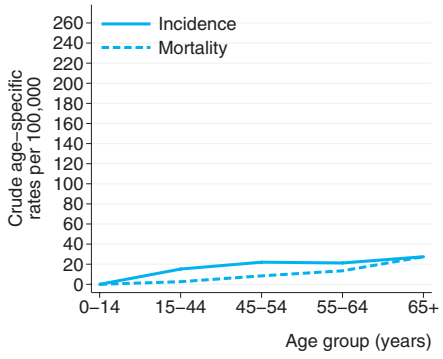



**Table 2. Cervical screening coverage**

| |
|---|
| 85% Count of Funen, 73% Copenhagen |

**Table 3. Factors contributing to cervical cancer**

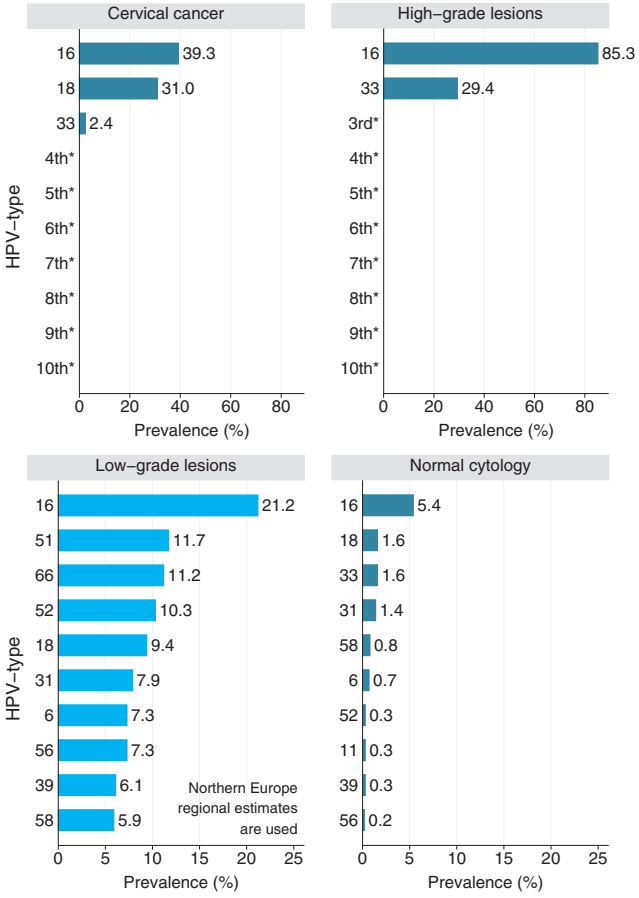
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | 25 |
| Fertility rate (live births per women) | 1.7 |
| Oral Contraceptive Use (%) | 26.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 1728 | 15.2 (13.5-16.9) |
| Low-grade lesions† | 646 | 85.3 (82.3-87.9) |
| High-grade lesions | 34 | 91.2 (76.3-98.1) |
| Cervical cancer: any type | 84 | 76.2* (65.7-84.8) |
| Cervical cancer: HPV 16/18 | 84 | 70.2 (59.3-79.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Northern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



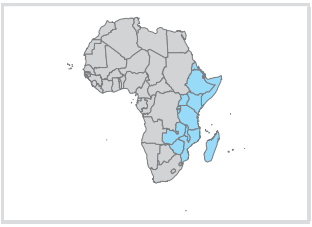

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 93 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# DJIBOUTI



has a population of 233184 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 113 women are diagnosed with cervical cancer and 90 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Djibouti, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Djibouti. However, in Eastern Africa, the region Djibouti belongs to, about 35.4% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 81.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 33.3 | 26.8 |
| Age-standardized rate | 42.7 | 34.6 |
| Cumulative risk 0-64 years (%) | 3.2 | 2.6 |
| SIR/SMR | 257 | 387 |
| Annual number of new cases/deaths | 113 | 90 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

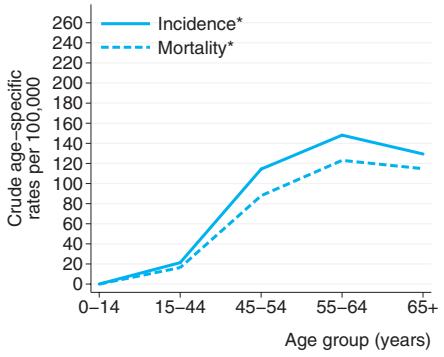



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 3.1 |
| Smoking prevalence in women (%) | 10 |
| Fertility rate (live births per women) | 6.0 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2144 | 35.4 (33.4-37.5) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type† | 478 | 96.4* (94.4-97.9) |
| Cervical cancer: HPV 16/18† | 478 | 81.8 (78.0-85.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

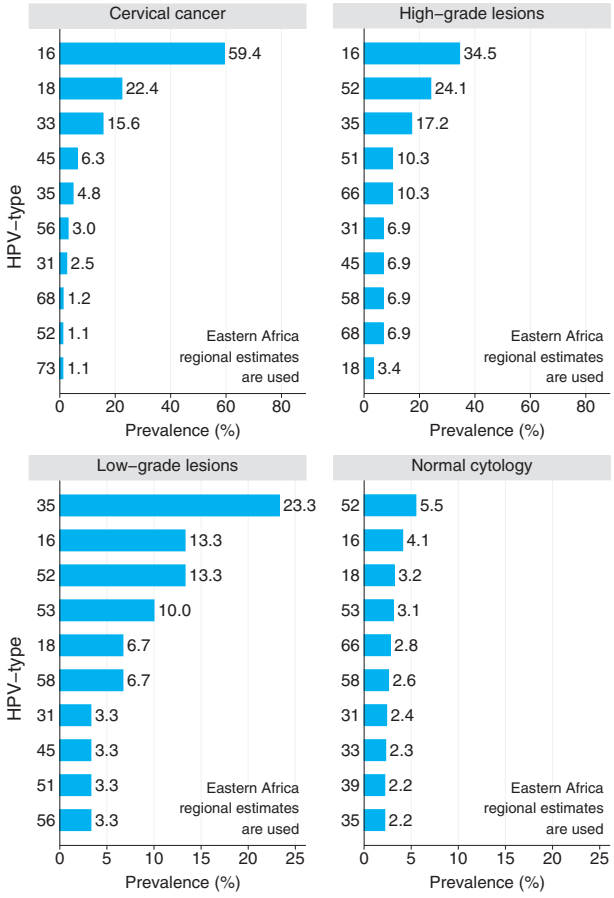



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 72 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# DOMINICA

Data is not yet available on the burden of cervical cancer in Dominica. However, in Caribbean, the region Dominica belongs to, current estimates indicate that every year 6369 women are diagnosed with cervical cancer and 3113 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Caribbean, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Dominica. However, in Americas Continent about 15.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Caribbean about 64.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

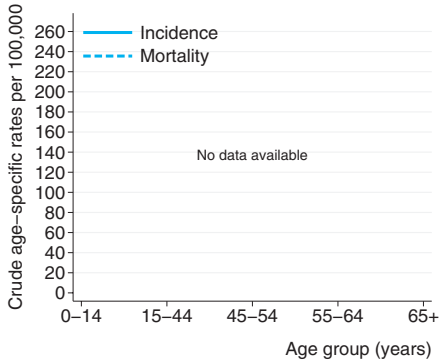



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

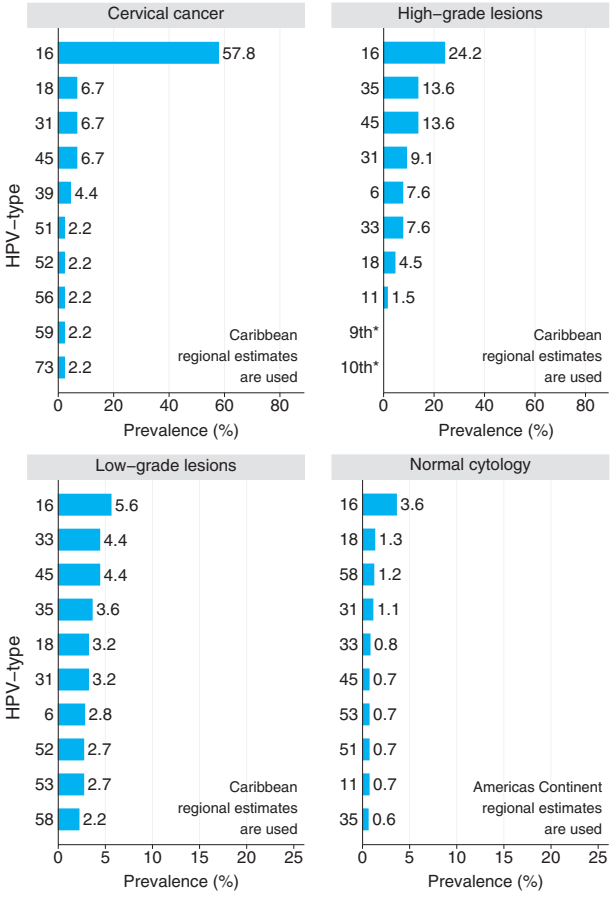
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | 16.5 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 40399 | 15.6 (15.2-15.9) |
| Low-grade lesions† | 248 | 60.9 (54.5-67.0) |
| High-grade lesions† | 66 | 80.3 (68.7-89.1) |
| Cervical cancer: any type† | 45 | 97.8* (88.2-99.9) |
| Cervical cancer: HPV 16/18† | 45 | 64.4 (48.8-78.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Caribbean regional estimate
‡Americas Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# DOMINICAN REPUBLIC

has a population of 2.98 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1032 women are diagnosed with cervical cancer and 562 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Dominican Republic, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Dominican Republic. However, in Americas Continent about 15.6% of women in the general population are estimated to harbour cervical HPV infection at a given time. In Caribbean, the region Dominican Republic belongs to, about 64.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 24.3 | 13.3 |
| Age-standardized rate | 30.8 | 17.3 |
| Cumulative risk 0-64 years (%) | 2.1 | 1 |
| SIR/SMR | 178 | 184 |
| Annual number of new cases/deaths | 1032 | 562 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

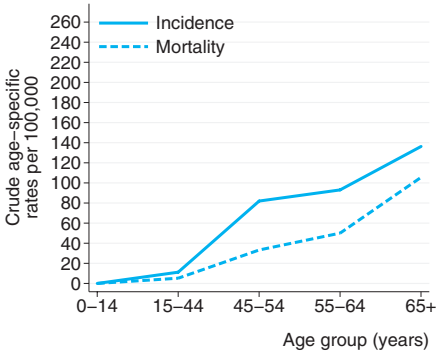



**Table 2. Cervical screening coverage**

44.8% in the last 12 months among women aged 15-49 years (1996)

**Table 3. Factors contributing to cervical cancer**

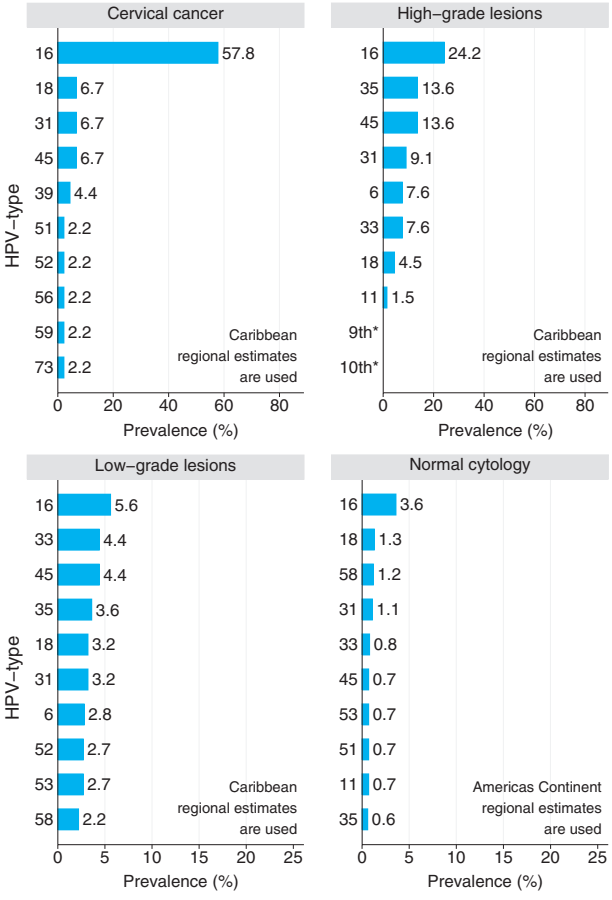
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.1 |
| Smoking prevalence in women (%) | 10.9 |
| Fertility rate (live births per women) | 2.9 |
| Oral Contraceptive Use (%) | 13.5 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 40399 | 15.6 (15.2-15.9) |
| Low-grade lesions† | 248 | 60.9 (54.5-67.0) |
| High-grade lesions† | 66 | 80.3 (68.7-89.1) |
| Cervical cancer: any type† | 45 | 97.8* (88.2-99.9) |
| Cervical cancer: HPV 16/18† | 45 | 64.4 (48.8-78.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Caribbean regional estimate
‡Americas Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 81 |
| Percentage of districts with >=80% DTP3 coverage | 44 |

DTP: Diphtheria, Tetanus and Pertussis

# ECUADOR

has a population of 4.49 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1978 women are diagnosed with cervical cancer and 1064 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Ecuador, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Ecuador. However, in South America, the region Ecuador belongs to, about 14.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 67.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 30.4 | 16.3 |
| Age-standardized rate | 38.7 | 21 |
| Cumulative risk 0-64 years (%) | 2.4 | 1.2 |
| SIR/SMR | 224 | 227 |
| Annual number of new cases/deaths | 1978 | 1064 |
| Ranking of cervical cancer (all ages) † | 1st | 2nd |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

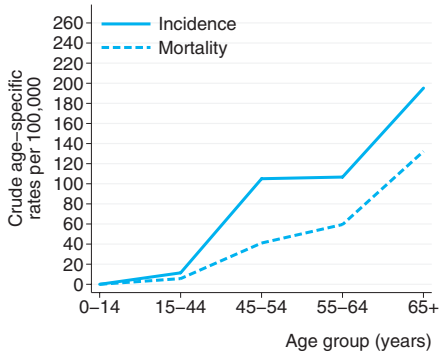



**Table 2. Cervical screening coverage**

72.2% in the last 12 months among women aged 15-49 years (1994)

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.3 |
| Smoking prevalence in women (%) | 17.4 |
| Fertility rate (live births per women) | 3.3 |
| Oral Contraceptive Use (%) | 11.1 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4354 | 14.3 (13.3-15.4) |
| Low-grade lesions† | 548 | 79 (75.4-82.4) |
| High-grade lesions† | 487 | 80.1 (76.3-83.5) |
| Cervical cancer: any type† | 1041 | 91.1* (89.2-92.7) |
| Cervical cancer: HPV 16/18† | 1041 | 67.3 (64.4-70.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South America regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

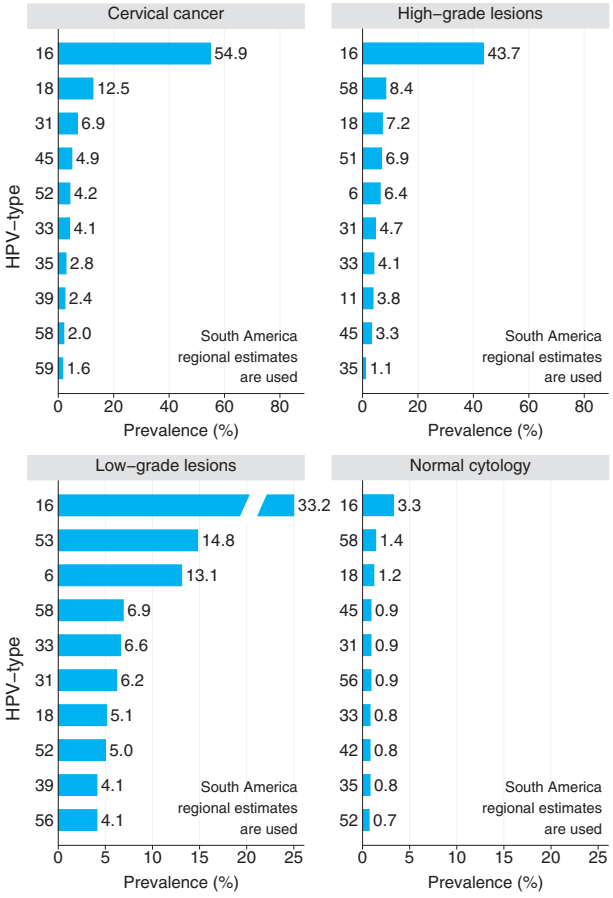
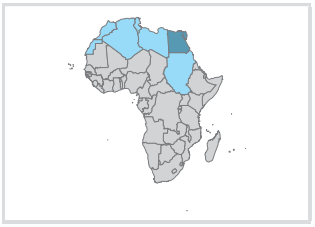



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 77 |

DTP: Diphtheria, Tetanus and Pertussis

# EGYPT



has a population of 24.75 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 2713 women are diagnosed with cervical cancer and 2178 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Egypt, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Egypt. However, in Northern Africa, the region Egypt belongs to, about 21.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 72.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 7.8 | 6.3 |
| Age-standardized rate | 9.7 | 7.9 |
| Cumulative risk 0-64 years (%) | 0.8 | 0.6 |
| SIR/SMR | 58 | 88 |
| Annual number of new cases/deaths | 2713 | 2178 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

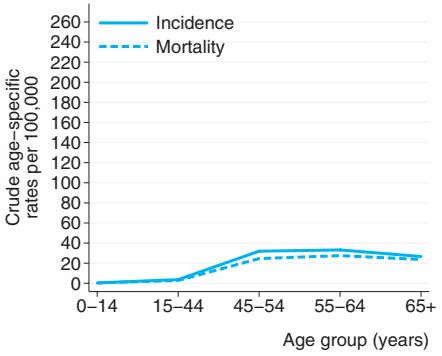



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 18 |
| Fertility rate (live births per women) | 3.6 |
| Oral Contraceptive Use (%) | 9.3 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 172 | 21.5 (15.6-28.4) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type† | 335 | 95.5* (92.7-97.5) |
| Cervical cancer: HPV 16/18† | 335 | 72.5 (67.4-77.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Northern Africa regional estimate
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

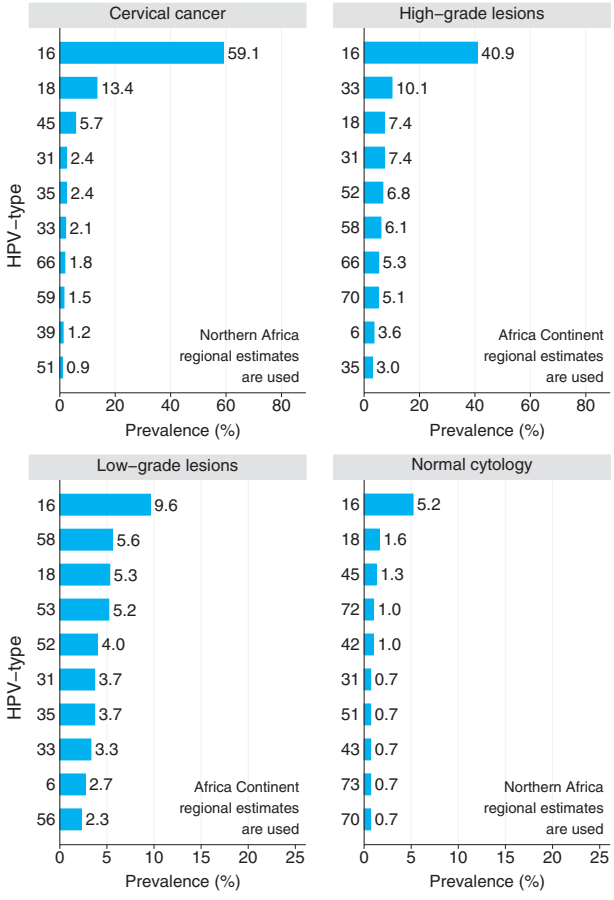



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# EL SALVADOR

has a population of 2.35 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1213 women are diagnosed with cervical cancer and 609 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in El Salvador, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of El Salvador. However, in Central America, the region El Salvador belongs to, about 20.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 58.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 36.6 | 18.4 |
| Age-standardized rate | 45.6 | 23.5 |
| Cumulative risk 0-64 years (%) | 3.3 | 1.5 |
| SIR/SMR | 277 | 260 |
| Annual number of new cases/deaths | 1213 | 609 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

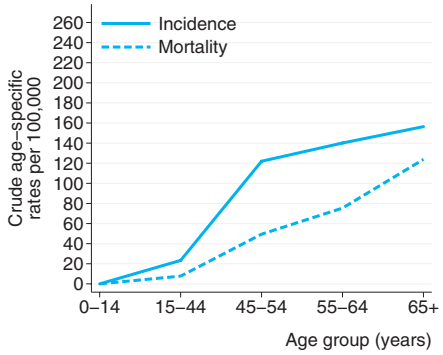



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.9 |
| Smoking prevalence in women (%) | 14.8 |
| Fertility rate (live births per women) | 3.6 |
| Oral Contraceptive Use (%) | 5.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 10232 | 20.5 (19.7-21.3) |
| Low-grade lesions† | 390 | 55.1 (50.0-60.1) |
| High-grade lesions† | 280 | 86.8 (82.2-90.5) |
| Cervical cancer: any type† | 341 | 90.3* (86.7-93.2) |
| Cervical cancer: HPV 16/18† | 341 | 58.4 (52.9-63.6) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Central America regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

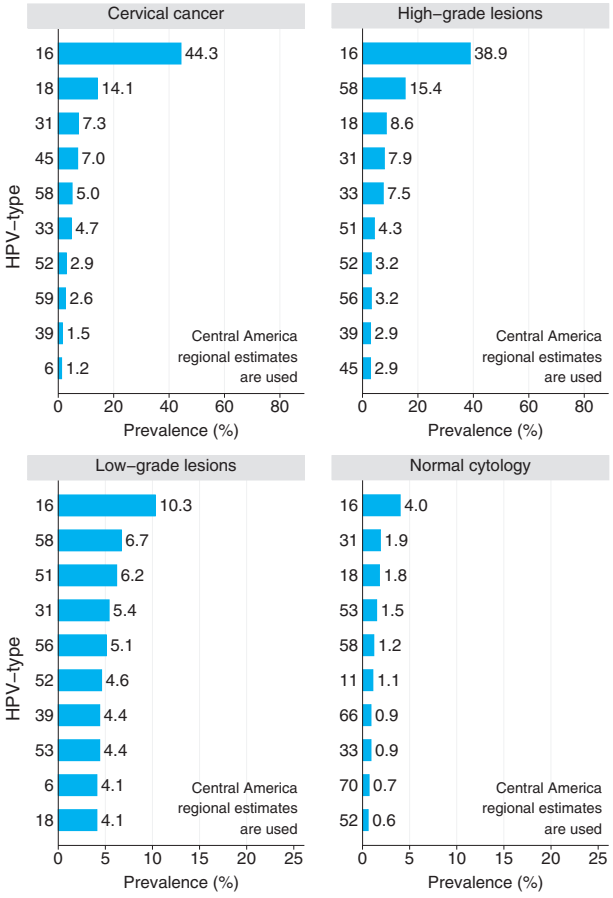
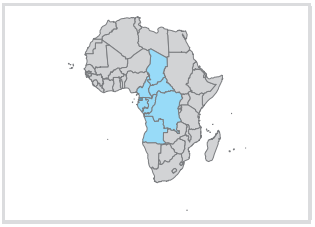



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 96 |
| Percentage of districts with >=80% DTP3 coverage | 52 |

DTP: Diphtheria, Tetanus and Pertussis

# EQUATORIAL GUINEA



has a population of 142517 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 45 women are diagnosed with cervical cancer and 37 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Equatorial Guinea, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Equatorial Guinea. However, in Africa Continent about 23.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 18.5 | 15.1 |
| Age-standardized rate | 28 | 23 |
| Cumulative risk 0-64 years (%) | 1.9 | 1.5 |
| SIR/SMR | 162 | 250 |
| Annual number of new cases/deaths | 45 | 37 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

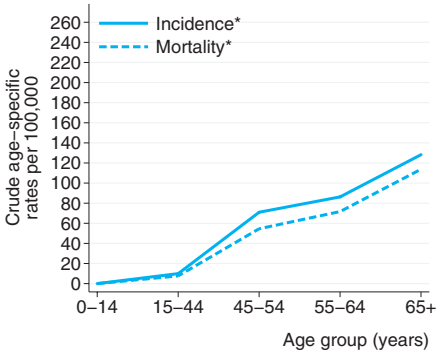



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 3.2 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 6226 | 23.0 (21.9-24.0) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type‡ | 1339 | 93.9* (92.5-95.1) |
| Cervical cancer: HPV 16/18‡ | 1339 | 70.1 (67.5-72.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

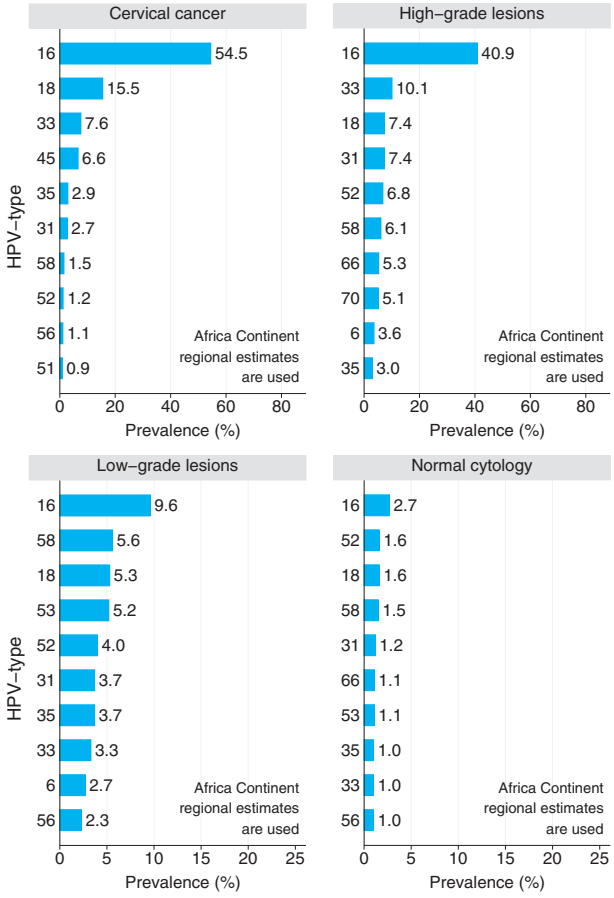
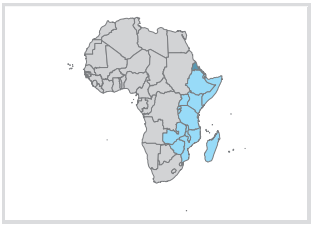



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 33 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# ERITREA



has a population of 1.26 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 548 women are diagnosed with cervical cancer and 438 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Eritrea, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Eritrea. However, in Eastern Africa, the region Eritrea belongs to, about 35.4% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 81.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 27.3 | 21.9 |
| Age-standardized rate | 42.7 | 34.6 |
| Cumulative risk 0-64 years (%) | 3.2 | 2.6 |
| SIR/SMR | 252 | 390 |
| Annual number of new cases/deaths | 548 | 438 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

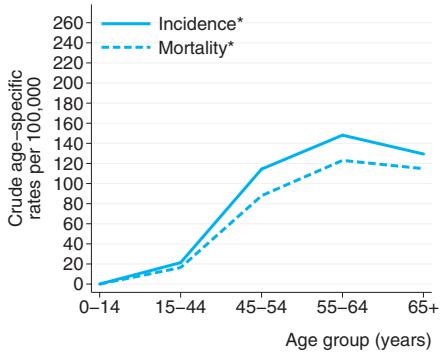



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 2.4 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 5.2 |
| Oral Contraceptive Use (%) | 1.4 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2144 | 35.4 (33.4-37.5) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type† | 478 | 96.4* (94.4-97.9) |
| Cervical cancer: HPV 16/18† | 478 | 81.8 (78.0-85.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

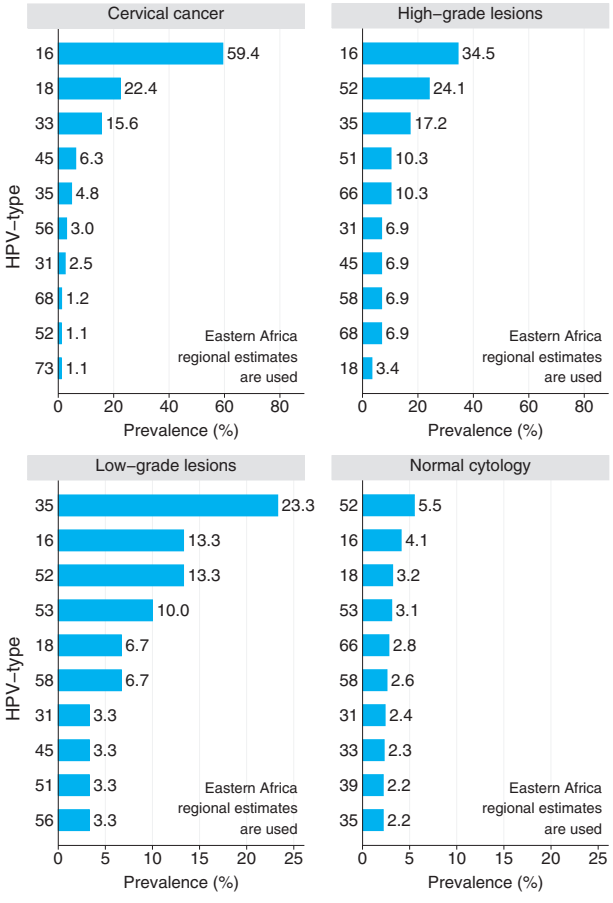



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 97 |
| Percentage of districts with >=80% DTP3 coverage | 17 |

DTP: Diphtheria, Tetanus and Pertussis

# ESTONIA

has a population of 619591 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 156 women are diagnosed with cervical cancer and 74 die from the disease. Cervical cancer ranks as the 6th most frequent cancer in women in Estonia, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Estonia. However, in Northern Europe, the region Estonia belongs to, about 8.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 76.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 21.4 | 10.3 |
| Age-standardized rate | 15.5 | 6.6 |
| Cumulative risk 0-64 years (%) | 1.2 | 0.5 |
| SIR/SMR | 90 | 72 |
| Annual number of new cases/deaths | 156 | 74 |
| Ranking of cervical cancer (all ages) † | 6th | 6th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

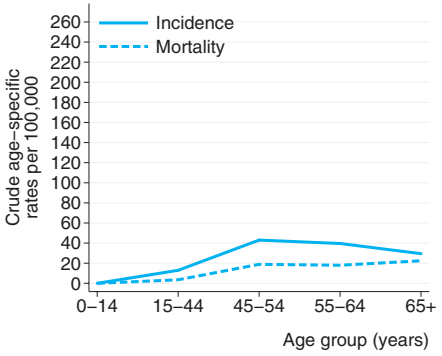



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.3 |
| Smoking prevalence in women (%) | 17.9 |
| Fertility rate (live births per women) | 1.3 |
| Oral Contraceptive Use (%) | 3.9 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 16235 | 8.0 (7.5-8.4) |
| Low-grade lesions† | 646 | 85.3 (82.3-87.9) |
| High-grade lesions† | 987 | 85.8 (83.5-87.9) |
| Cervical cancer: any type† | 2152 | 86.2* (84.7-87.7) |
| Cervical cancer: HPV 16/18† | 2152 | 76.5 (74.6-78.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Northern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

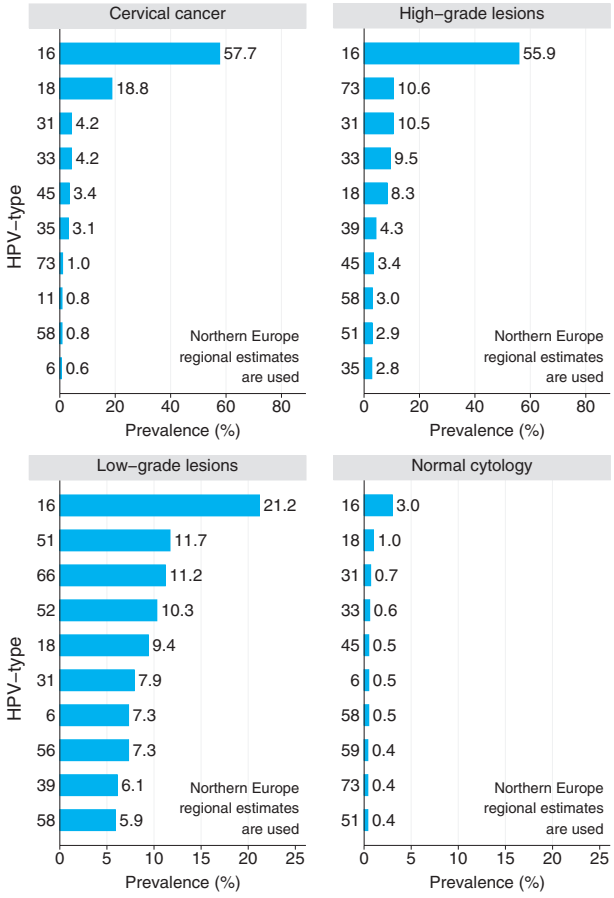
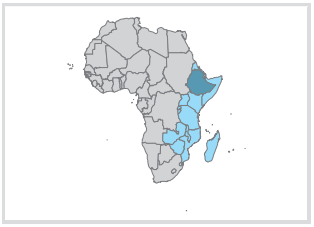



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# ETHIOPIA



has a population of 21.76 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 7619 women are diagnosed with cervical cancer and 6081 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Ethiopia, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Ethiopia. However, in Eastern Africa, the region Ethiopia belongs to, about 35.4% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Ethiopia 90.2% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 23 | 18.3 |
| Age-standardized rate | 35.9 | 29 |
| Cumulative risk 0-64 years (%) | 2.8 | 2.2 |
| SIR/SMR | 218 | 336 |
| Annual number of new cases/deaths | 7619 | 6081 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

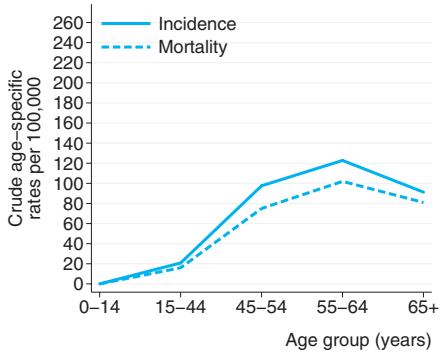



**Table 2. Cervical screening coverage**

| |
|---|
| No data available |

**Table 3. Factors contributing to cervical cancer**

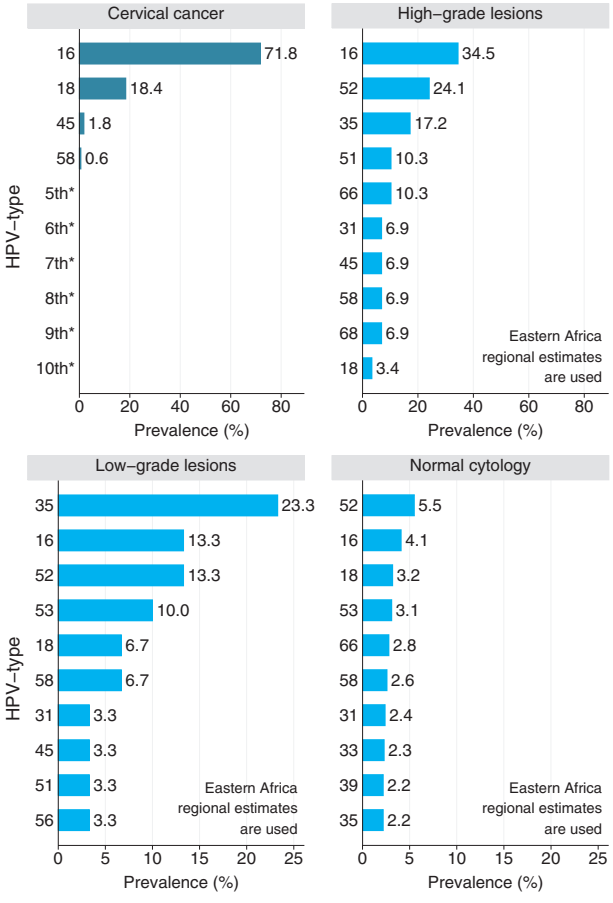
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 0.3 |
| Fertility rate (live births per women) | 5.9 |
| Oral Contraceptive Use (%) | 2.5 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2144 | 35.4 (33.4-37.5) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type | 163 | 96.9* (93.0-99.0) |
| Cervical cancer: HPV 16/18 | 163 | 90.2 (84.5-94.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



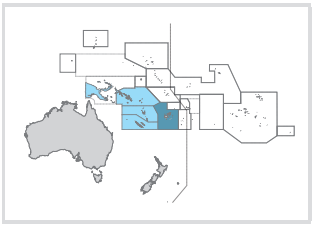

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 72 |
| Percentage of districts with >=80% DTP3 coverage | 34 |

DTP: Diphtheria, Tetanus and Pertussis

# FIJI



has a population of 286680 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 113 women are diagnosed with cervical cancer and 61 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Fiji, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Fiji , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Oceania Continent about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 27.6 | 15.1 |
| Age-standardized rate | 33.4 | 18.7 |
| Cumulative risk 0-64 years (%) | 2.5 | 1.4 |
| SIR/SMR | 199 | 209 |
| Annual number of new cases/deaths | 113 | 61 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

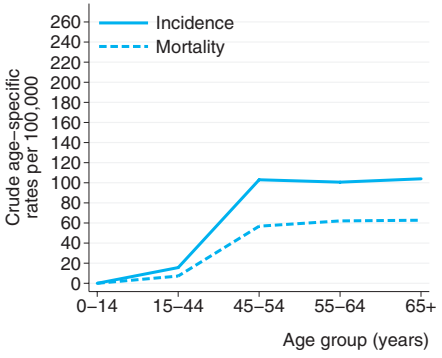



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

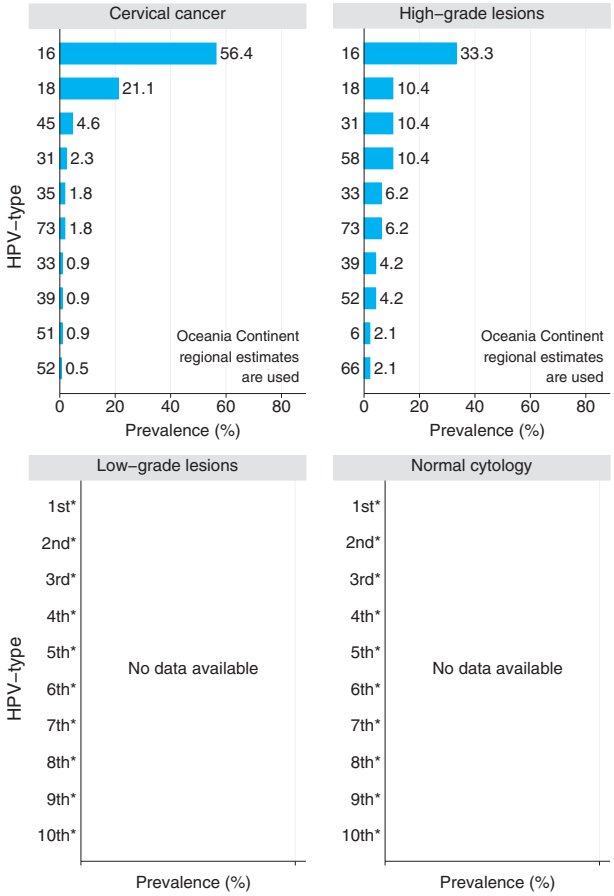
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 3.9 |
| Fertility rate (live births per women) | 3.4 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions‡ | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type‡ | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18‡ | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



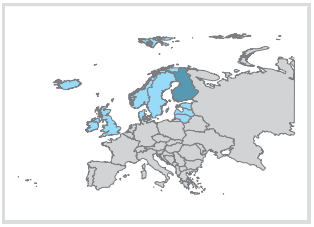

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 81 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# FINLAND



has a population of 2.23 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 164 women are diagnosed with cervical cancer and 81 die from the disease. Cervical cancer ranks as the 15th most frequent cancer in women in Finland, and the 4th most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Finland. However, in Northern Europe, the region Finland belongs to, about 8.0% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Finland 88.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 6.2 | 3 |
| Age-standardized rate | 4.3 | 1.8 |
| Cumulative risk 0-64 years (%) | 0.3 | 0.1 |
| SIR/SMR | 26 | 21 |
| Annual number of new cases/deaths | 164 | 81 |
| Ranking of cervical cancer (all ages) † | 15th | 15th |
| Ranking of cervical cancer (15-44 years) † | 4th | 5th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

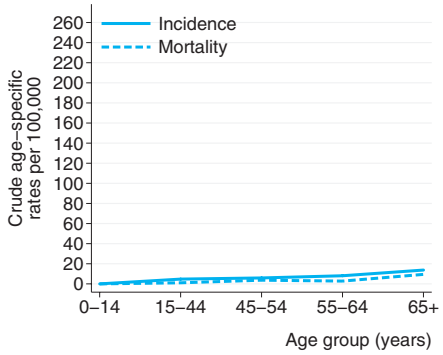



**Table 2. Cervical screening coverage**

| |
|---|
| 70% in organized screening and 93% among women in the target population (2003) |

**Table 3. Factors contributing to cervical cancer**

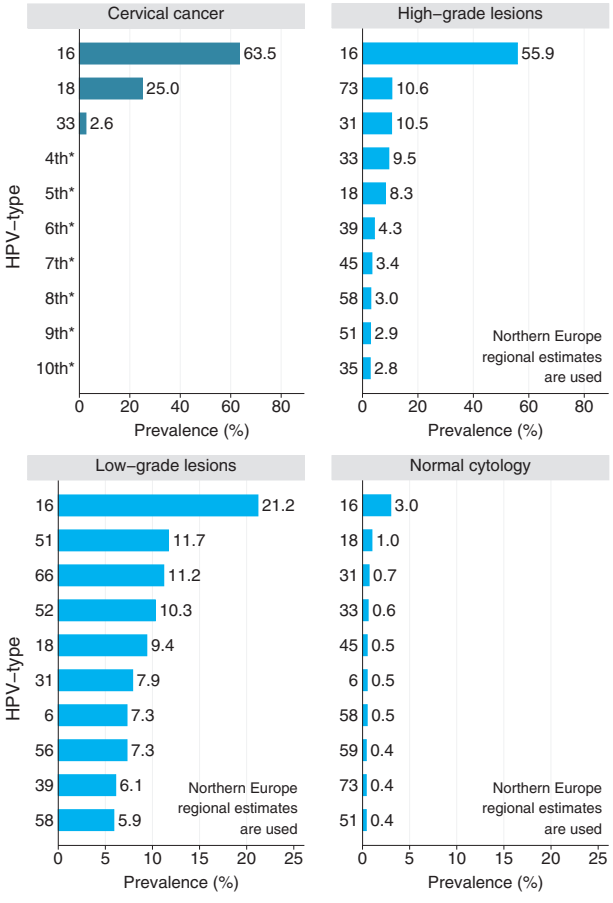
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 19.3 |
| Fertility rate (live births per women) | 1.7 |
| Oral Contraceptive Use (%) | 11.3 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 16235 | 8.0 (7.5-8.4) |
| Low-grade lesions† | 646 | 85.3 (82.3-87.9) |
| High-grade lesions† | 987 | 85.8 (83.5-87.9) |
| Cervical cancer: any type | 460 | 88* (84.7-90.9) |
| Cervical cancer: HPV 16/18 | 460 | 88.5 (85.2-91.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Northern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



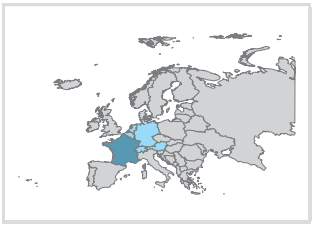

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 97 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# FRANCE



has a population of 25.67 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 4149 women are diagnosed with cervical cancer and 1647 die from the disease. Cervical cancer ranks as the 7th most frequent cancer in women in France, and the 3rd most frequent cancer among women between 15 and 44 years of age. About 12.1% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 63.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 13.6 | 5.4 |
| Age-standardized rate | 9.8 | 3.1 |
| Cumulative risk 0-64 years (%) | 0.7 | 0.2 |
| SIR/SMR | 60 | 39 |
| Annual number of new cases/deaths | 4149 | 1647 |
| Ranking of cervical cancer (all ages) † | 7th | 10th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

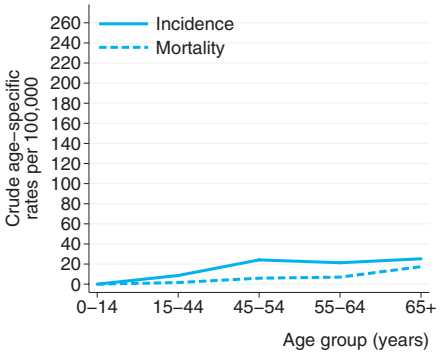



**Table 2. Cervical screening coverage**

54% in the last 3 years among women aged 20-69 years (1998-2000); 60% were screened in the last 3 years among women aged 25-65 years (2000)

**Table 3. Factors contributing to cervical cancer**

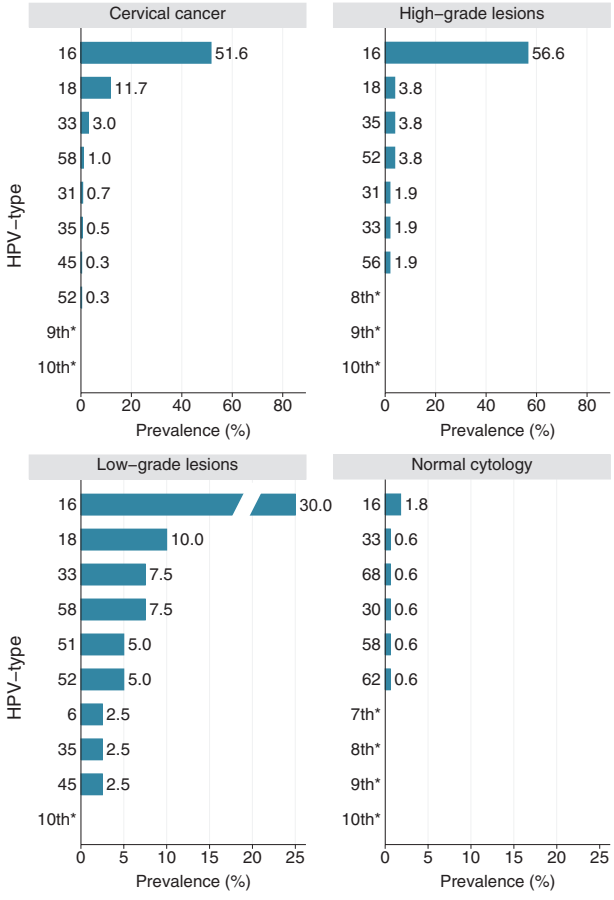
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.4 |
| Smoking prevalence in women (%) | 21.2 |
| Fertility rate (live births per women) | 1.8 |
| Oral Contraceptive Use (%) | 35.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 9070 | 12.1 (11.5-12.8) |
| Low-grade lesions | 40 | 60 (43.3-75.1) |
| High-grade lesions | 53 | 92.5 (81.8-97.9) |
| Cervical cancer: any type | 403 | 83.1* (79.1-86.7) |
| Cervical cancer: HPV 16/18 | 403 | 63.3 (58.4-68.0) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



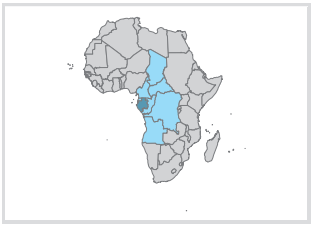

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# GABON



has a population of 419948 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 164 women are diagnosed with cervical cancer and 135 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Gabon, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Gabon. However, in Africa Continent about 23.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 25.1 | 20.5 |
| Age-standardized rate | 30.6 | 24.9 |
| Cumulative risk 0-64 years (%) | 2.2 | 1.8 |
| SIR/SMR | 188 | 277 |
| Annual number of new cases/deaths | 164 | 135 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

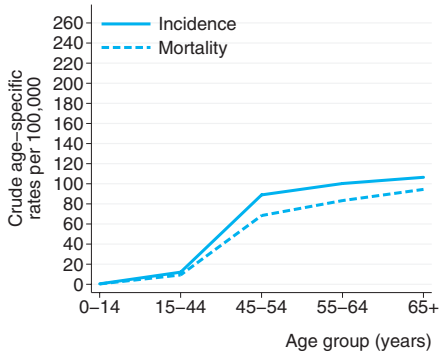



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 7.9 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 4.3 |
| Oral Contraceptive Use (%) | 4.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 6226 | 23.0 (21.9-24.0) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type‡ | 1339 | 93.9* (92.5-95.1) |
| Cervical cancer: HPV 16/18‡ | 1339 | 70.1 (67.5-72.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

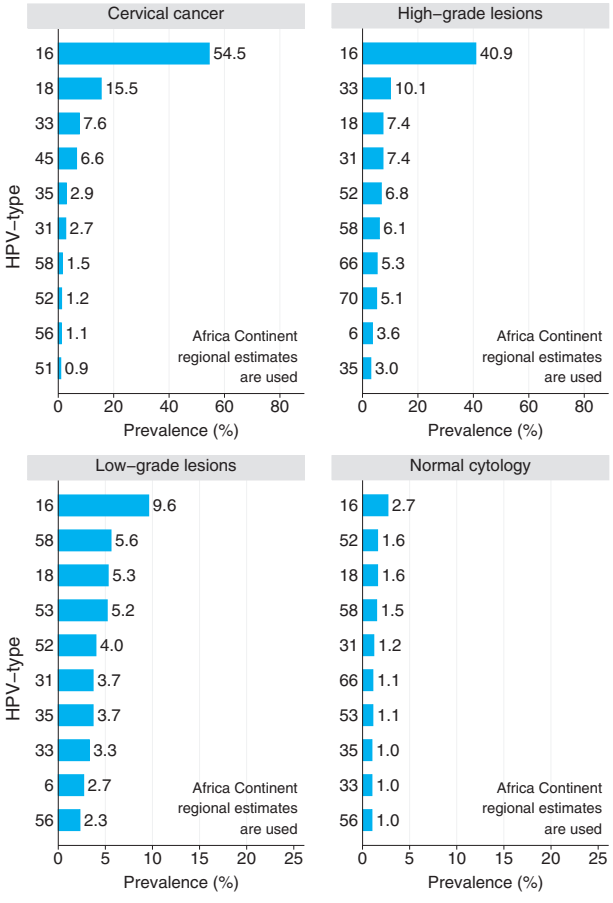
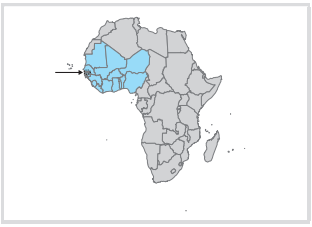



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 38 |
| Percentage of districts with >=80% DTP3 coverage | 18 |

DTP: Diphtheria, Tetanus and Pertussis

# GAMBIA



has a population of 462538 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 157 women are diagnosed with cervical cancer and 124 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Gambia, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Gambia. However, in Western Africa, the region Gambia belongs to, about 16.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 50.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 22.7 | 17.9 |
| Age-standardized rate | 28.8 | 23 |
| Cumulative risk 0-64 years (%) | 2.3 | 1.8 |
| SIR/SMR | 190 | 288 |
| Annual number of new cases/deaths | 157 | 124 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

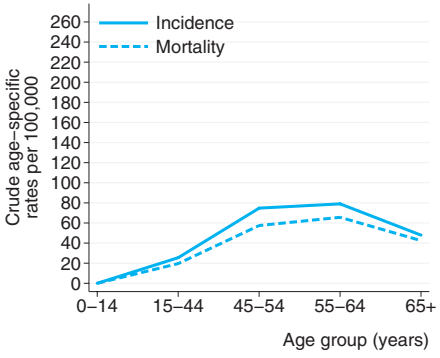



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 2.4 |
| Smoking prevalence in women (%) | 4.4 |
| Fertility rate (live births per women) | 5.9 |
| Oral Contraceptive Use (%) | 3.9 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2641 | 16.5 (15.1-18.0) |
| Low-grade lesions† | 271 | 59 (52.9-65.0) |
| High-grade lesions† | 138 | 79.7 (72.0-86.1) |
| Cervical cancer: any type† | 218 | 85.8* (80.4-90.1) |
| Cervical cancer: HPV 16/18† | 218 | 50.5 (43.6-57.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

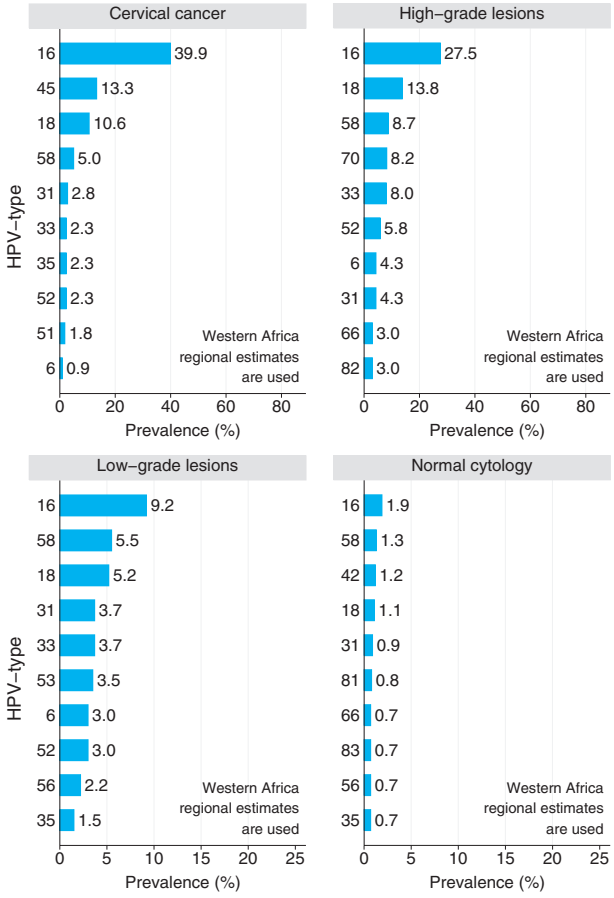



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# GEORGIA

has a population of 1.95 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 580 women are diagnosed with cervical cancer and 225 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Georgia, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Georgia. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 21.4 | 8.3 |
| Age-standardized rate | 17.5 | 5.9 |
| Cumulative risk 0-64 years (%) | 1.3 | 0.4 |
| SIR/SMR | 100 | 65 |
| Annual number of new cases/deaths | 580 | 225 |
| Ranking of cervical cancer (all ages) † | 2nd | 6th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

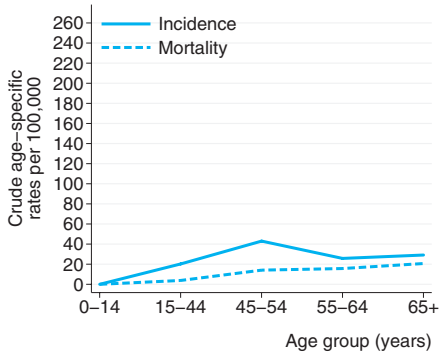



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | 6.3 |
| Fertility rate (live births per women) | 1.7 |
| Oral Contraceptive Use (%) | 1.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

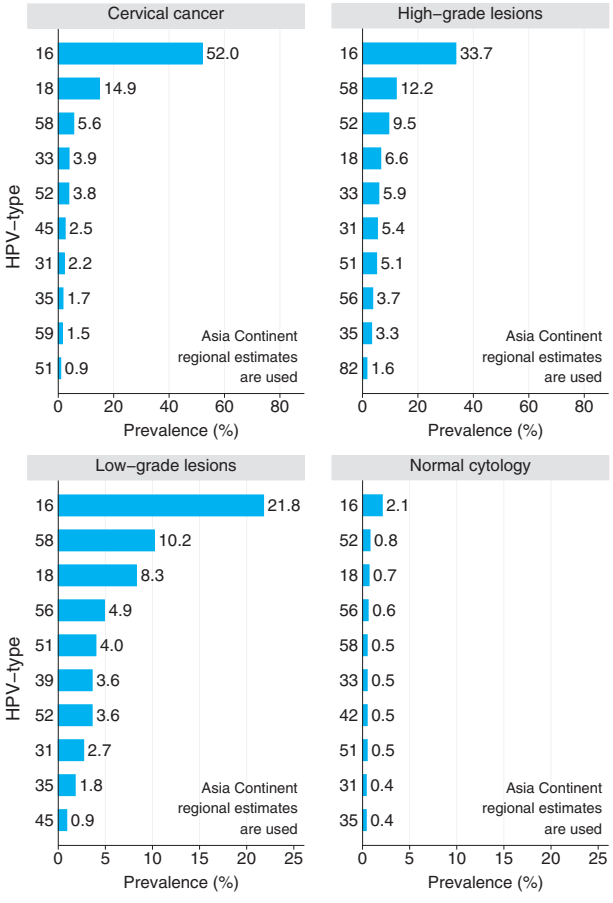



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 87 |
| Percentage of districts with >=80% DTP3 coverage | 85 |

DTP: Diphtheria, Tetanus and Pertussis

# GERMANY

has a population of 36.55 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 6133 women are diagnosed with cervical cancer and 2967 die from the disease. Cervical cancer ranks as the 8th most frequent cancer in women in Germany, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 6.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 76.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 14.7 | 7.1 |
| Age-standardized rate | 10.8 | 3.8 |
| Cumulative risk 0-64 years (%) | 0.8 | 0.2 |
| SIR/SMR | 60 | 48 |
| Annual number of new cases/deaths | 6133 | 2967 |
| Ranking of cervical cancer (all ages) † | 8th | 8th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

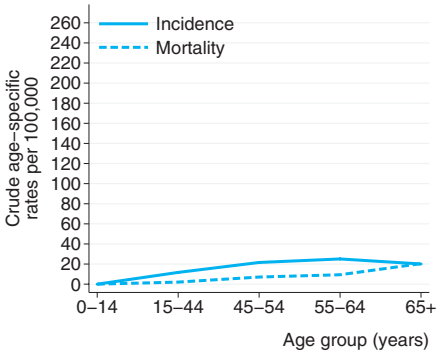



**Table 2. Cervical screening coverage**

| |
|---|
| 42-47% among women aged 25-54 years (1997) |

**Table 3. Factors contributing to cervical cancer**

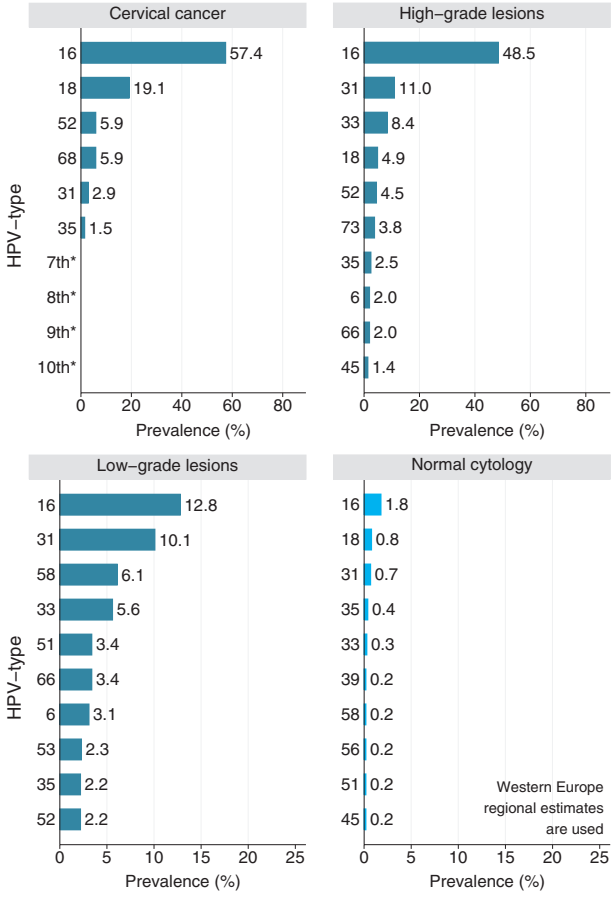
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 28 |
| Fertility rate (live births per women) | 1.4 |
| Oral Contraceptive Use (%) | 58.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 12436 | 6.3 (5.9-6.8) |
| Low-grade lesions | 179 | 64.8 (57.3-71.8) |
| High-grade lesions | 526 | 89.2 (86.2-91.7) |
| Cervical cancer: any type | 68 | 83.8* (72.9-91.6) |
| Cervical cancer: HPV 16/18 | 68 | 76.5 (64.6-85.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



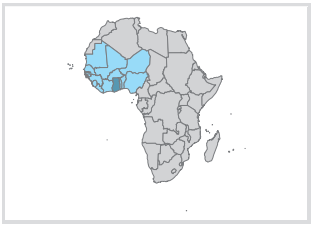

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 90 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# GHANA



has a population of 6.70 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1958 women are diagnosed with cervical cancer and 1572 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Ghana, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Ghana. However, in Western Africa, the region Ghana belongs to, about 16.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 50.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 19.4 | 15.5 |
| Age-standardized rate | 29.3 | 23.8 |
| Cumulative risk 0-64 years (%) | 2.2 | 1.8 |
| SIR/SMR | 171 | 265 |
| Annual number of new cases/deaths | 1958 | 1572 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

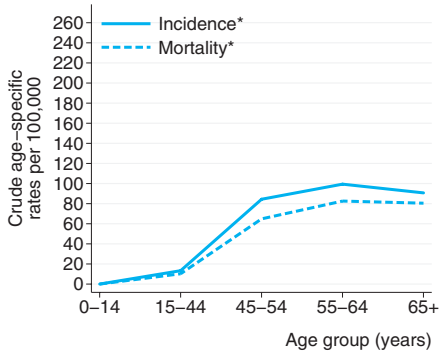



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 2.3 |
| Smoking prevalence in women (%) | 0.7 |
| Fertility rate (live births per women) | 4.5 |
| Oral Contraceptive Use (%) | 5.5 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2641 | 16.5 (15.1-18.0) |
| Low-grade lesions† | 271 | 59 (52.9-65.0) |
| High-grade lesions† | 138 | 79.7 (72.0-86.1) |
| Cervical cancer: any type† | 218 | 85.8* (80.4-90.1) |
| Cervical cancer: HPV 16/18† | 218 | 50.5 (43.6-57.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

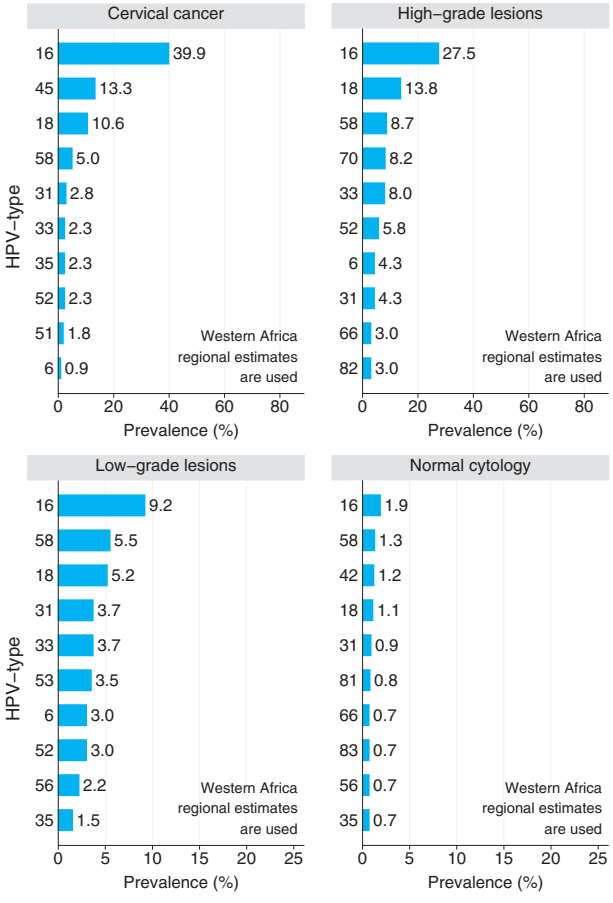



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 84 |
| Percentage of districts with >=80% DTP3 coverage | 78 |

DTP: Diphtheria, Tetanus and Pertussis

# GREECE

has a population of 4.85 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 578 women are diagnosed with cervical cancer and 239 die from the disease. Cervical cancer ranks as the 9th most frequent cancer in women in Greece, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 3.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 57.0% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 10.7 | 4.4 |
| Age-standardized rate | 7.7 | 2.5 |
| Cumulative risk 0-64 years (%) | 0.6 | 0.2 |
| SIR/SMR | 45 | 31 |
| Annual number of new cases/deaths | 578 | 239 |
| Ranking of cervical cancer (all ages) † | 9th | 10th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

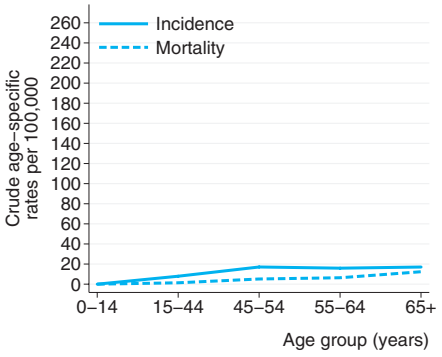



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

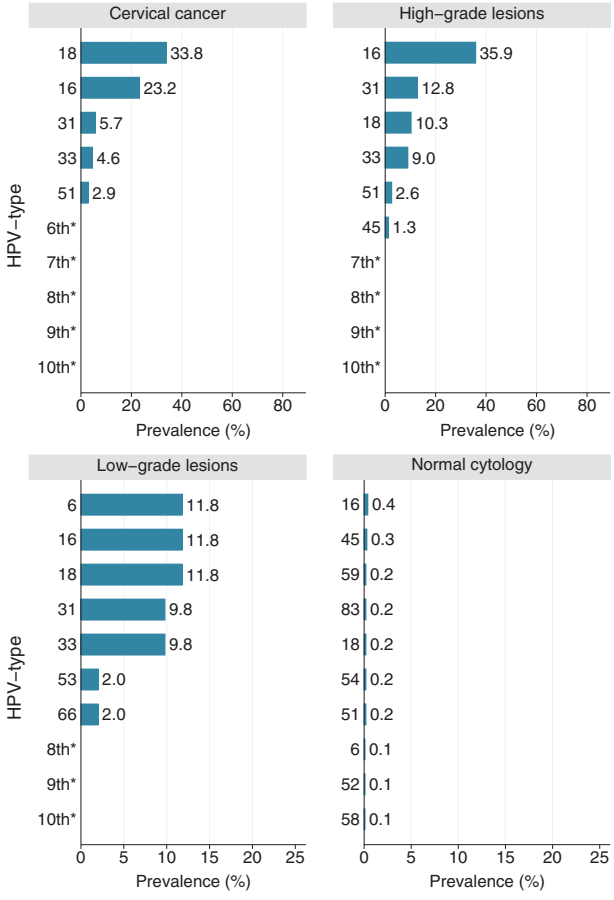
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | 29 |
| Fertility rate (live births per women) | 1.3 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 2010 | 3.6 (2.9-4.5) |
| Low-grade lesions | 51 | 90.2 (78.6-96.7) |
| High-grade lesions | 78 | 88.5 (79.2-94.6) |
| Cervical cancer: any type | 151 | 72.2* (64.3-79.2) |
| Cervical cancer: HPV 16/18 | 151 | 57.0 (48.7-65.0) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 88 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# GRENADA

Data is not yet available on the burden of cervical cancer in Grenada. However, in Caribbean, the region Grenada belongs to, current estimates indicate that every year 6369 women are diagnosed with cervical cancer and 3113 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Caribbean, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Grenada. However, in Americas Continent about 15.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Caribbean about 64.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

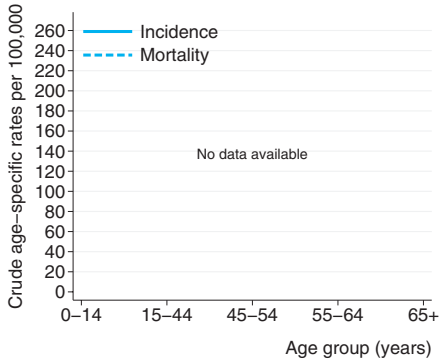



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

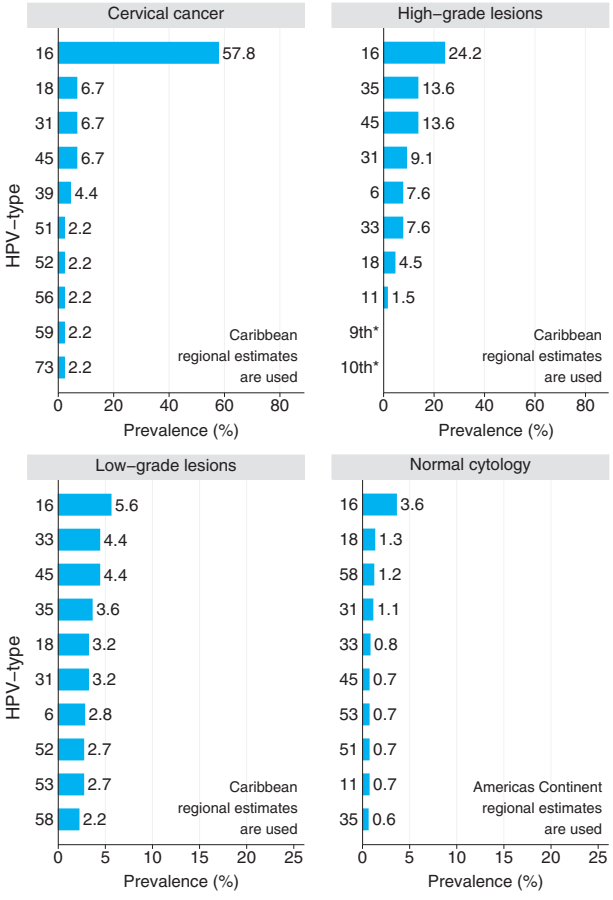
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | 15.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 40399 | 15.6 (15.2-15.9) |
| Low-grade lesions† | 248 | 60.9 (54.5-67.0) |
| High-grade lesions† | 66 | 80.3 (68.7-89.1) |
| Cervical cancer: any type† | 45 | 97.8* (88.2-99.9) |
| Cervical cancer: HPV 16/18† | 45 | 64.4 (48.8-78.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Caribbean regional estimate
‡Americas Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 91 |
| Percentage of districts with >=80% DTP3 coverage | 114 |

DTP: Diphtheria, Tetanus and Pertussis

# GUATEMALA

has a population of 3.77 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1153 women are diagnosed with cervical cancer and 628 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Guatemala, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Guatemala. However, in Central America, the region Guatemala belongs to, about 20.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 58.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 19.4 | 10.6 |
| Age-standardized rate | 30.6 | 17.2 |
| Cumulative risk 0-64 years (%) | 2.1 | 1.2 |
| SIR/SMR | 181 | 190 |
| Annual number of new cases/deaths | 1153 | 628 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

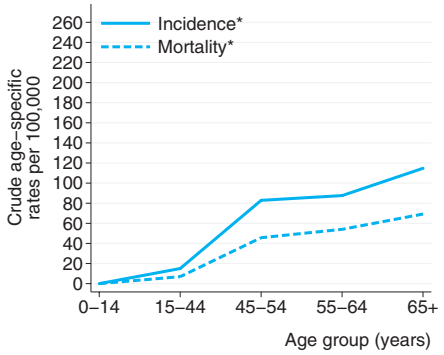



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.9 |
| Smoking prevalence in women (%) | 2 |
| Fertility rate (live births per women) | 5.1 |
| Oral Contraceptive Use (%) | 3.4 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 10232 | 20.5 (19.7-21.3) |
| Low-grade lesions† | 390 | 55.1 (50.0-60.1) |
| High-grade lesions† | 280 | 86.8 (82.2-90.5) |
| Cervical cancer: any type† | 341 | 90.3* (86.7-93.2) |
| Cervical cancer: HPV 16/18† | 341 | 58.4 (52.9-63.6) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Central America regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

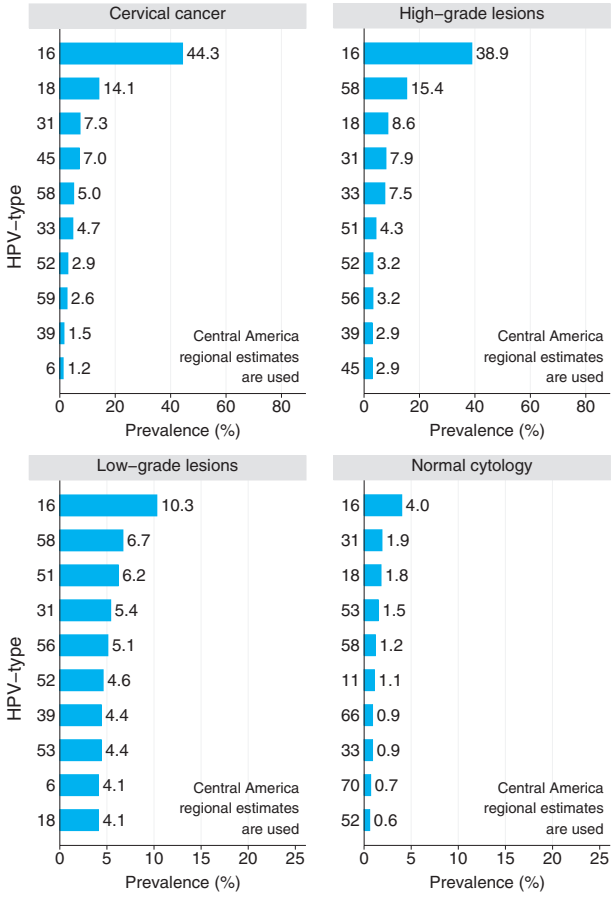
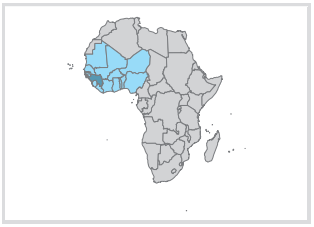



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 80 |
| Percentage of districts with >=80% DTP3 coverage | 89 |

DTP: Diphtheria, Tetanus and Pertussis

# GUINEA



has a population of 2.59 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1444 women are diagnosed with cervical cancer and 1138 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Guinea, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Guinea. However, in Western Africa, the region Guinea belongs to, about 16.5% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Guinea 44.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 34.6 | 27.3 |
| Age-standardized rate | 50.9 | 40.5 |
| Cumulative risk 0-64 years (%) | 3.9 | 3.1 |
| SIR/SMR | 328 | 505 |
| Annual number of new cases/deaths | 1444 | 1138 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

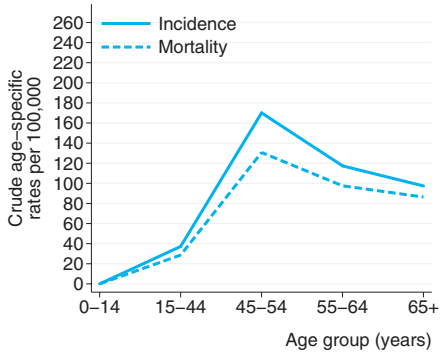



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

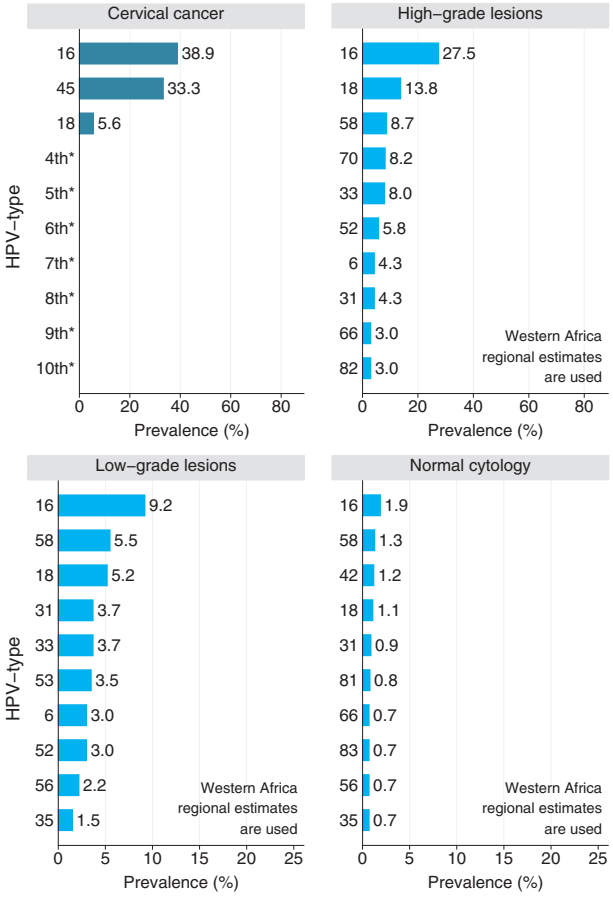
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.5 |
| Smoking prevalence in women (%) | 47.3 |
| Fertility rate (live births per women) | 5.8 |
| Oral Contraceptive Use (%) | 2.1 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2641 | 16.5 (15.1-18.0) |
| Low-grade lesions† | 271 | 59 (52.9-65.0) |
| High-grade lesions† | 138 | 79.7 (72.0-86.1) |
| Cervical cancer: any type | 18 | 100* (81.5-100.0) |
| Cervical cancer: HPV 16/18 | 18 | 44.4 (21.5-69.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



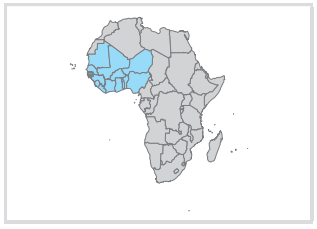

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 71 |
| Percentage of districts with >=80% DTP3 coverage | 68 |

DTP: Diphtheria, Tetanus and Pertussis

# GUINEA-BISSAU



has a population of 426064 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 124 women are diagnosed with cervical cancer and 99 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Guinea-Bissau, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Guinea-Bissau. However, in Western Africa, the region Guinea-Bissau belongs to, about 16.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 50.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 19.4 | 15.7 |
| Age-standardized rate | 29.3 | 23.8 |
| Cumulative risk 0-64 years (%) | 2.2 | 1.8 |
| SIR/SMR | 173 | 265 |
| Annual number of new cases/deaths | 124 | 99 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

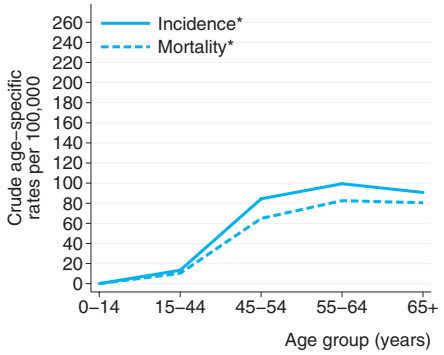



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 3.8 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | 0.3 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2641 | 16.5 (15.1-18.0) |
| Low-grade lesions† | 271 | 59 (52.9-65.0) |
| High-grade lesions† | 138 | 79.7 (72.0-86.1) |
| Cervical cancer: any type† | 218 | 85.8* (80.4-90.1) |
| Cervical cancer: HPV 16/18† | 218 | 50.5 (43.6-57.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

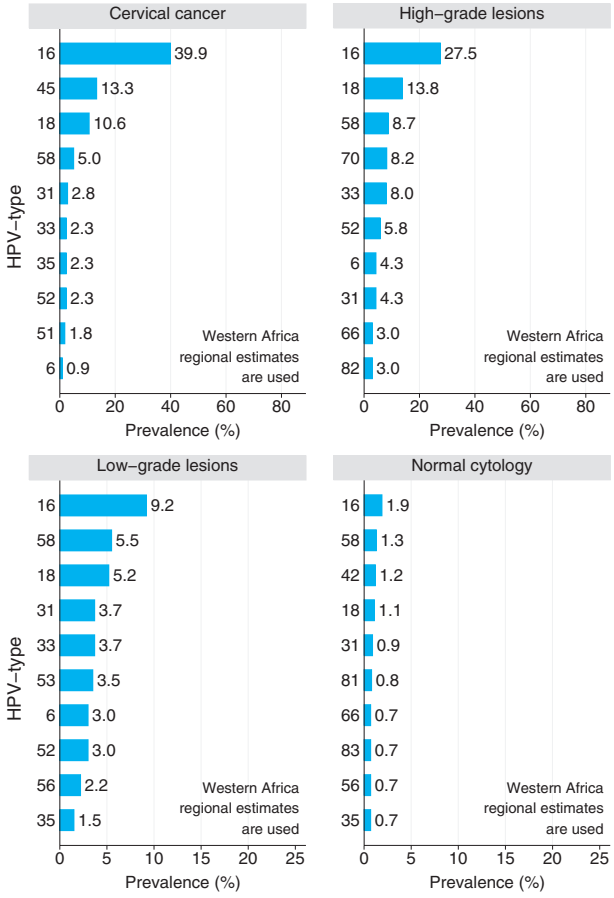



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 77 |
| Percentage of districts with >=80% DTP3 coverage | 45 |

DTP: Diphtheria, Tetanus and Pertussis

# GUYANA

has a population of 277254 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 160 women are diagnosed with cervical cancer and 71 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Guyana, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Guyana. However, in South America, the region Guyana belongs to, about 14.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 67.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 40.7 | 18.2 |
| Age-standardized rate | 47.3 | 22.2 |
| Cumulative risk 0-64 years (%) | 3.5 | 1.5 |
| SIR/SMR | 288 | 245 |
| Annual number of new cases/deaths | 160 | 71 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

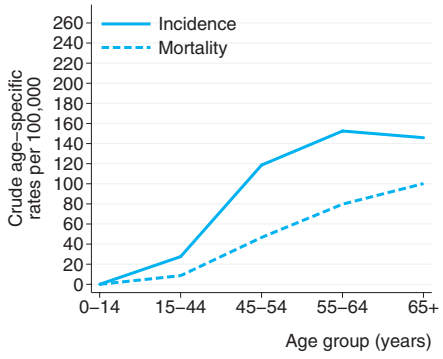



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 2.4 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | 11.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4354 | 14.3 (13.3-15.4) |
| Low-grade lesions† | 548 | 79 (75.4-82.4) |
| High-grade lesions† | 487 | 80.1 (76.3-83.5) |
| Cervical cancer: any type† | 1041 | 91.1* (89.2-92.7) |
| Cervical cancer: HPV 16/18† | 1041 | 67.3 (64.4-70.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South America regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

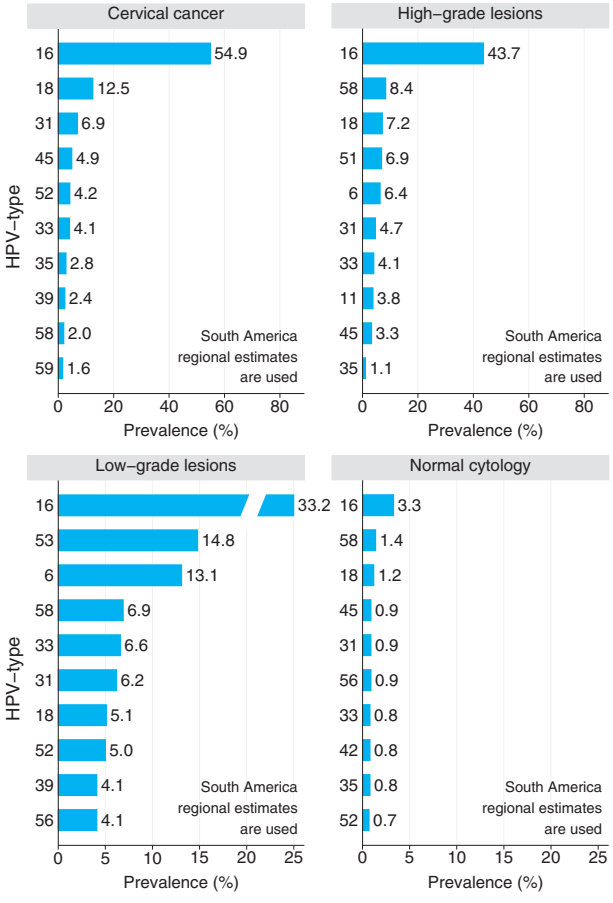



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 93 |
| Percentage of districts with >=80% DTP3 coverage | 92 |

DTP: Diphtheria, Tetanus and Pertussis

# HAITI

has a population of 2.75 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 2774 women are diagnosed with cervical cancer and 1484 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Haiti, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Haiti. However, in Americas Continent about 15.6% of women in the general population are estimated to harbour cervical HPV infection at a given time. In Caribbean, the region Haiti belongs to, about 64.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 64.7 | 34.6 |
| Age-standardized rate | 87.3 | 48.1 |
| Cumulative risk 0-64 years (%) | 6.1 | 3.4 |
| SIR/SMR | 540 | 554 |
| Annual number of new cases/deaths | 2774 | 1484 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

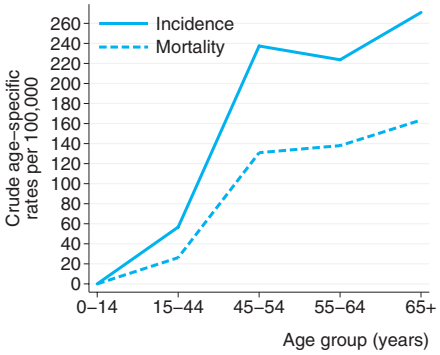



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

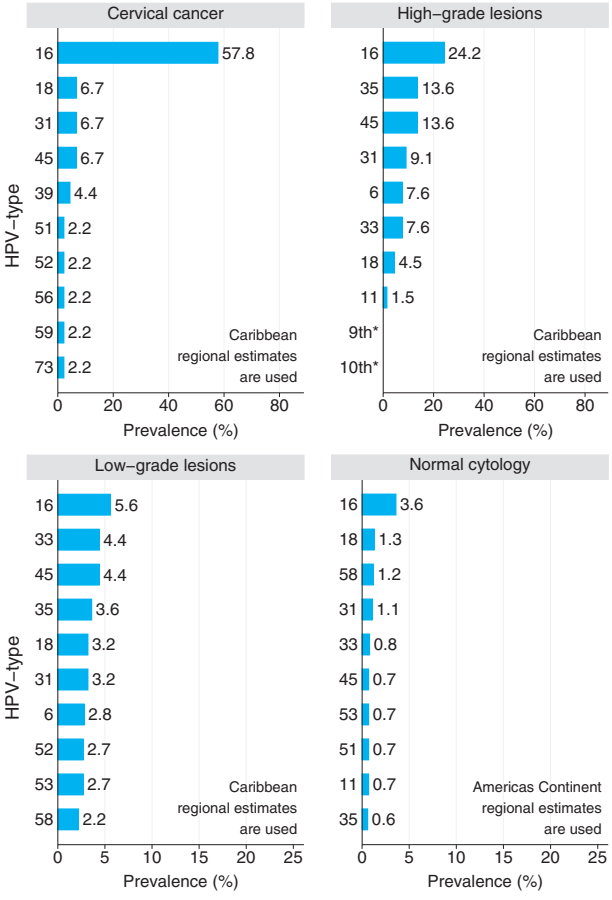
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 3.8 |
| Smoking prevalence in women (%) | 6.1 |
| Fertility rate (live births per women) | 4.7 |
| Oral Contraceptive Use (%) | 2.3 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 40399 | 15.6 (15.2-15.9) |
| Low-grade lesions† | 248 | 60.9 (54.5-67.0) |
| High-grade lesions† | 66 | 80.3 (68.7-89.1) |
| Cervical cancer: any type† | 45 | 97.8* (88.2-99.9) |
| Cervical cancer: HPV 16/18† | 45 | 64.4 (48.8-78.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Caribbean regional estimate
‡Americas Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 53 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# HONDURAS

has a population of 2.19 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 664 women are diagnosed with cervical cancer and 361 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Honduras, and the 1st most frequent cancer among women between 15 and 44 years of age. About 38.8% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 53.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 19.9 | 10.8 |
| Age-standardized rate | 30.6 | 17.2 |
| Cumulative risk 0-64 years (%) | 2.1 | 1.2 |
| SIR/SMR | 180 | 190 |
| Annual number of new cases/deaths | 664 | 361 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

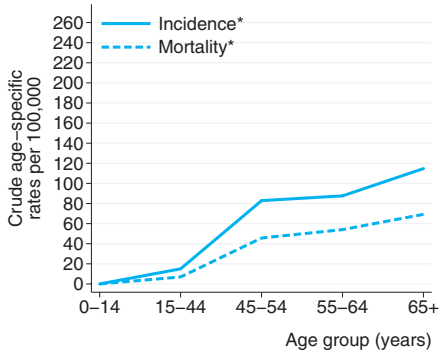



**Table 2. Cervical screening coverage**

55.4% in the last 12 month among women aged 15-49 years (1996)

**Table 3. Factors contributing to cervical cancer**

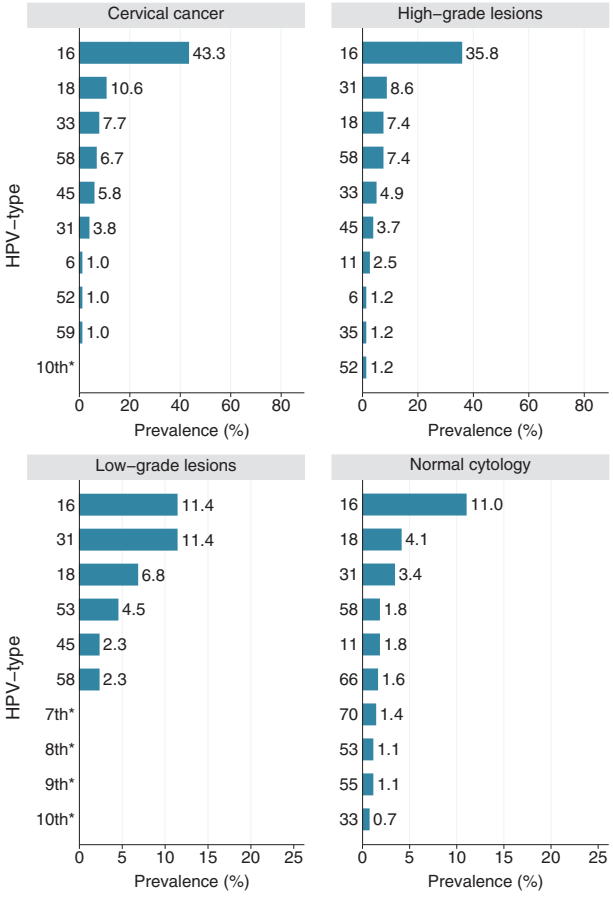
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.5 |
| Smoking prevalence in women (%) | 11 |
| Fertility rate (live births per women) | 5.0 |
| Oral Contraceptive Use (%) | 10.4 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 438 | 38.8 (34.2-43.6) |
| Low-grade lesions | 44 | 47.7 (32.5-63.3) |
| High-grade lesions | 81 | 79 (68.5-87.3) |
| Cervical cancer: any type | 104 | 79.8* (70.8-87.0) |
| Cervical cancer: HPV 16/18 | 104 | 53.8 (43.8-63.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



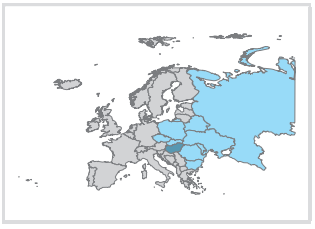

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 87 |
| Percentage of districts with >=80% DTP3 coverage | 78 |

DTP: Diphtheria, Tetanus and Pertussis

# HUNGARY



has a population of 4.51 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1042 women are diagnosed with cervical cancer and 551 die from the disease. Cervical cancer ranks as the 5th most frequent cancer in women in Hungary, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Hungary. However, in Eastern Europe, the region Hungary belongs to, about 29.1% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Hungary 95.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 20.2 | 10.7 |
| Age-standardized rate | 15.7 | 6.7 |
| Cumulative risk 0-64 years (%) | 1.2 | 0.4 |
| SIR/SMR | 85 | 74 |
| Annual number of new cases/deaths | 1042 | 551 |
| Ranking of cervical cancer (all ages) † | 5th | 7th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

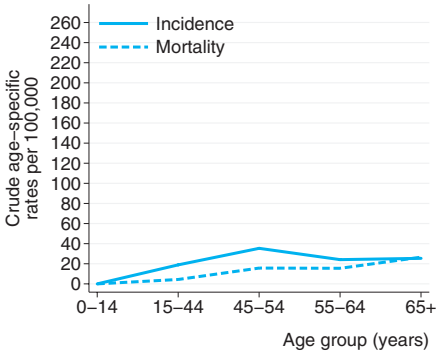



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

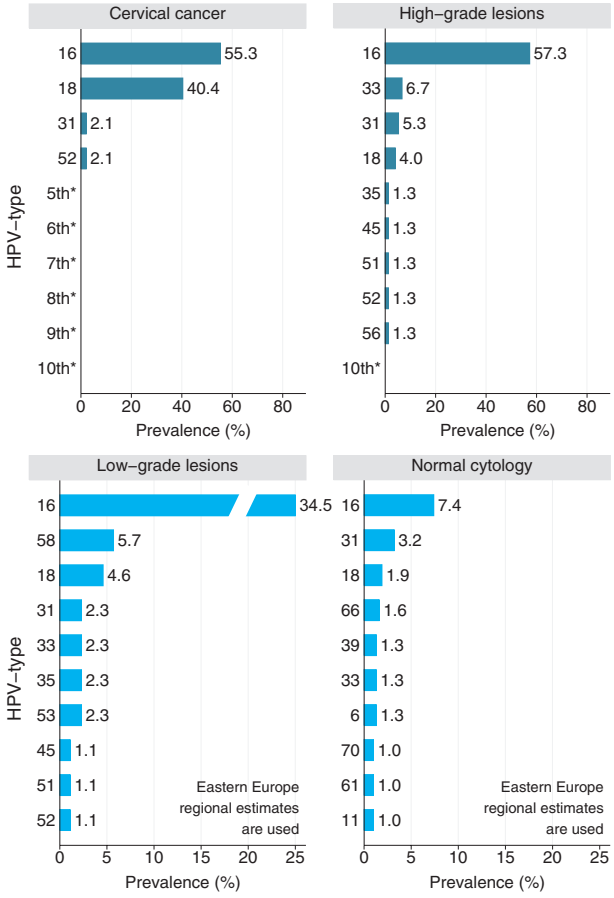
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 27.8 |
| Fertility rate (live births per women) | 1.3 |
| Oral Contraceptive Use (%) | 37.7 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 309 | 29.1 (24.1-34.5) |
| Low-grade lesions† | 87 | 52.9 (41.9-63.7) |
| High-grade lesions | 75 | 96 (88.8-99.2) |
| Cervical cancer: any type | 47 | 97.9* (88.7-99.9) |
| Cervical cancer: HPV 16/18 | 47 | 95.7 (85.5-99.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



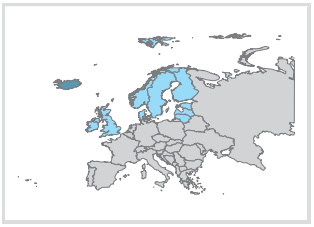

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# ICELAND



has a population of 115877 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 13 women are diagnosed with cervical cancer and 10 die from the disease. Cervical cancer ranks as the 10th most frequent cancer in women in Iceland, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Iceland. However, in Northern Europe, the region Iceland belongs to, about 8.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 76.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 9.4 | 6.2 |
| Age-standardized rate | 8.3 | 4.7 |
| Cumulative risk 0-64 years (%) | 0.6 | 0.3 |
| SIR/SMR | 48 | 55 |
| Annual number of new cases/deaths | 13 | 10 |
| Ranking of cervical cancer (all ages) † | 10th | 8th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 4th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

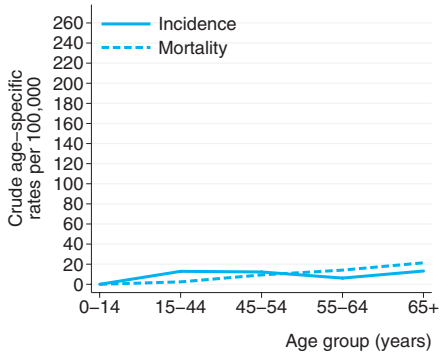



**Table 2. Cervical screening coverage**

| |
|---|
| 83% (1990-1992) |

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | 19.6 |
| Fertility rate (live births per women) | 2.1 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 16235 | 8.0 (7.5-8.4) |
| Low-grade lesions† | 646 | 85.3 (82.3-87.9) |
| High-grade lesions† | 987 | 85.8 (83.5-87.9) |
| Cervical cancer: any type† | 2152 | 86.2* (84.7-87.7) |
| Cervical cancer: HPV 16/18† | 2152 | 76.5 (74.6-78.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Northern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

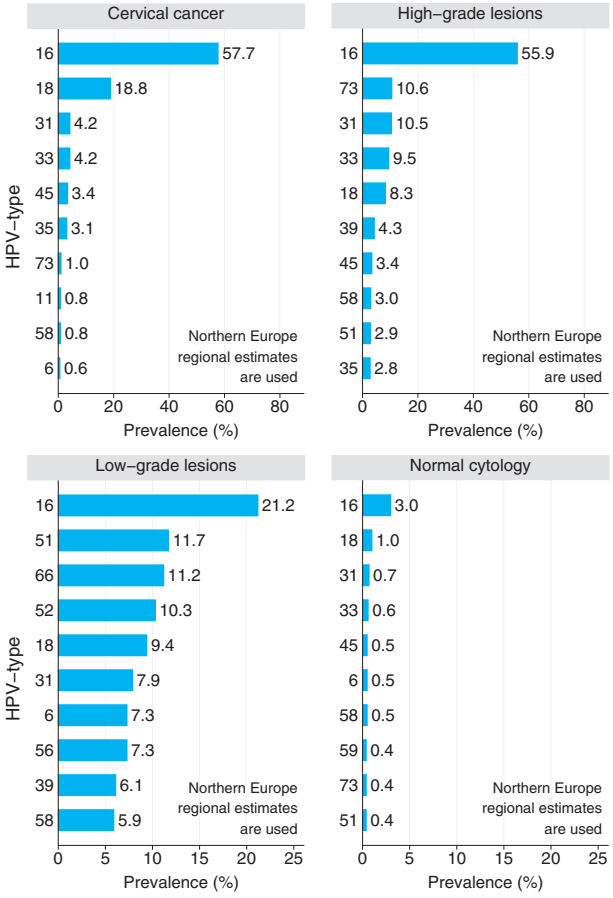



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 97 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# INDIA

has a population of 365.71 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 132082 women are diagnosed with cervical cancer and 74118 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in India, and the 1st most frequent cancer among women between 15 and 44 years of age. About 6.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 76.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 26.2 | 14.7 |
| Age-standardized rate | 30.7 | 17.8 |
| Cumulative risk 0-64 years (%) | 2.5 | 1.4 |
| SIR/SMR | 185 | 193 |
| Annual number of new cases/deaths | 132082 | 74118 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

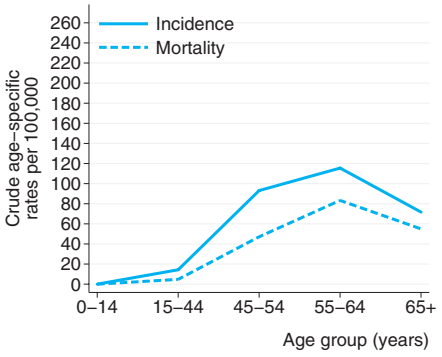



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

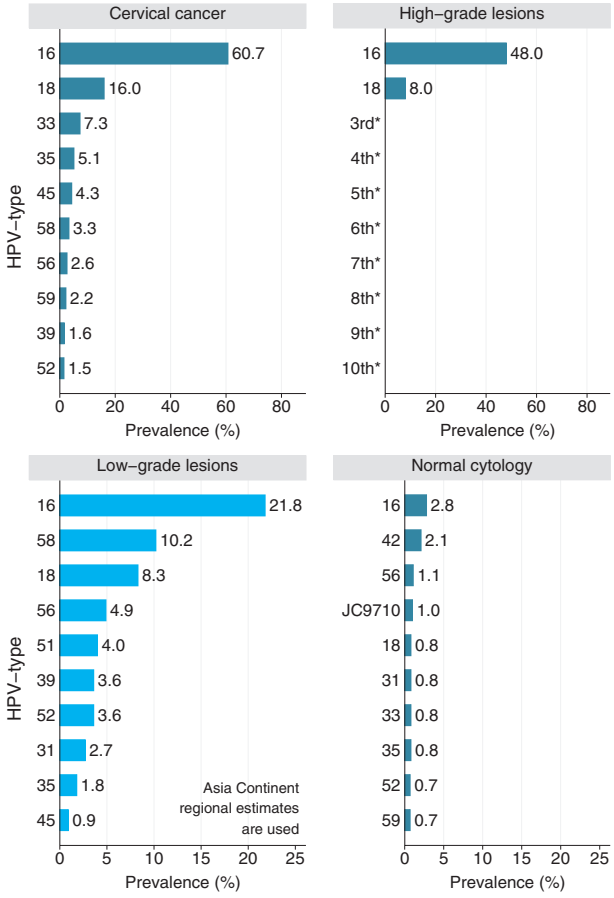
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.9 |
| Smoking prevalence in women (%) | 16.8 |
| Fertility rate (live births per women) | 3.3 |
| Oral Contraceptive Use (%) | 2.1 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 19164 | 6.6 (6.2-6.9) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions | 25 | 64 (42.5-82.0) |
| Cervical cancer: any type | 275 | 93.1* (89.4-95.8) |
| Cervical cancer: HPV 16/18 | 275 | 76.7 (71.3-81.6) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 55 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# INDONESIA

has a population of 80.57 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 15050 women are diagnosed with cervical cancer and 7566 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Indonesia, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Indonesia. However, in South-Eastern Asia, the region Indonesia belongs to, about 6.2% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Indonesia 81.0% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 13.9 | 7 |
| Age-standardized rate | 15.7 | 8.1 |
| Cumulative risk 0-64 years (%) | 1.3 | 0.6 |
| SIR/SMR | 95 | 89 |
| Annual number of new cases/deaths | 15050 | 7566 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

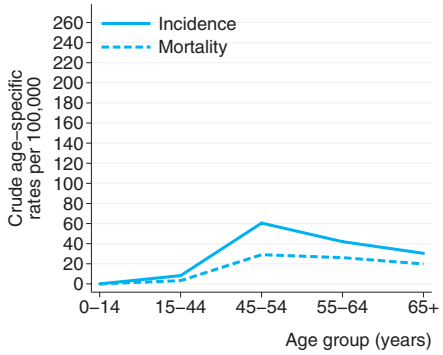



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

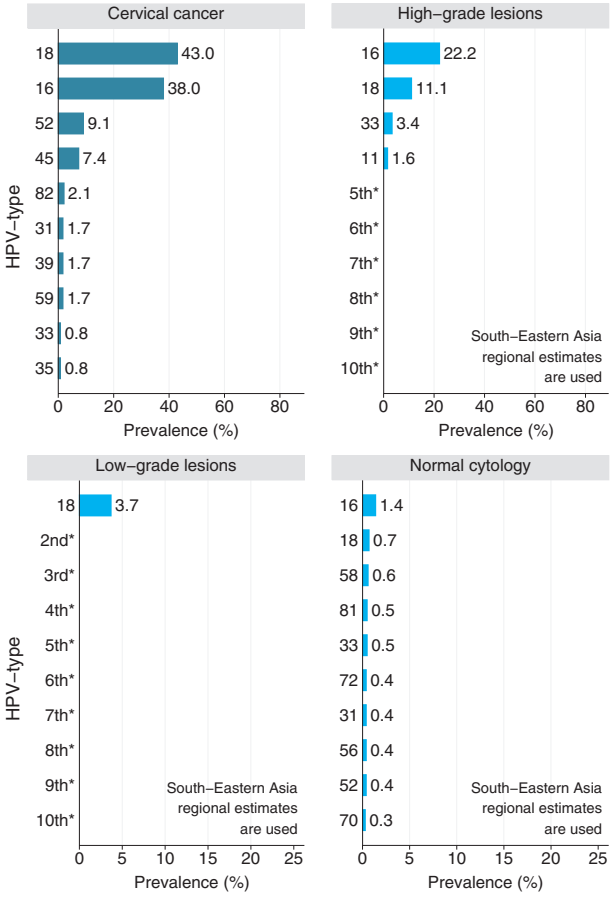
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 2.9 |
| Fertility rate (live births per women) | 2.8 |
| Oral Contraceptive Use (%) | 13.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4194 | 6.2 (5.5-6.9) |
| Low-grade lesions† | 27 | 33.3 (16.5-54.0) |
| High-grade lesions† | 207 | 61.8 (54.8-68.5) |
| Cervical cancer: any type | 121 | 97.5* (92.9-99.5) |
| Cervical cancer: HPV 16/18 | 121 | 81.0 (72.9-87.6) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South-Eastern Asia regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 70 |
| Percentage of districts with >=80% DTP3 coverage | 69 |

DTP: Diphtheria, Tetanus and Pertussis

# IRAN

has a population of 24.54 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1118 women are diagnosed with cervical cancer and 581 die from the disease. Cervical cancer ranks as the 5th most frequent cancer in women in Iran, and the 5th most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Iran. However, in Southern Asia, the region Iran belongs to, about 6.6% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Iran 71.2% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 3.2 | 1.6 |
| Age-standardized rate | 4.4 | 2.4 |
| Cumulative risk 0-64 years (%) | 0.3 | 0.2 |
| SIR/SMR | 25 | 26 |
| Annual number of new cases/deaths | 1118 | 581 |
| Ranking of cervical cancer (all ages) † | 5th | 7th |
| Ranking of cervical cancer (15-44 years) † | 5th | 8th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

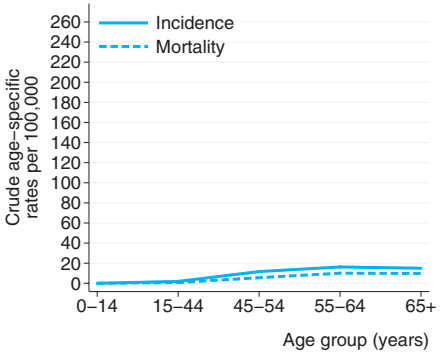



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

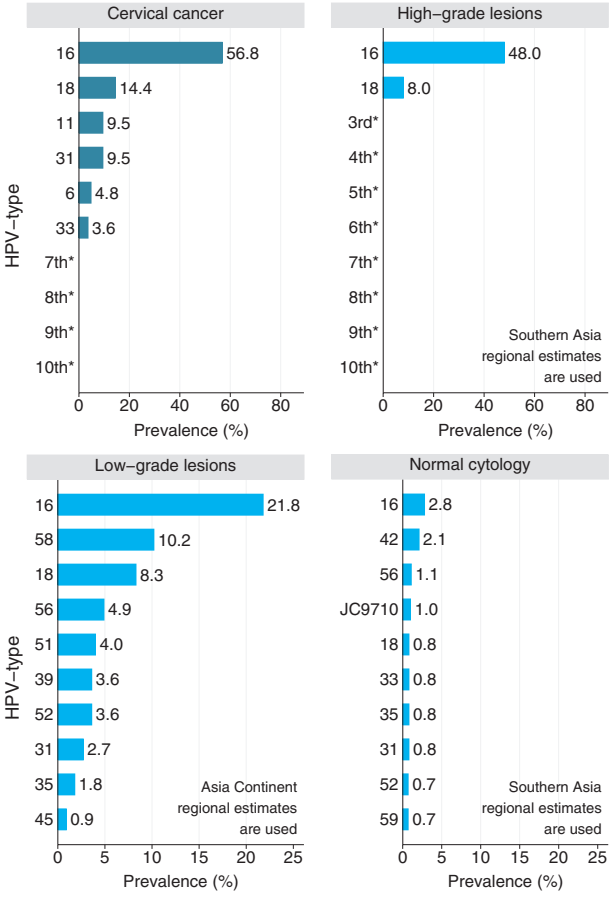
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | 2.1 |
| Fertility rate (live births per women) | 2.2 |
| Oral Contraceptive Use (%) | 20.9 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 19164 | 6.6 (6.2-6.9) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions† | 25 | 64 (42.5-82.0) |
| Cervical cancer: any type | 111 | 82.9* (74.6-89.4) |
| Cervical cancer: HPV 16/18 | 111 | 71.2 (61.8-79.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Asia regional estimate
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# IRAQ

has a population of 8.42 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 252 women are diagnosed with cervical cancer and 129 die from the disease. Cervical cancer ranks as the 12th most frequent cancer in women in Iraq, and the 6th most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Iraq. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 2.1 | 1.1 |
| Age-standardized rate | 3.3 | 1.8 |
| Cumulative risk 0-64 years (%) | 0.3 | 0.1 |
| SIR/SMR | 19 | 19 |
| Annual number of new cases/deaths | 252 | 129 |
| Ranking of cervical cancer (all ages) † | 12th | 12th |
| Ranking of cervical cancer (15-44 years) † | 6th | 8th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

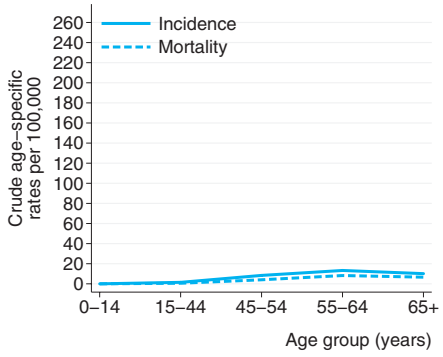



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 5 |
| Fertility rate (live births per women) | 5.2 |
| Oral Contraceptive Use (%) | 4.7 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

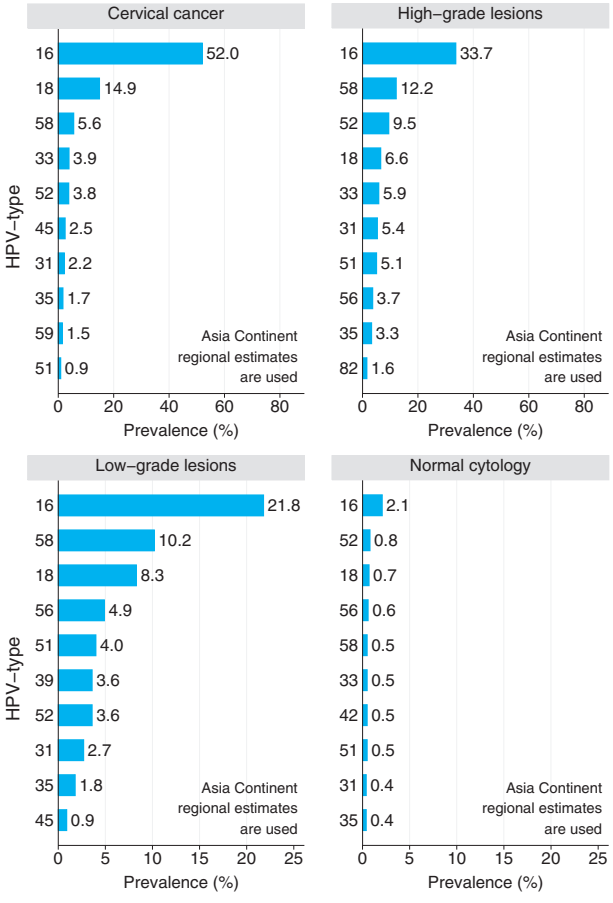



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 60 |
| Percentage of districts with >=80% DTP3 coverage | 48 |

DTP: Diphtheria, Tetanus and Pertussis

# IRELAND

has a population of 1.68 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 164 women are diagnosed with cervical cancer and 88 die from the disease. Cervical cancer ranks as the 10th most frequent cancer in women in Ireland, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Ireland. However, in Northern Europe, the region Ireland belongs to, about 8.0% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Ireland 82.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 8.4 | 4.5 |
| Age-standardized rate | 7.2 | 3.5 |
| Cumulative risk 0-64 years (%) | 0.6 | 0.2 |
| SIR/SMR | 42 | 39 |
| Annual number of new cases/deaths | 164 | 88 |
| Ranking of cervical cancer (all ages) † | 10th | 10th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

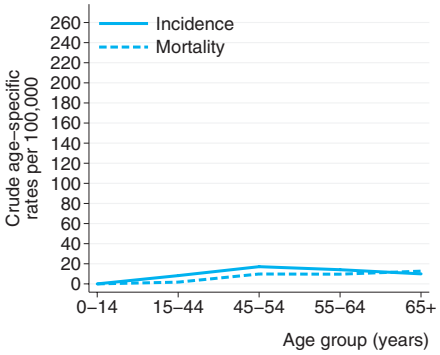



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

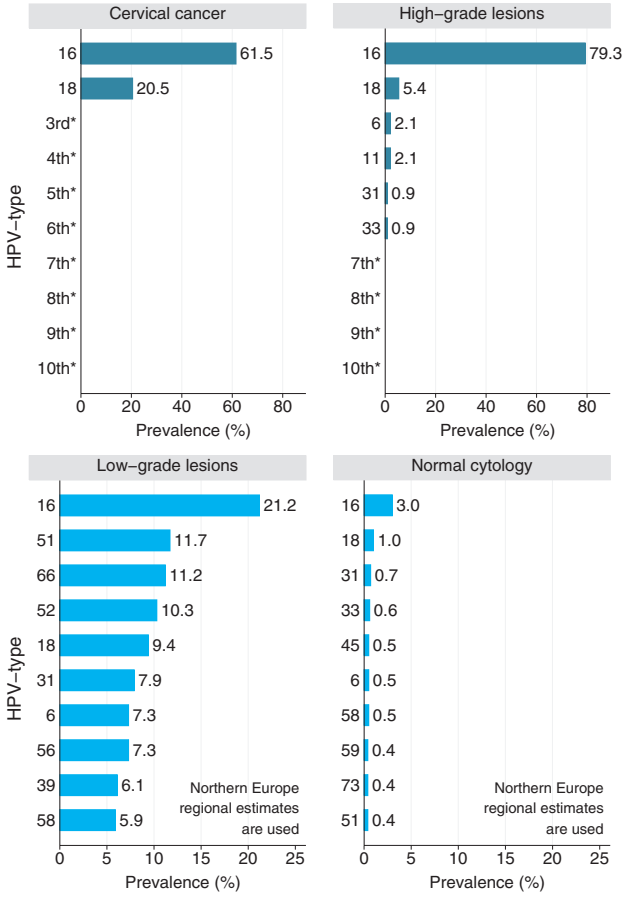
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | 26 |
| Fertility rate (live births per women) | 2.0 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 16235 | 8.0 (7.5-8.4) |
| Low-grade lesions† | 646 | 85.3 (82.3-87.9) |
| High-grade lesions | 111 | 90.1 (83.0-94.9) |
| Cervical cancer: any type | 39 | 87.2* (72.6-95.7) |
| Cervical cancer: HPV 16/18 | 39 | 82.1 (66.5-92.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Northern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 91 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# ISRAEL

has a population of 2.49 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 160 women are diagnosed with cervical cancer and 82 die from the disease. Cervical cancer ranks as the 14th most frequent cancer in women in Israel, and the 6th most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Israel. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 5.1 | 2.6 |
| Age-standardized rate | 4.5 | 2.3 |
| Cumulative risk 0-64 years (%) | 0.3 | 0.2 |
| SIR/SMR | 28 | 25 |
| Annual number of new cases/deaths | 160 | 82 |
| Ranking of cervical cancer (all ages) † | 14th | 12th |
| Ranking of cervical cancer (15-44 years) † | 6th | 6th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

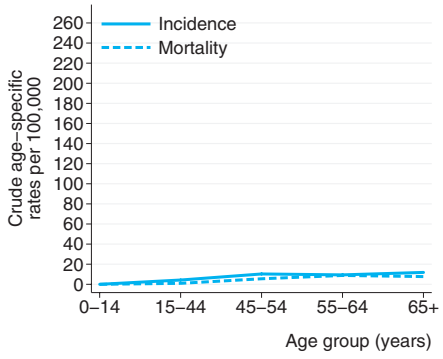



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 17.8 |
| Fertility rate (live births per women) | 3.0 |
| Oral Contraceptive Use (%) | 13.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

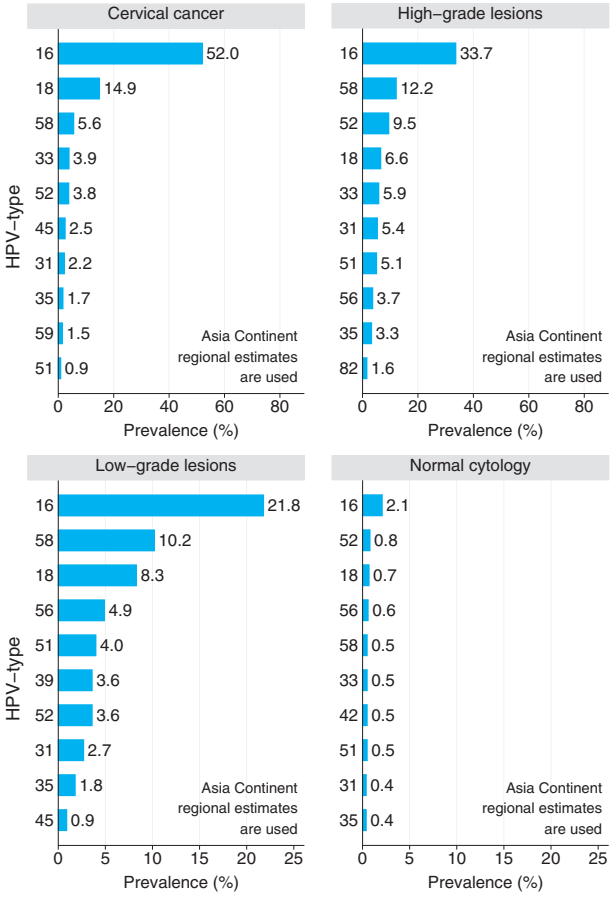



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# ITALY

has a population of 25.94 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 3418 women are diagnosed with cervical cancer and 1186 die from the disease. Cervical cancer ranks as the 10th most frequent cancer in women in Italy, and the 3rd most frequent cancer among women between 15 and 44 years of age. About 10.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 71.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 11.6 | 4 |
| Age-standardized rate | 8.1 | 2.2 |
| Cumulative risk 0-64 years (%) | 0.6 | 0.1 |
| SIR/SMR | 47 | 27 |
| Annual number of new cases/deaths | 3418 | 1186 |
| Ranking of cervical cancer (all ages) † | 10th | 13th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 5th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

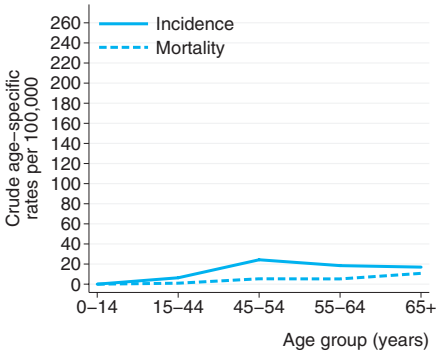



**Table 2. Cervical screening coverage**

| |
|---|
| 50% reported usual frequency of 3 years (1999-2000); 70% had a Pap smear in the last 3 years among women aged 25-64 years (2000) |

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.5 |
| Smoking prevalence in women (%) | 17.2 |
| Fertility rate (live births per women) | 1.2 |
| Oral Contraceptive Use (%) | 13.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 1698 | 10.3 (8.9-11.9) |
| Low-grade lesions | 1713 | 72.4 (70.3-74.6) |
| High-grade lesions | 125 | 85.6 (78.2-91.2) |
| Cervical cancer: any type | 279 | 92.1* (88.3-95.0) |
| Cervical cancer: HPV 16/18 | 279 | 71.7 (66.0-76.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

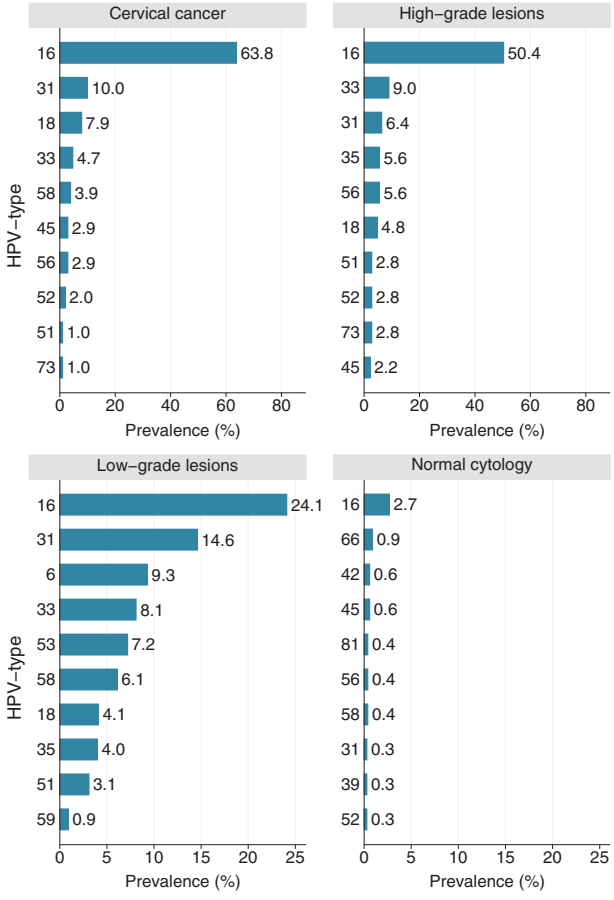



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 96 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# JAMAICA

has a population of 936303 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 383 women are diagnosed with cervical cancer and 151 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Jamaica, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Jamaica. However, in Americas Continent about 15.6% of women in the general population are estimated to harbour cervical HPV infection at a given time. In Caribbean, the region Jamaica belongs to, about 64.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 28.8 | 11.3 |
| Age-standardized rate | 31.2 | 12.2 |
| Cumulative risk 0-64 years (%) | 2.3 | 0.8 |
| SIR/SMR | 197 | 141 |
| Annual number of new cases/deaths | 383 | 151 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

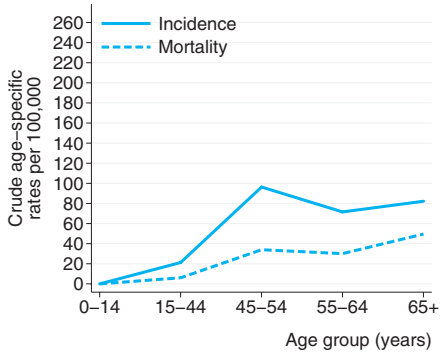



**Table 2. Cervical screening coverage**

15.3% in the last 12 months among women aged 15-49 years (1997)

**Table 3. Factors contributing to cervical cancer**

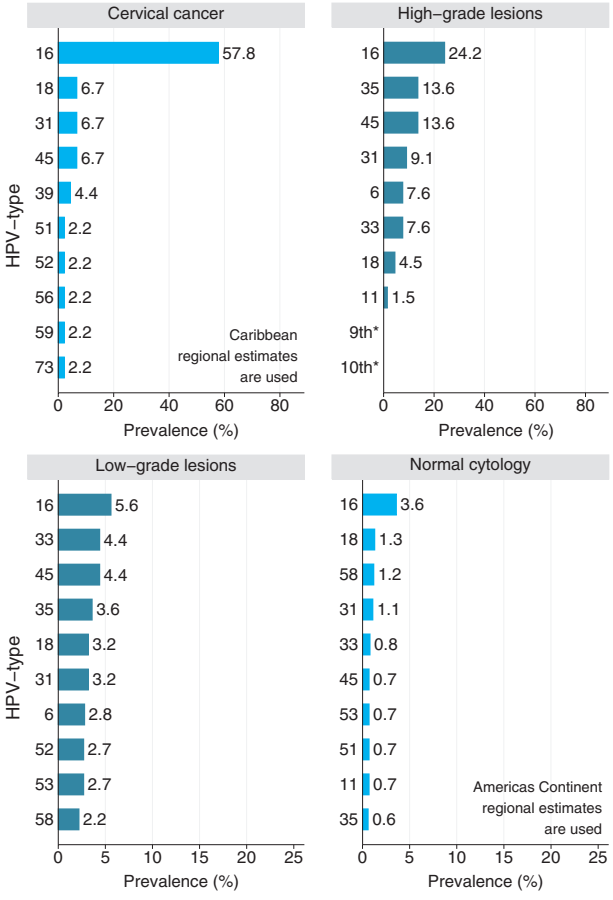
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.5 |
| Smoking prevalence in women (%) | 11.6 |
| Fertility rate (live births per women) | 2.9 |
| Oral Contraceptive Use (%) | 21.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 40399 | 15.6 (15.2-15.9) |
| Low-grade lesions | 248 | 60.9 (54.5-67.0) |
| High-grade lesions | 66 | 80.3 (68.7-89.1) |
| Cervical cancer: any type† | 45 | 97.8* (88.2-99.9) |
| Cervical cancer: HPV 16/18† | 45 | 64.4 (48.8-78.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Caribbean regional estimate
‡Americas Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 85 |
| Percentage of districts with >=80% DTP3 coverage | 69 |

DTP: Diphtheria, Tetanus and Pertussis

# JAPAN

has a population of 56.77 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 7772 women are diagnosed with cervical cancer and 3573 die from the disease. Cervical cancer ranks as the 7th most frequent cancer in women in Japan, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 7.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 52.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 12 | 5.5 |
| Age-standardized rate | 8 | 2.8 |
| Cumulative risk 0-64 years (%) | 0.5 | 0.2 |
| SIR/SMR | 47 | 35 |
| Annual number of new cases/deaths | 7772 | 3573 |
| Ranking of cervical cancer (all ages) † | 7th | 8th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 4th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

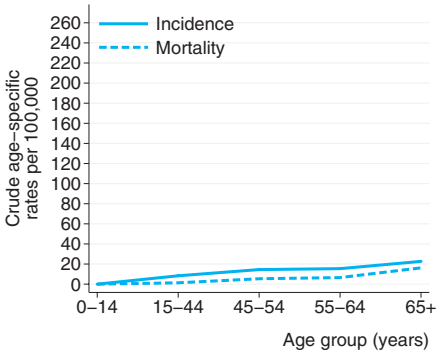



**Table 2. Cervical screening coverage**

| |
|---|
| 24% |

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 14.5 |
| Fertility rate (live births per women) | 1.3 |
| Oral Contraceptive Use (%) | 2.3o |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 12599 | 7.5 (7.0-7.9) |
| Low-grade lesions† | 225 | 71.1 (64.7-76.9) |
| High-grade lesions | 338 | 91.4 (87.9-94.2) |
| Cervical cancer: any type | 1142 | 81.6* (79.2-83.8) |
| Cervical cancer: HPV 16/18 | 1142 | 52.1 (49.2-55.0) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Asia regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

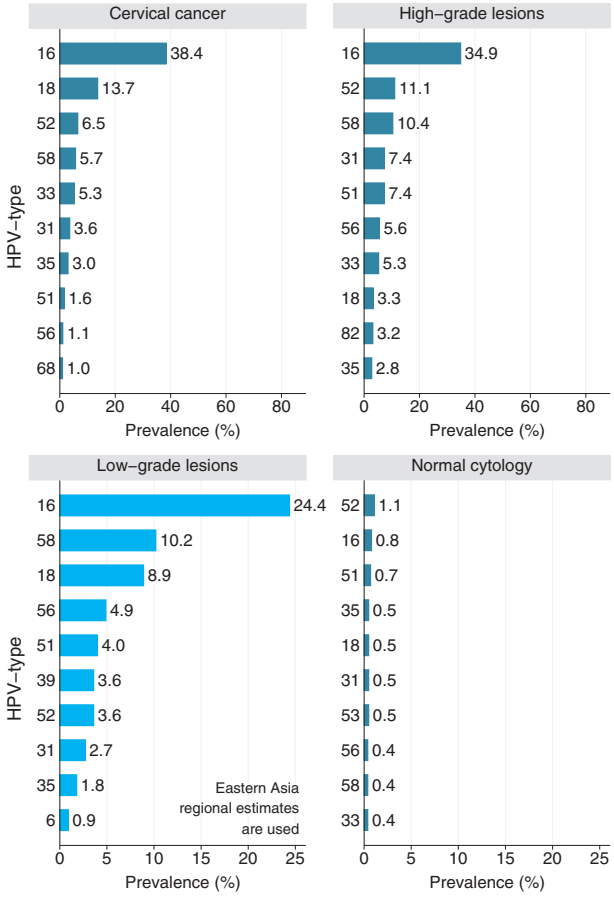



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# JORDAN

has a population of 1.71 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 60 women are diagnosed with cervical cancer and 32 die from the disease. Cervical cancer ranks as the 9th most frequent cancer in women in Jordan, and the 9th most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Jordan. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 2.4 | 1.3 |
| Age-standardized rate | 4.2 | 2.3 |
| Cumulative risk 0-64 years (%) | 0.3 | 0.2 |
| SIR/SMR | 23 | 24 |
| Annual number of new cases/deaths | 60 | 32 |
| Ranking of cervical cancer (all ages) † | 9th | 8th |
| Ranking of cervical cancer (15-44 years) † | 9th | 9th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

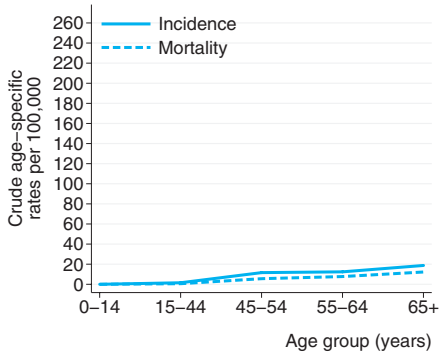



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 8.3 |
| Fertility rate (live births per women) | 3.7 |
| Oral Contraceptive Use (%) | 7.5 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

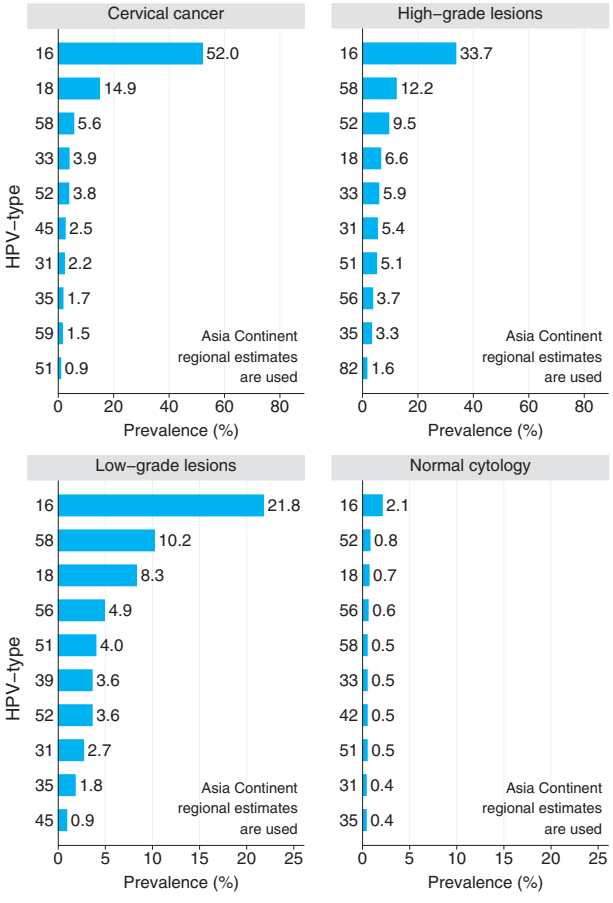



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# KAZAKHSTAN

has a population of 6.04 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1955 women are diagnosed with cervical cancer and 729 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Kazakhstan, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Kazakhstan. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 23.8 | 8.9 |
| Age-standardized rate | 21.6 | 7.9 |
| Cumulative risk 0-64 years (%) | 1.5 | 0.5 |
| SIR/SMR | 136 | 91 |
| Annual number of new cases/deaths | 1955 | 729 |
| Ranking of cervical cancer (all ages) † | 2nd | 5th |
| Ranking of cervical cancer (15-44 years) † | 1st | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

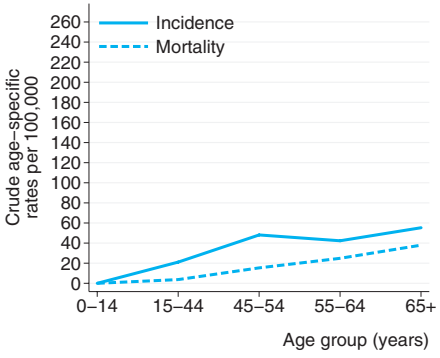



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 9.3 |
| Fertility rate (live births per women) | 2.1 |
| Oral Contraceptive Use (%) | 2.4 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

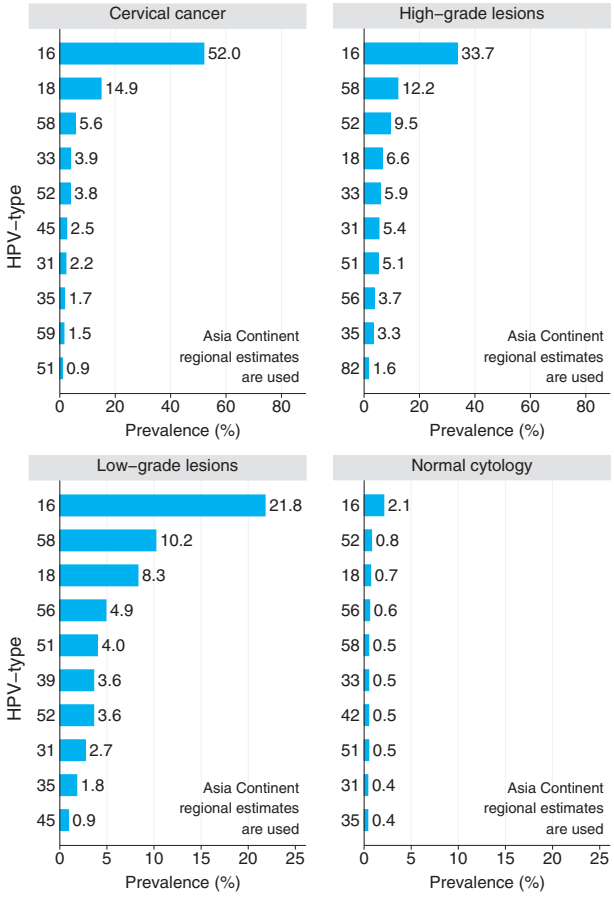
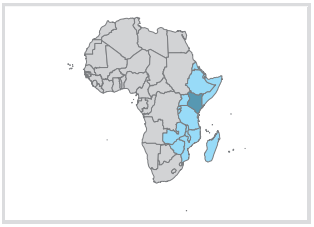



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# KENYA



has a population of 9.82 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 2635 women are diagnosed with cervical cancer and 2111 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Kenya, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 38.8% of women in the general population are estimated to harbour cervical HPV infection at a given time. Data on specific HPV-16 and 18 prevalence for Kenya among women with invasive cervical cancer is not yet available, but in Eastern Africa 81.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 16.5 | 13.2 |
| Age-standardized rate | 28.7 | 23.4 |
| Cumulative risk 0-64 years (%) | 2.2 | 1.8 |
| SIR/SMR | 163 | 261 |
| Annual number of new cases/deaths | 2635 | 2111 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

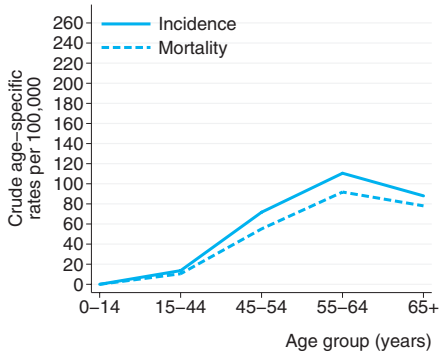



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 6.1 |
| Smoking prevalence in women (%) | 1 |
| Fertility rate (live births per women) | 4.7 |
| Oral Contraceptive Use (%) | 7.5 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 369 | 38.8 (33.8-43.9) |
| Low-grade lesions | 30 | 60 (40.6-77.3) |
| High-grade lesions | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type† | 478 | 96.4* (94.4-97.9) |
| Cervical cancer: HPV 16/18† | 478 | 81.8 (78.0-85.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

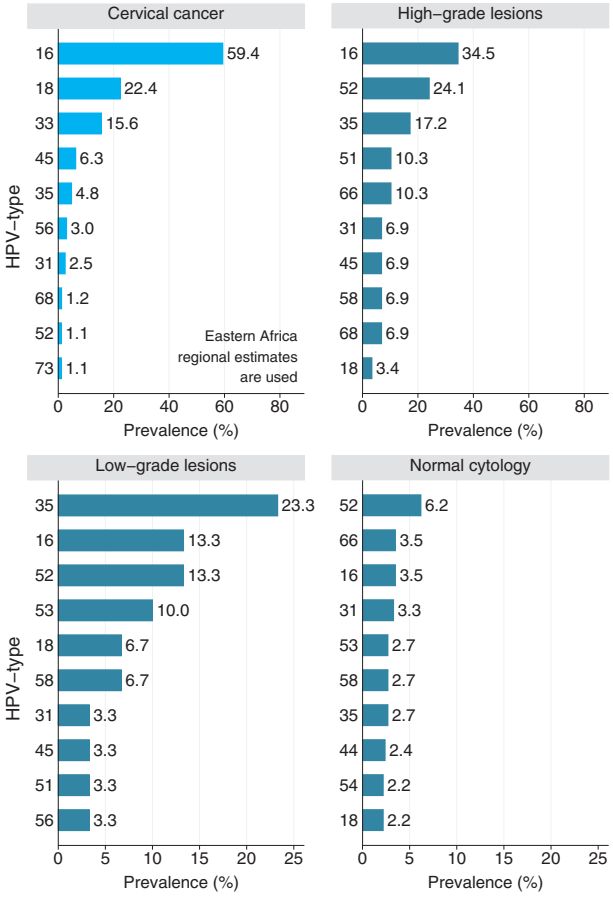
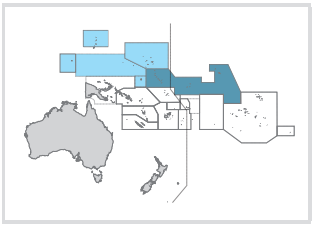



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 80 |
| Percentage of districts with >=80% DTP3 coverage | 64 |

DTP: Diphtheria, Tetanus and Pertussis

# KIRIBATI



Data is not yet available on the burden of cervical cancer in Kiribati. However, in Micronesia, the region Kiribati belongs to, current estimates indicate that every year 19 women are diagnosed with cervical cancer and 10 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in Micronesia, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Kiribati , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Oceania Continent about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

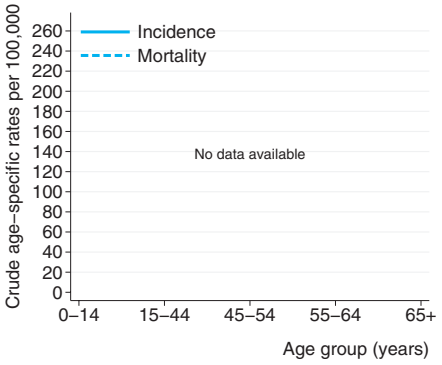



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

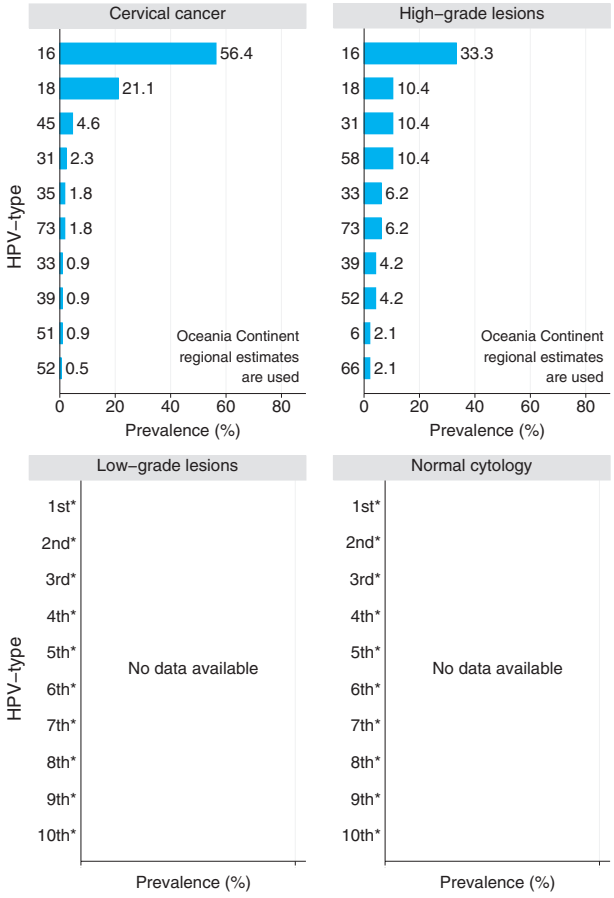
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 32.3 |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions‡ | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type‡ | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18‡ | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 86 |
| Percentage of districts with >=80% DTP3 coverage | 33 |

DTP: Diphtheria, Tetanus and Pertussis

# KUWAIT

has a population of 754513 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 34 women are diagnosed with cervical cancer and 17 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in Kuwait, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Kuwait. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 4 | 2 |
| Age-standardized rate | 6.1 | 3.4 |
| Cumulative risk 0-64 years (%) | 0.4 | 0.2 |
| SIR/SMR | 32 | 33 |
| Annual number of new cases/deaths | 34 | 17 |
| Ranking of cervical cancer (all ages) † | 4th | 7th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 4th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

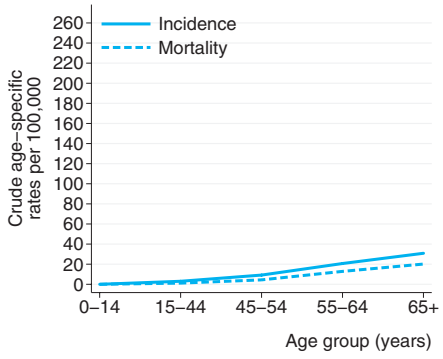



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 1.9 |
| Fertility rate (live births per women) | 4.3 |
| Oral Contraceptive Use (%) | 28.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

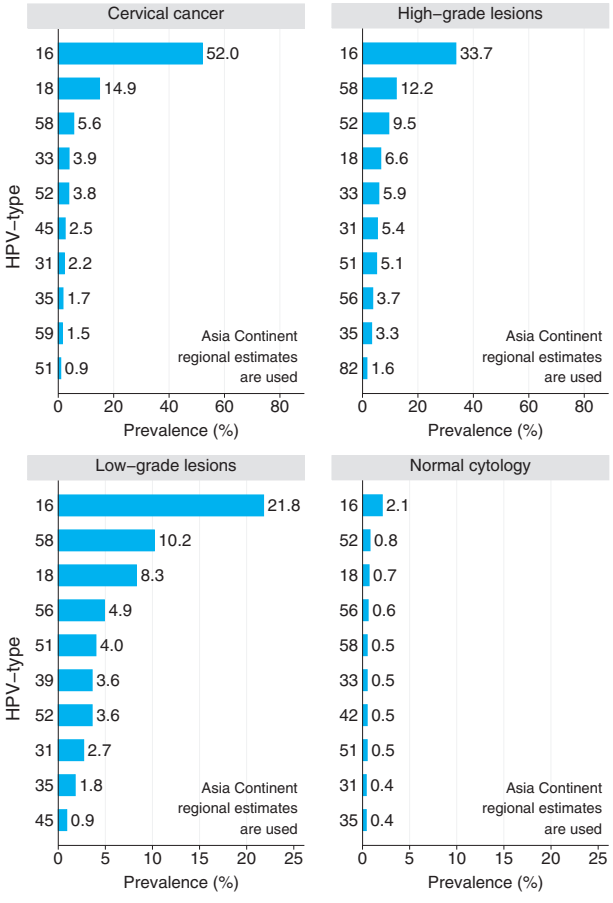



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# KYRGYZSTAN

has a population of 1.86 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 522 women are diagnosed with cervical cancer and 186 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Kyrgyzstan, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Kyrgyzstan. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 20.4 | 7.3 |
| Age-standardized rate | 21.6 | 7.9 |
| Cumulative risk 0-64 years (%) | 1.5 | 0.5 |
| SIR/SMR | 143 | 93 |
| Annual number of new cases/deaths | 522 | 186 |
| Ranking of cervical cancer (all ages) † | 1st | 3rd |
| Ranking of cervical cancer (15-44 years) † | 1st | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

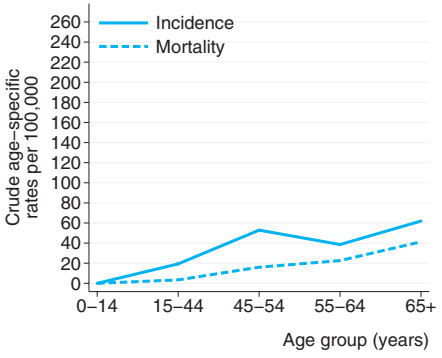



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 4.5 |
| Fertility rate (live births per women) | 2.4 |
| Oral Contraceptive Use (%) | 1.7 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

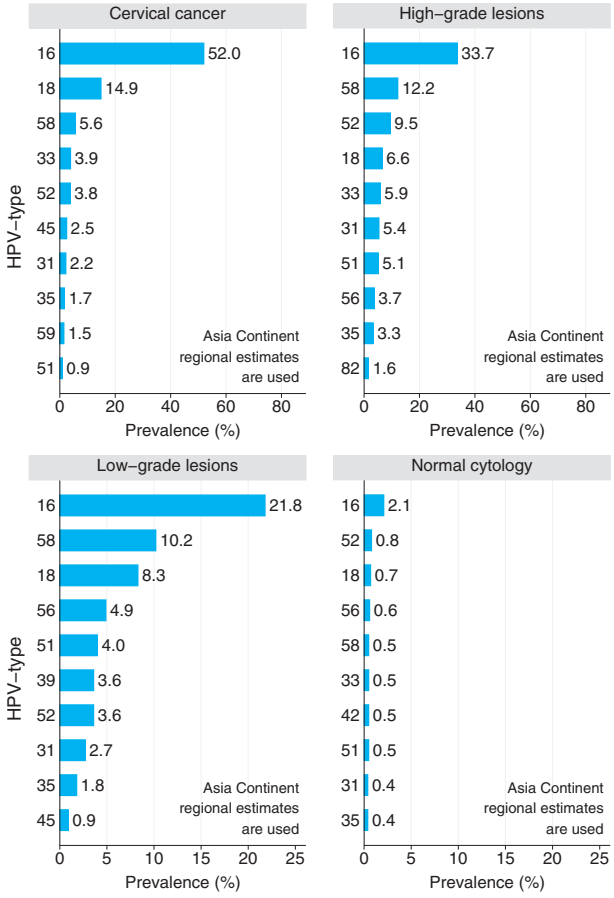



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 92 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# LAOS

has a population of 1.77 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 317 women are diagnosed with cervical cancer and 159 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Laos, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Laos. However, in South-Eastern Asia, the region Laos belongs to, about 6.2% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 71.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 11.5 | 5.7 |
| Age-standardized rate | 16.8 | 8.8 |
| Cumulative risk 0-64 years (%) | 1.3 | 0.7 |
| SIR/SMR | 102 | 98 |
| Annual number of new cases/deaths | 317 | 159 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

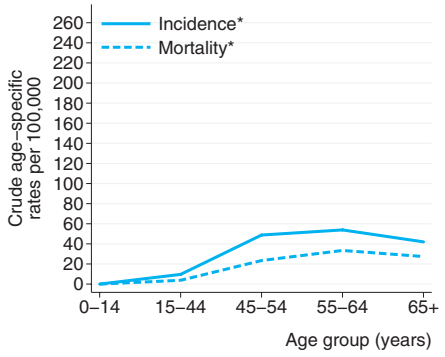



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

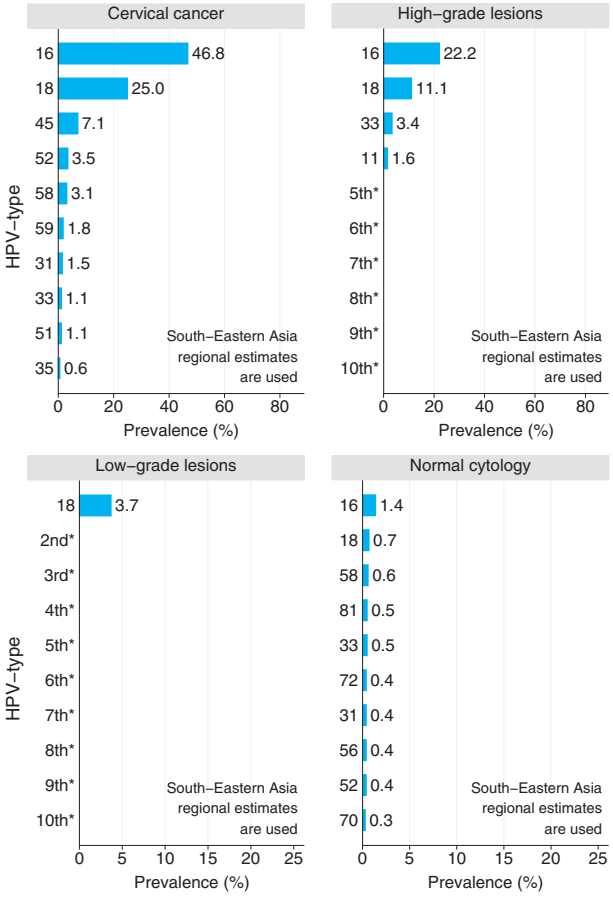
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 12.5 |
| Fertility rate (live births per women) | 4.9 |
| Oral Contraceptive Use (%) | 12.9 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4194 | 6.2 (5.5-6.9) |
| Low-grade lesions† | 27 | 33.3 (16.5-54.0) |
| High-grade lesions† | 207 | 61.8 (54.8-68.5) |
| Cervical cancer: any type† | 1090 | 92.1* (90.3-93.6) |
| Cervical cancer: HPV 16/18† | 1090 | 71.8 (69.1-74.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South-Eastern Asia regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 57 |
| Percentage of districts with >=80% DTP3 coverage | 63 |

DTP: Diphtheria, Tetanus and Pertussis

# LATVIA

has a population of 1.09 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 291 women are diagnosed with cervical cancer and 165 die from the disease. Cervical cancer ranks as the 5th most frequent cancer in women in Latvia, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Latvia. However, in Northern Europe, the region Latvia belongs to, about 8.0% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Latvia 69.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 22.6 | 12.8 |
| Age-standardized rate | 12.9 | 7.4 |
| Cumulative risk 0-64 years (%) | 0.9 | 0.5 |
| SIR/SMR | 94 | 87 |
| Annual number of new cases/deaths | 291 | 165 |
| Ranking of cervical cancer (all ages) † | 5th | 7th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

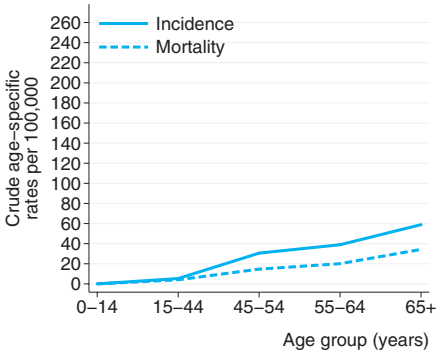



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

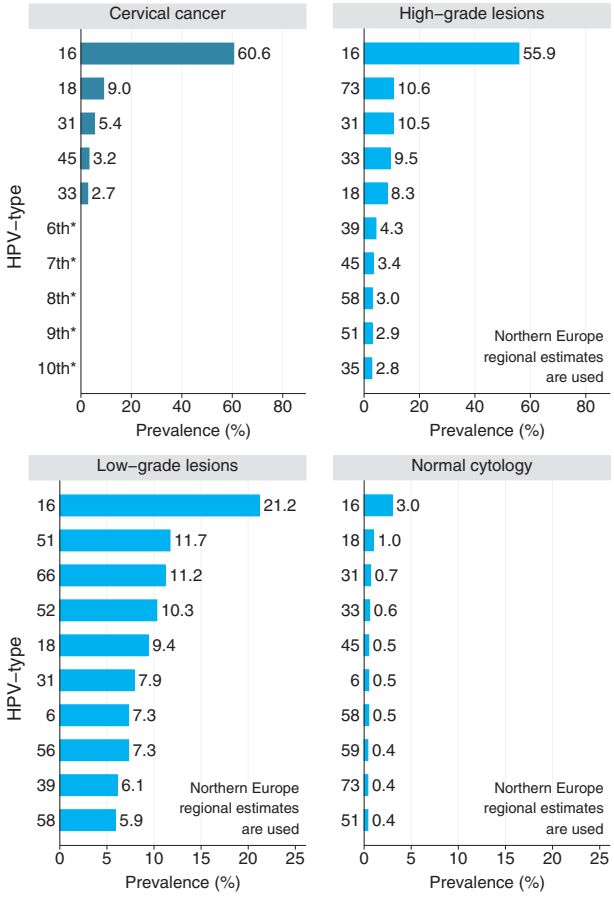
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.8 |
| Smoking prevalence in women (%) | 19.2 |
| Fertility rate (live births per women) | 1.2 |
| Oral Contraceptive Use (%) | 8.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 16235 | 8.0 (7.5-8.4) |
| Low-grade lesions† | 646 | 85.3 (82.3-87.9) |
| High-grade lesions† | 987 | 85.8 (83.5-87.9) |
| Cervical cancer: any type | 221 | 82.8* (77.2-87.5) |
| Cervical cancer: HPV 16/18 | 221 | 69.7 (63.2-75.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Northern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# LEBANON

has a population of 1.32 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 262 women are diagnosed with cervical cancer and 131 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Lebanon, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Lebanon. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 14.3 | 7.2 |
| Age-standardized rate | 15.4 | 8 |
| Cumulative risk 0-64 years (%) | 1.1 | 0.5 |
| SIR/SMR | 98 | 91 |
| Annual number of new cases/deaths | 262 | 131 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

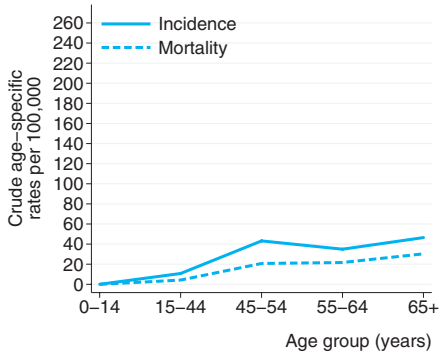



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 30.6 |
| Fertility rate (live births per women) | 2.5 |
| Oral Contraceptive Use (%) | 10.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

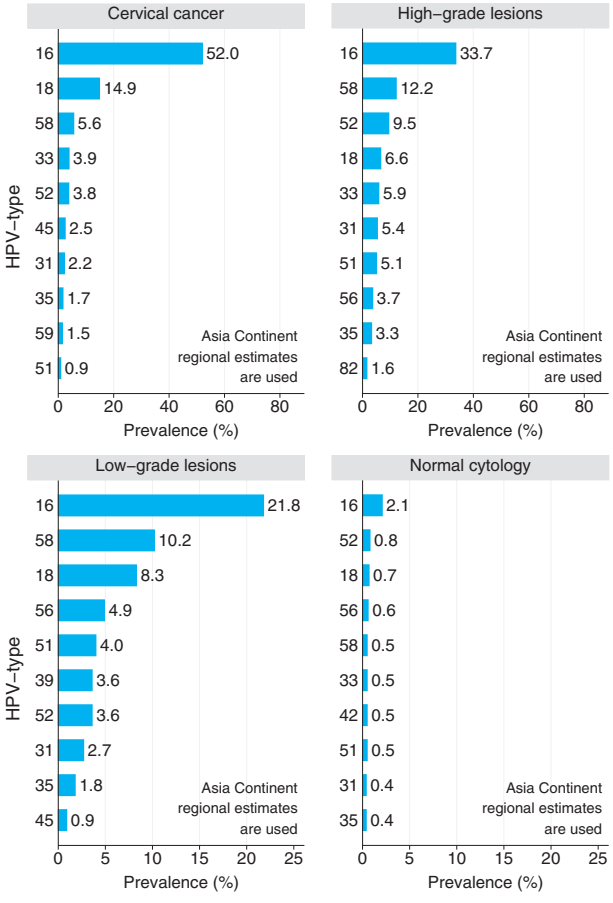
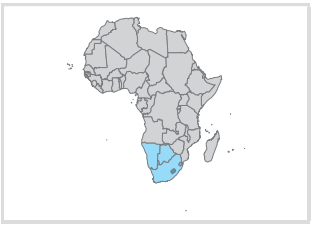



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 92 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# LESOTHO



has a population of 614981 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 479 women are diagnosed with cervical cancer and 391 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Lesotho, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Lesotho. However, in Southern Africa, the region Lesotho belongs to, about 15.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 63.0% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 46.2 | 37.6 |
| Age-standardized rate | 61.6 | 50.3 |
| Cumulative risk 0-64 years (%) | 4.4 | 3.6 |
| SIR/SMR | 363 | 552 |
| Annual number of new cases/deaths | 479 | 391 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

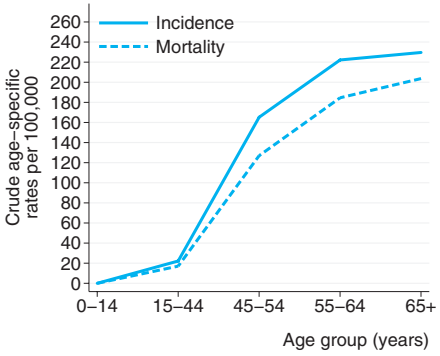



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

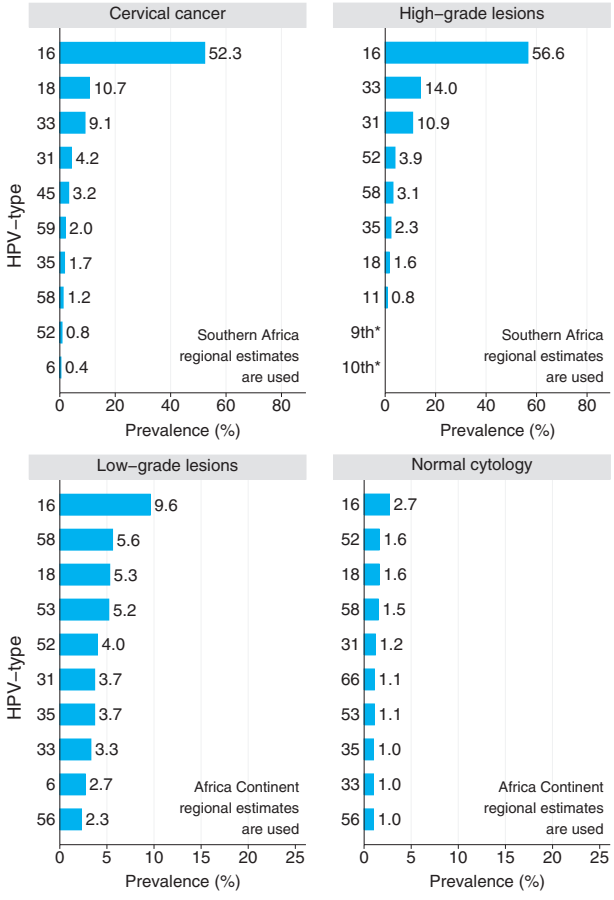
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 23.2 |
| Smoking prevalence in women (%) | 1 |
| Fertility rate (live births per women) | 4.8 |
| Oral Contraceptive Use (%) | 9.4 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 1269 | 15.5 (13.6-17.6) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions† | 129 | 88.4 (81.5-93.3) |
| Cervical cancer: any type† | 308 | 93.8* (90.5-96.2) |
| Cervical cancer: HPV 16/18† | 308 | 63.0 (57.3-68.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Africa regional estimate
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



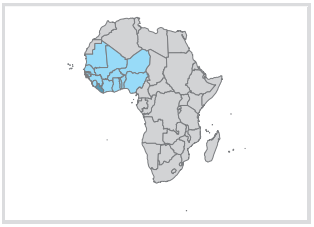

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 83 |
| Percentage of districts with >=80% DTP3 coverage | 95 |

DTP: Diphtheria, Tetanus and Pertussis

# LIBERIA



has a population of 875118 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 320 women are diagnosed with cervical cancer and 256 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Liberia, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Liberia. However, in Western Africa, the region Liberia belongs to, about 16.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 50.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 20 | 15.9 |
| Age-standardized rate | 35 | 28.1 |
| Cumulative risk 0-64 years (%) | 2.7 | 2.2 |
| SIR/SMR | 207 | 325 |
| Annual number of new cases/deaths | 320 | 256 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

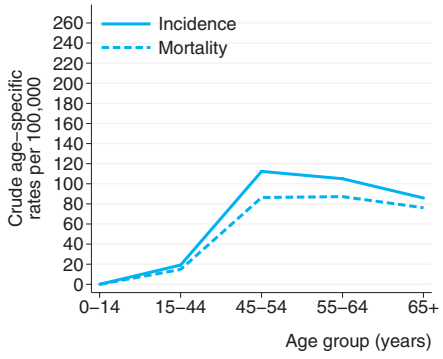



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | 3.3 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2641 | 16.5 (15.1-18.0) |
| Low-grade lesions† | 271 | 59 (52.9-65.0) |
| High-grade lesions† | 138 | 79.7 (72.0-86.1) |
| Cervical cancer: any type† | 218 | 85.8* (80.4-90.1) |
| Cervical cancer: HPV 16/18† | 218 | 50.5 (43.6-57.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

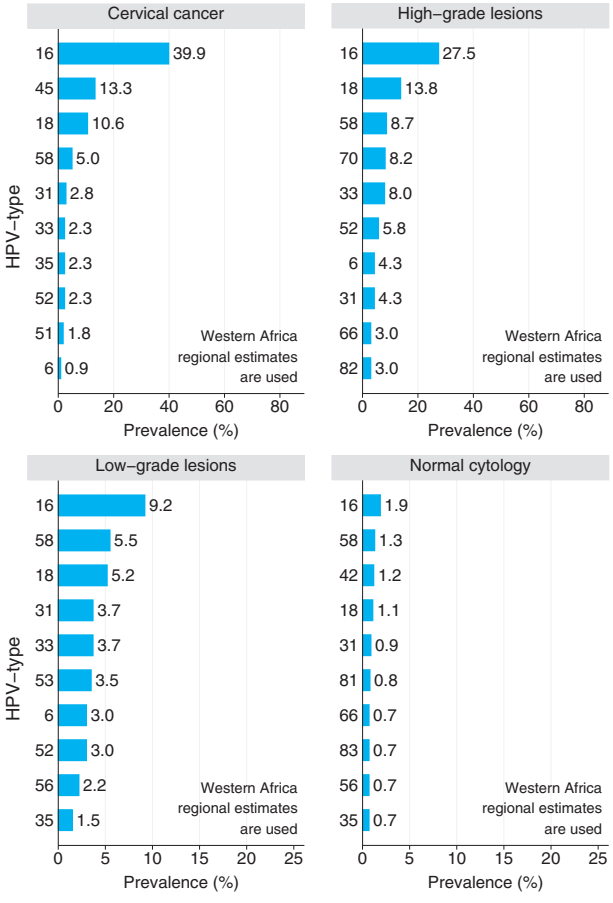
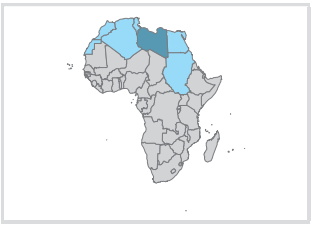



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 88 |
| Percentage of districts with >=80% DTP3 coverage | 67 |

DTP: Diphtheria, Tetanus and Pertussis

# LIBYA



has a population of 1.97 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 218 women are diagnosed with cervical cancer and 175 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Libya, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Libya. However, in Northern Africa, the region Libya belongs to, about 21.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 72.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 8.2 | 6.6 |
| Age-standardized rate | 11.9 | 9.6 |
| Cumulative risk 0-64 years (%) | 0.9 | 0.7 |
| SIR/SMR | 67 | 105 |
| Annual number of new cases/deaths | 218 | 175 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

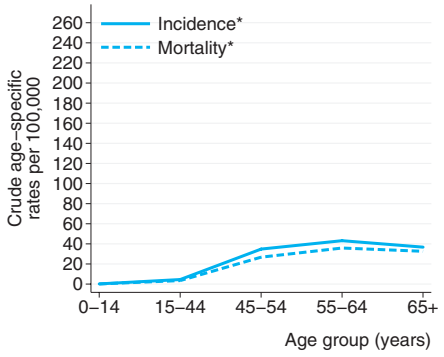



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 4.1 |
| Oral Contraceptive Use (%) | 9.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 172 | 21.5 (15.6-28.4) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type† | 335 | 95.5* (92.7-97.5) |
| Cervical cancer: HPV 16/18† | 335 | 72.5 (67.4-77.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Northern Africa regional estimate
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

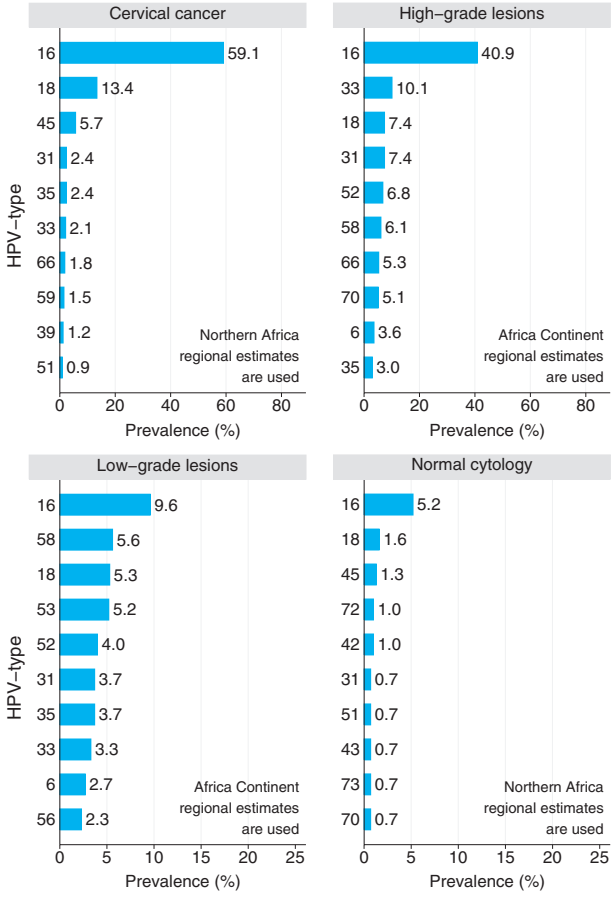
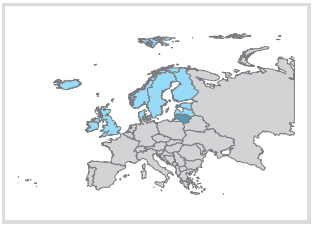



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# LITHUANIA



has a population of 1.55 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 446 women are diagnosed with cervical cancer and 256 die from the disease. Cervical cancer ranks as the 5th most frequent cancer in women in Lithuania, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Lithuania. However, in Northern Europe, the region Lithuania belongs to, about 8.0% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Lithuania 63.9% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 23 | 13.2 |
| Age-standardized rate | 17.5 | 9 |
| Cumulative risk 0-64 years (%) | 1.3 | 0.6 |
| SIR/SMR | 103 | 98 |
| Annual number of new cases/deaths | 446 | 256 |
| Ranking of cervical cancer (all ages) † | 5th | 5th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

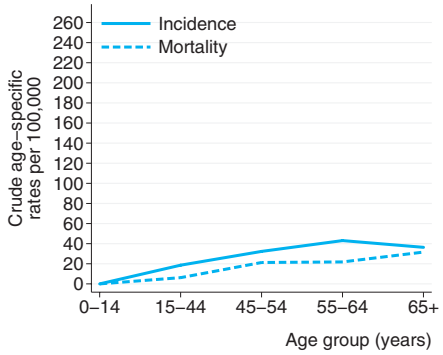



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

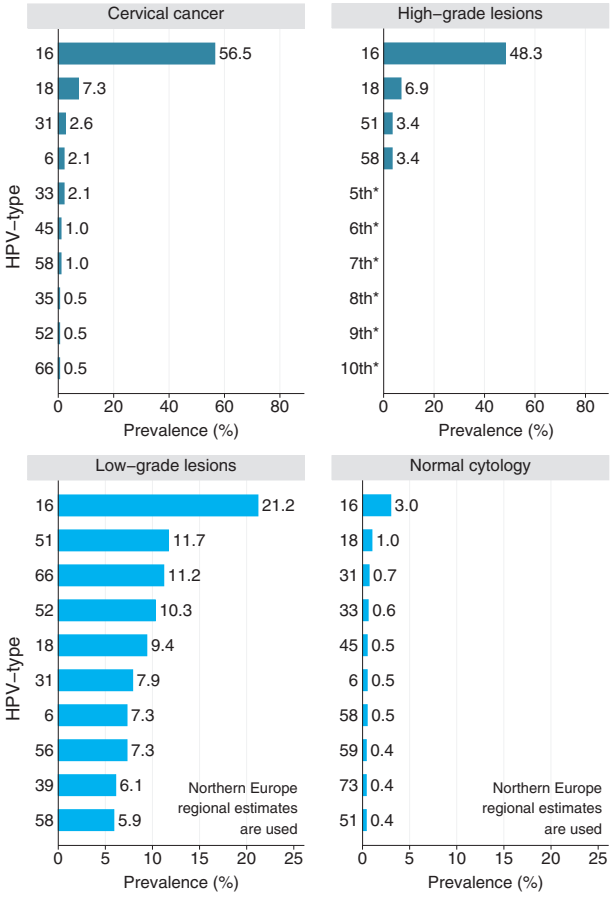
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | 12.8 |
| Fertility rate (live births per women) | 1.3 |
| Oral Contraceptive Use (%) | 3.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 16235 | 8.0 (7.5-8.4) |
| Low-grade lesions† | 646 | 85.3 (82.3-87.9) |
| High-grade lesions | 29 | 79.3 (60.3-92.0) |
| Cervical cancer: any type | 191 | 92.7* (88.0-95.9) |
| Cervical cancer: HPV 16/18 | 191 | 63.9 (56.6-70.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Northern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 94 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# LUXEMBOURG

has a population of 193167 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 24 women are diagnosed with cervical cancer and 13 die from the disease. Cervical cancer ranks as the 11th most frequent cancer in women in Luxembourg, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Luxembourg. However, in Western Europe, the region Luxembourg belongs to, about 6.1% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 73.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 10.7 | 6.2 |
| Age-standardized rate | 8.7 | 3.9 |
| Cumulative risk 0-64 years (%) | 0.7 | 0.3 |
| SIR/SMR | 48 | 46 |
| Annual number of new cases/deaths | 24 | 13 |
| Ranking of cervical cancer (all ages) † | 11th | 10th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 4th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

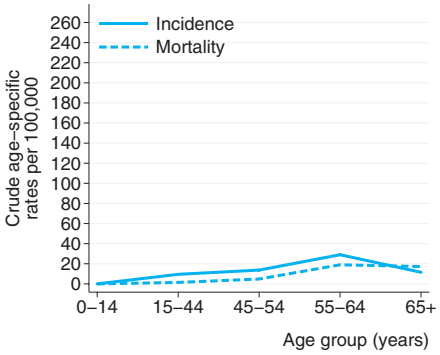



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | 27 |
| Fertility rate (live births per women) | 1.7 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 48701 | 6.1 (5.9-6.4) |
| Low-grade lesions† | 312 | 68.6 (63.1-73.7) |
| High-grade lesions† | 1664 | 93.3 (92.0-94.5) |
| Cervical cancer: any type† | 998 | 86.8* (84.5-88.8) |
| Cervical cancer: HPV 16/18† | 998 | 73.6 (70.8-76.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

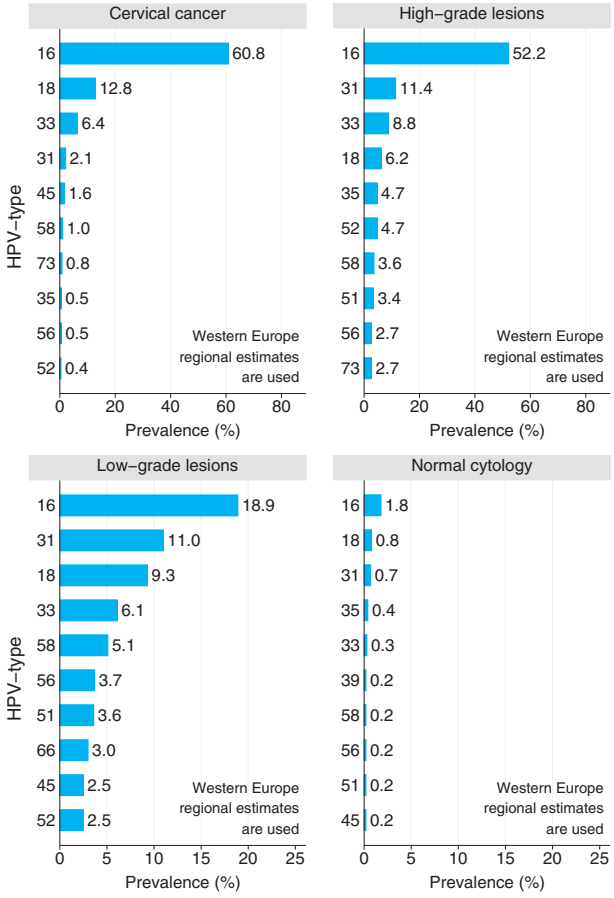



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# MACEDONIA, TFYR

has a population of 827317 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 167 women are diagnosed with cervical cancer and 99 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in Macedonia, TFYR, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Macedonia, TFYR. However, in Southern Europe, the region Macedonia, TFYR belongs to, about 5.7% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 65.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 16.4 | 9.7 |
| Age-standardized rate | 13.9 | 7.6 |
| Cumulative risk 0-64 years (%) | 1 | 0.5 |
| SIR/SMR | 82 | 84 |
| Annual number of new cases/deaths | 167 | 99 |
| Ranking of cervical cancer (all ages) † | 4th | 5th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

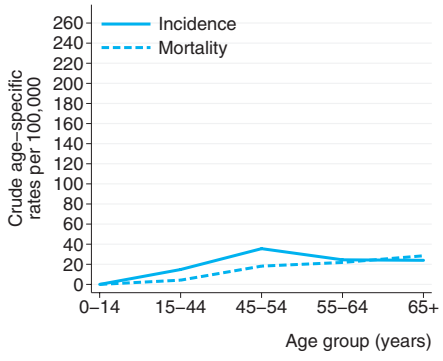



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 32 |
| Fertility rate (live births per women) | 1.9 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4884 | 5.7 (5.0-6.3) |
| Low-grade lesions† | 3391 | 66.6 (64.9-68.1) |
| High-grade lesions† | 650 | 81.1 (77.9-84.0) |
| Cervical cancer: any type† | 732 | 83.7* (80.9-86.3) |
| Cervical cancer: HPV 16/18† | 732 | 65.3 (61.7-68.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

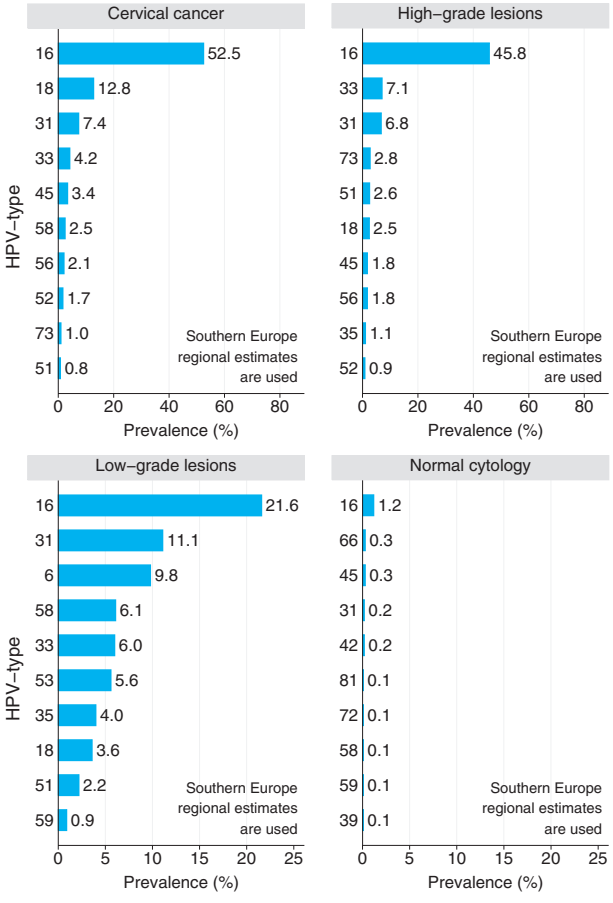
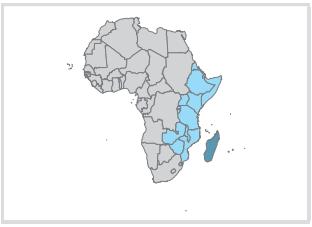



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 93 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# MADAGASCAR



has a population of 5.27 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 2238 women are diagnosed with cervical cancer and 1795 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Madagascar, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Madagascar. However, in Eastern Africa, the region Madagascar belongs to, about 35.4% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 81.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 26.4 | 21.1 |
| Age-standardized rate | 42.7 | 34.6 |
| Cumulative risk 0-64 years (%) | 3.2 | 2.6 |
| SIR/SMR | 251 | 391 |
| Annual number of new cases/deaths | 2238 | 1795 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

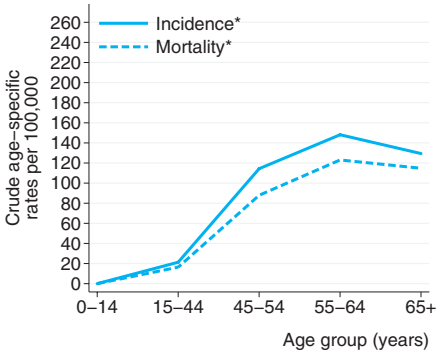



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.5 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 6.1 |
| Oral Contraceptive Use (%) | 3.4 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2144 | 35.4 (33.4-37.5) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type† | 478 | 96.4* (94.4-97.9) |
| Cervical cancer: HPV 16/18† | 478 | 81.8 (78.0-85.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

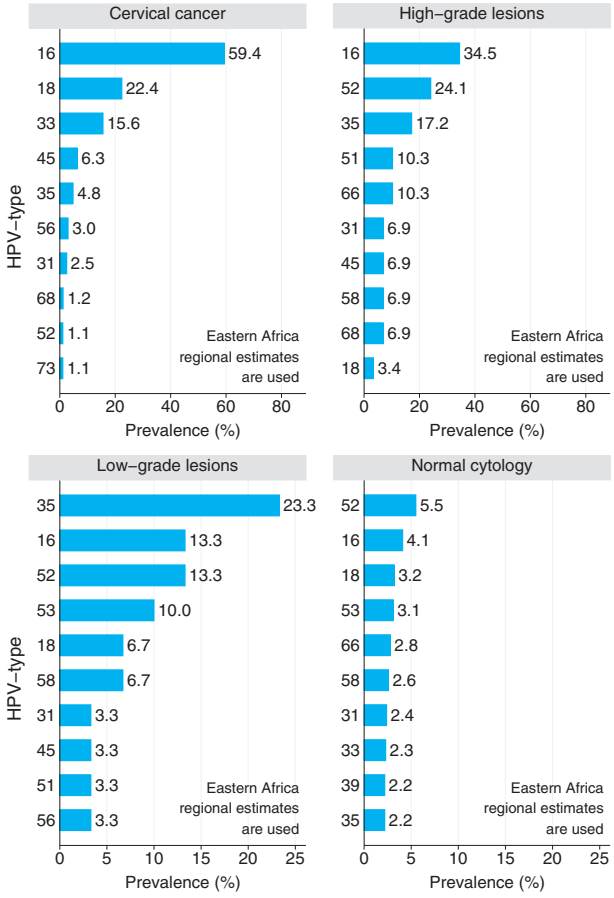
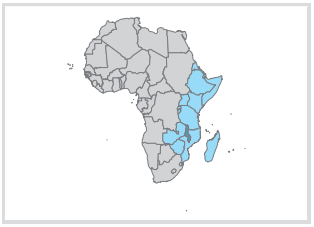



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 61 |
| Percentage of districts with >=80% DTP3 coverage | 72 |

DTP: Diphtheria, Tetanus and Pertussis

# MALAWI



has a population of 3.46 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1766 women are diagnosed with cervical cancer and 1405 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Malawi, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Malawi. However, in Eastern Africa, the region Malawi belongs to, about 35.4% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 81.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 29.8 | 23.7 |
| Age-standardized rate | 46.6 | 37.4 |
| Cumulative risk 0-64 years (%) | 3.7 | 3 |
| SIR/SMR | 286 | 439 |
| Annual number of new cases/deaths | 1766 | 1405 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

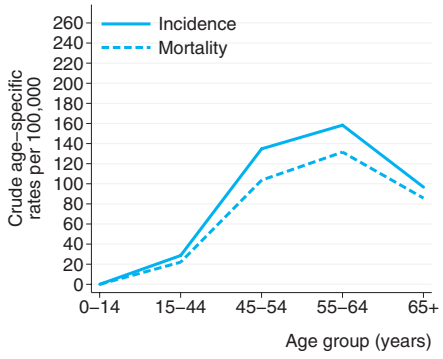



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 14.1 |
| Smoking prevalence in women (%) | 4.8 |
| Fertility rate (live births per women) | 6.4 |
| Oral Contraceptive Use (%) | 2.7 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2144 | 35.4 (33.4-37.5) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type† | 478 | 96.4* (94.4-97.9) |
| Cervical cancer: HPV 16/18† | 478 | 81.8 (78.0-85.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

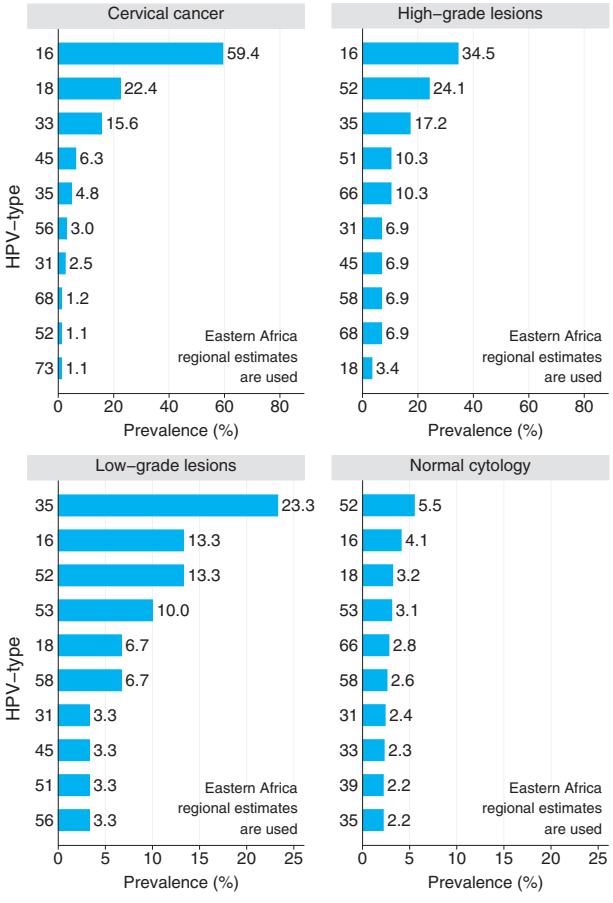



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 85 |

DTP: Diphtheria, Tetanus and Pertussis

# MALAYSIA

has a population of 8.49 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1492 women are diagnosed with cervical cancer and 766 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Malaysia, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Malaysia. However, in South-Eastern Asia, the region Malaysia belongs to, about 6.2% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 71.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 13.1 | 6.8 |
| Age-standardized rate | 15.7 | 8.4 |
| Cumulative risk 0-64 years (%) | 1.2 | 0.6 |
| SIR/SMR | 95 | 92 |
| Annual number of new cases/deaths | 1492 | 766 |
| Ranking of cervical cancer (all ages) † | 2nd | 4th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

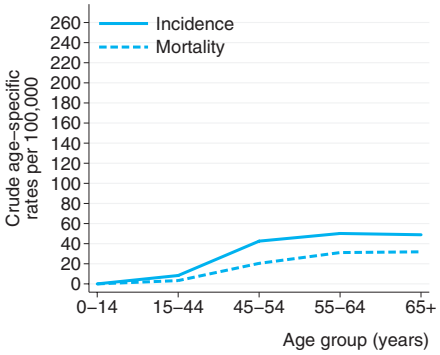



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

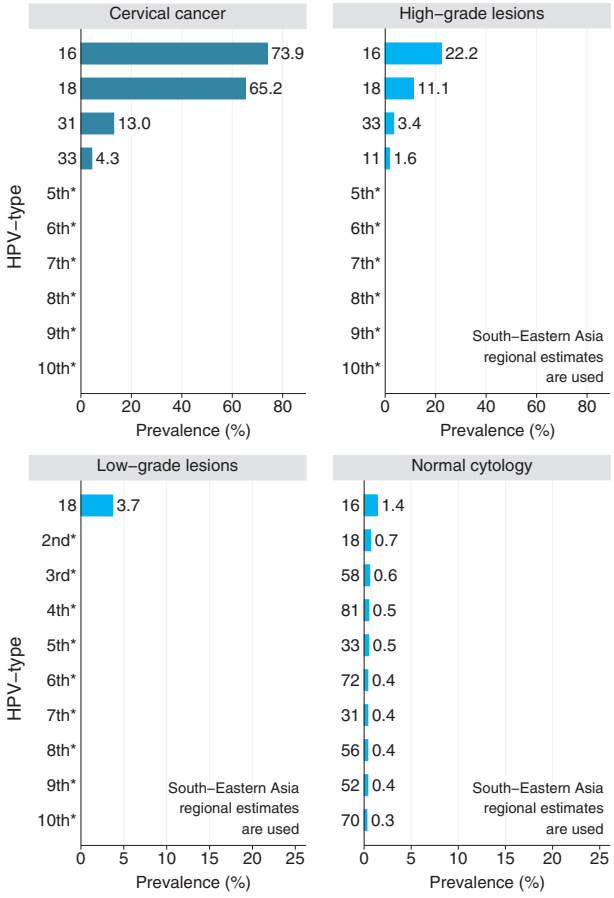
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.5 |
| Smoking prevalence in women (%) | 1.6 |
| Fertility rate (live births per women) | 3.1 |
| Oral Contraceptive Use (%) | 13.4 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4194 | 6.2 (5.5-6.9) |
| Low-grade lesions† | 27 | 33.3 (16.5-54.0) |
| High-grade lesions† | 207 | 61.8 (54.8-68.5) |
| Cervical cancer: any type | 23 | 95.7* (78.1-99.9) |
| Cervical cancer: HPV 16/18† | 1090 | 71.8 (69.1-74.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South-Eastern Asia regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 96 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# MALDIVES

has a population of 94860 women ages 15 years and older who are at risk of developing cervical cancer. Data is not yet available on the burden of cervical cancer in Maldives. However, in Southern Asia, the region Maldives belongs to, current estimates indicate that every year 153535 women are diagnosed with cervical cancer and 85192 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Southern Asia, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Maldives. However, in Southern Asia about 6.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 75.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

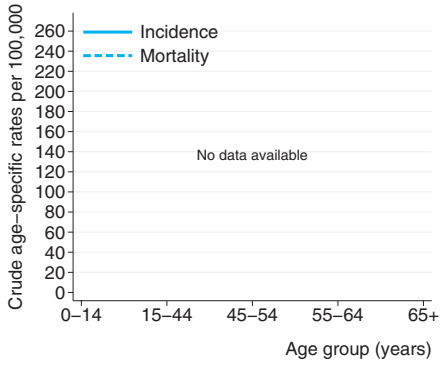



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

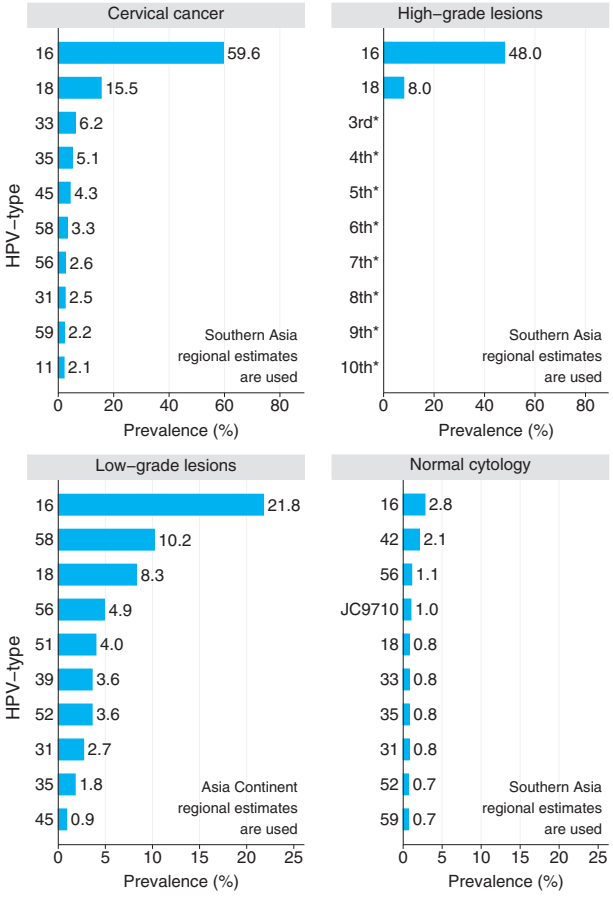
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 15.6 |
| Fertility rate (live births per women) | 6.4 |
| Oral Contraceptive Use (%) | 13.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 19164 | 6.6 (6.2-6.9) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions† | 25 | 64 (42.5-82.0) |
| Cervical cancer: any type† | 386 | 90.2* (86.7-92.9) |
| Cervical cancer: HPV 16/18† | 386 | 75.1 (70.5-79.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Asia regional estimate
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



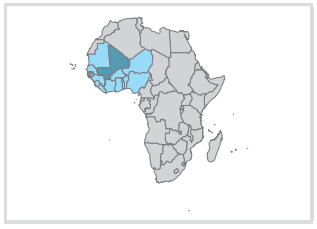

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# MALI



has a population of 3.58 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1336 women are diagnosed with cervical cancer and 1076 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Mali, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Mali. However, in Western Africa, the region Mali belongs to, about 16.5% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Mali 54.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 22 | 17.8 |
| Age-standardized rate | 35.2 | 28.4 |
| Cumulative risk 0-64 years (%) | 2.7 | 2.1 |
| SIR/SMR | 211 | 320 |
| Annual number of new cases/deaths | 1336 | 1076 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

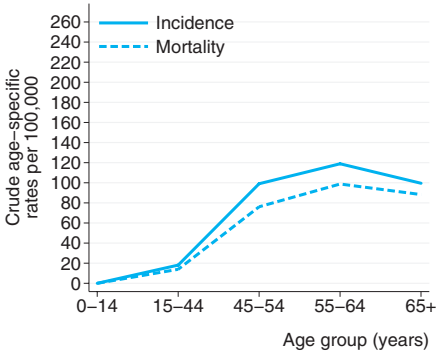



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.7 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 7.0 |
| Oral Contraceptive Use (%) | 2.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2641 | 16.5 (15.1-18.0) |
| Low-grade lesions† | 271 | 59 (52.9-65.0) |
| High-grade lesions† | 138 | 79.7 (72.0-86.1) |
| Cervical cancer: any type | 123 | 94.3* (88.6-97.7) |
| Cervical cancer: HPV 16/18 | 123 | 54.5 (45.2-63.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

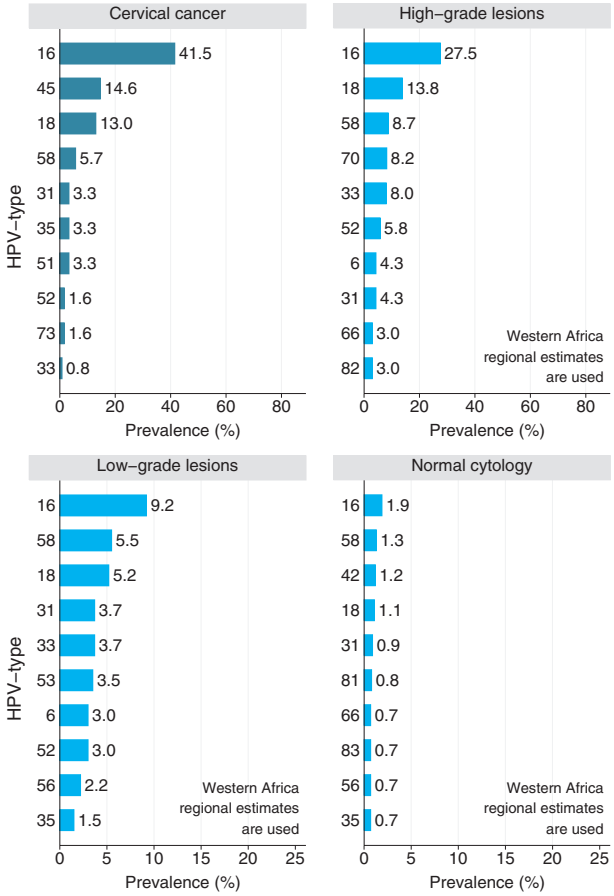



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 85 |
| Percentage of districts with >=80% DTP3 coverage | 71 |

DTP: Diphtheria, Tetanus and Pertussis

# MALTA

has a population of 167846 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 14 women are diagnosed with cervical cancer and 6 die from the disease. Cervical cancer ranks as the 14th most frequent cancer in women in Malta, and the 4th most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Malta. However, in Southern Europe, the region Malta belongs to, about 5.7% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 65.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 6.6 | 2.8 |
| Age-standardized rate | 4.8 | 1.6 |
| Cumulative risk 0-64 years (%) | 0.3 | 0.1 |
| SIR/SMR | 30 | 21 |
| Annual number of new cases/deaths | 14 | 6 |
| Ranking of cervical cancer (all ages) † | 14th | 11th |
| Ranking of cervical cancer (15-44 years) † | 4th | 14th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

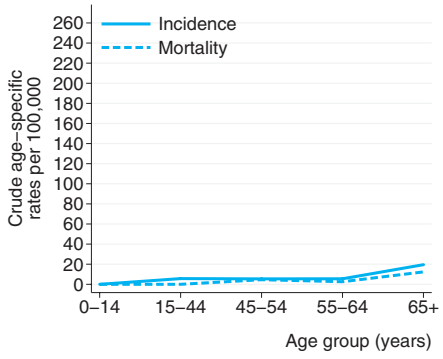



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 17.6 |
| Fertility rate (live births per women) | 1.5 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4884 | 5.7 (5.0-6.3) |
| Low-grade lesions† | 3391 | 66.6 (64.9-68.1) |
| High-grade lesions† | 650 | 81.1 (77.9-84.0) |
| Cervical cancer: any type† | 732 | 83.7* (80.9-86.3) |
| Cervical cancer: HPV 16/18† | 732 | 65.3 (61.7-68.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

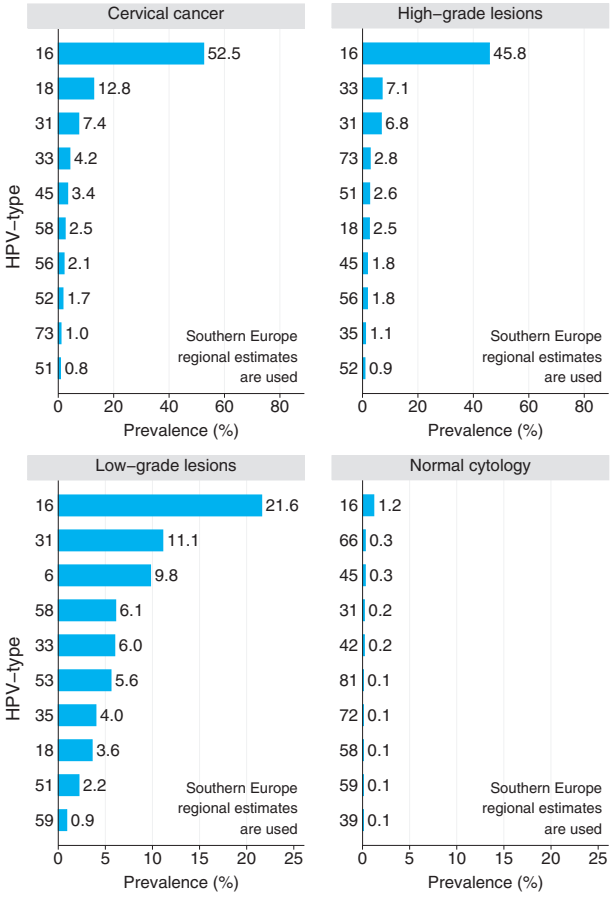
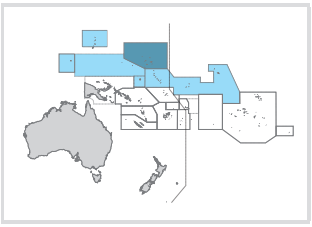



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 85 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# MARSHALL ISLANDS



Data is not yet available on the burden of cervical cancer in Marshall Islands. However, in Micronesia, the region Marshall Islands belongs to, current estimates indicate that every year 19 women are diagnosed with cervical cancer and 10 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in Micronesia, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Marshall Islands , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Oceania Continent about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

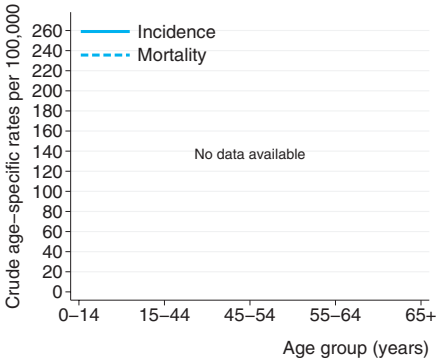



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

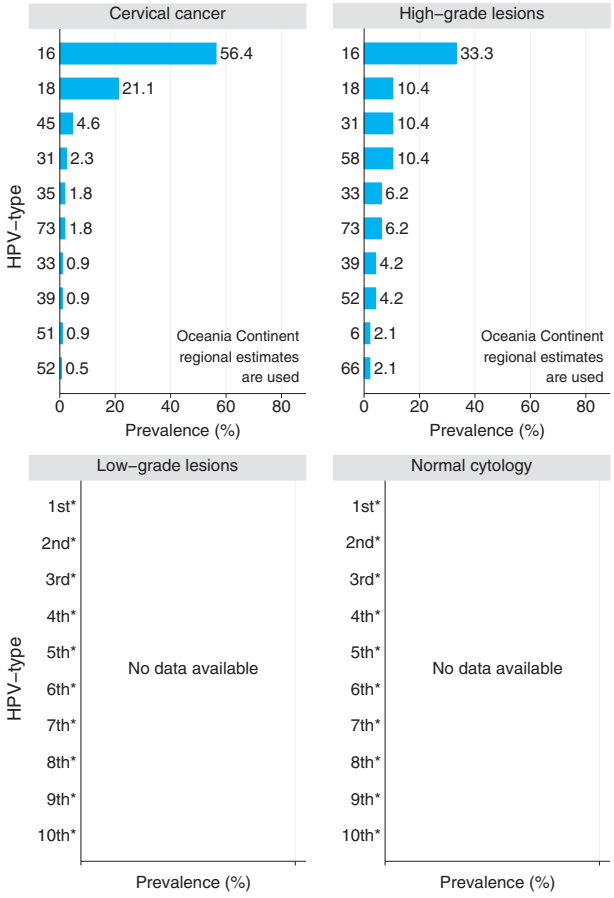
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions‡ | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type‡ | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18‡ | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



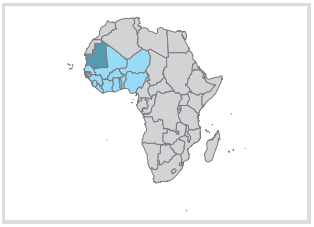

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 74 |
| Percentage of districts with >=80% DTP3 coverage | 67 |

DTP: Diphtheria, Tetanus and Pertussis

# MAURITANIA



has a population of 894005 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 259 women are diagnosed with cervical cancer and 209 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Mauritania, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Mauritania. However, in Western Africa, the region Mauritania belongs to, about 16.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 50.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 18.2 | 14.6 |
| Age-standardized rate | 29.3 | 23.8 |
| Cumulative risk 0-64 years (%) | 2.2 | 1.8 |
| SIR/SMR | 171 | 265 |
| Annual number of new cases/deaths | 259 | 209 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

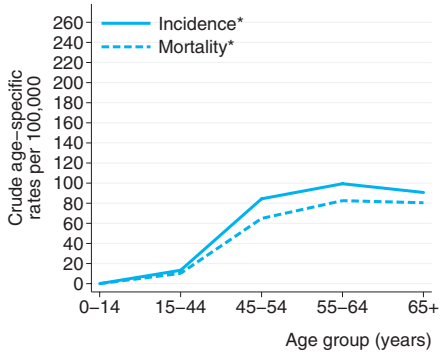



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.7 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 4.7 |
| Oral Contraceptive Use (%) | 2.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2641 | 16.5 (15.1-18.0) |
| Low-grade lesions† | 271 | 59 (52.9-65.0) |
| High-grade lesions† | 138 | 79.7 (72.0-86.1) |
| Cervical cancer: any type† | 218 | 85.8* (80.4-90.1) |
| Cervical cancer: HPV 16/18† | 218 | 50.5 (43.6-57.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

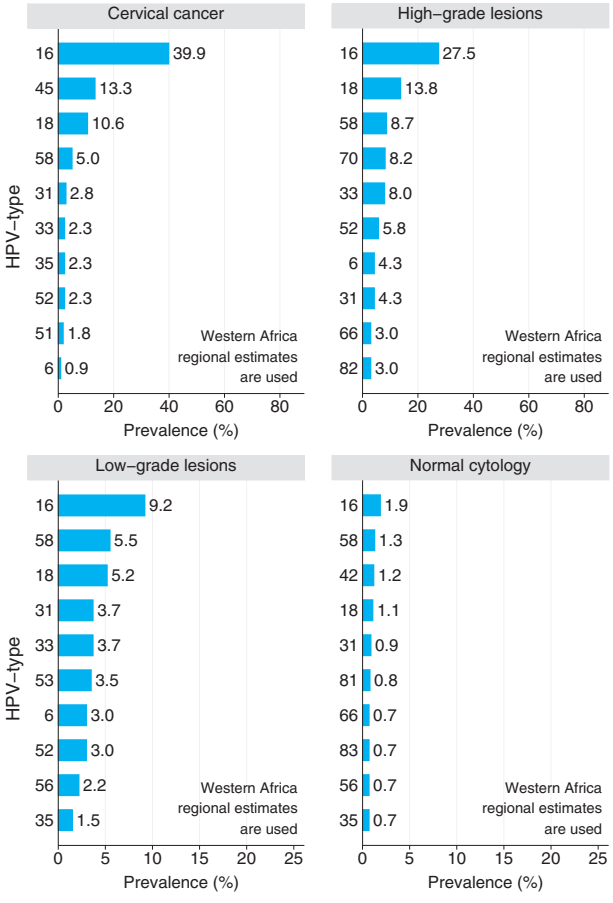
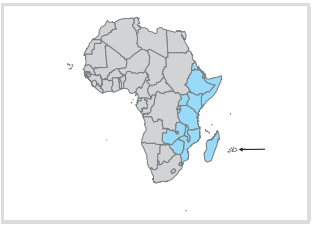



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 68 |
| Percentage of districts with >=80% DTP3 coverage | 21 |

DTP: Diphtheria, Tetanus and Pertussis

# MAURITIUS



has a population of 476138 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 111 women are diagnosed with cervical cancer and 61 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Mauritius, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Mauritius. However, in Eastern Africa, the region Mauritius belongs to, about 35.4% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 81.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 18.8 | 10.4 |
| Age-standardized rate | 18.2 | 10.2 |
| Cumulative risk 0-64 years (%) | 1.1 | 0.6 |
| SIR/SMR | 111 | 112 |
| Annual number of new cases/deaths | 111 | 61 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

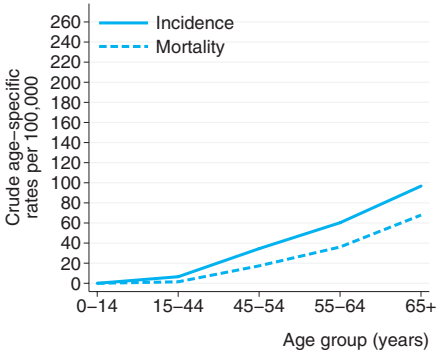



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.6 |
| Smoking prevalence in women (%) | 1 |
| Fertility rate (live births per women) | 2.0 |
| Oral Contraceptive Use (%) | 20.9 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2144 | 35.4 (33.4-37.5) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type† | 478 | 96.4* (94.4-97.9) |
| Cervical cancer: HPV 16/18† | 478 | 81.8 (78.0-85.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

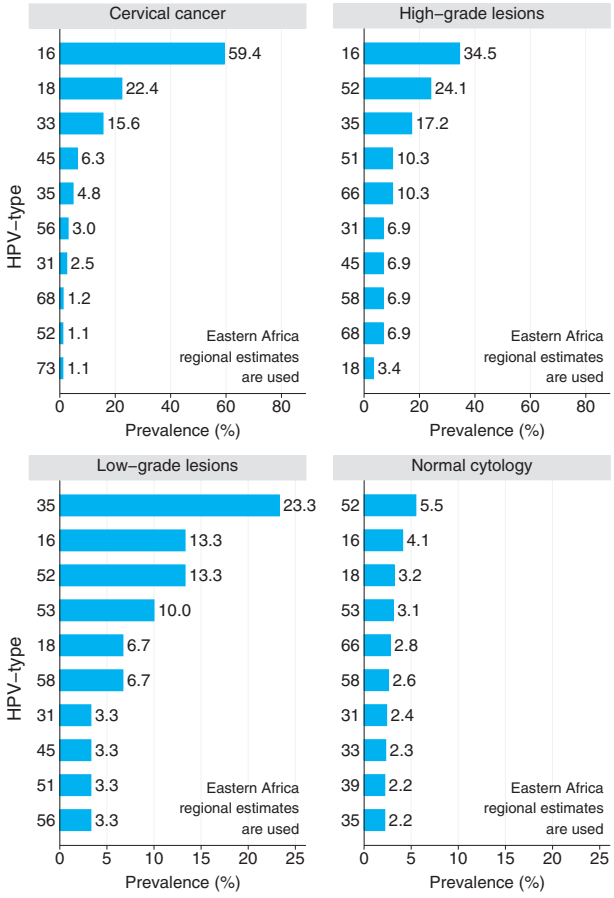



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 97 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# MEXICO

has a population of 38.38 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 12516 women are diagnosed with cervical cancer and 5777 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Mexico, and the 1st most frequent cancer among women between 15 and 44 years of age. About 11.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 58.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 24.4 | 11.2 |
| Age-standardized rate | 29.5 | 14.1 |
| Cumulative risk 0-64 years (%) | 2 | 0.9 |
| SIR/SMR | 177 | 154 |
| Annual number of new cases/deaths | 12516 | 5777 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

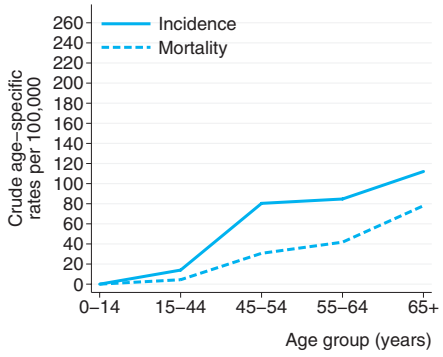



**Table 2. Cervical screening coverage**

Ever screened: 63.3% among women aged 15-49 years in Morelos (1996/97); 81.6% among women aged 15-49 years in Guadalajara (1997); 45% among women aged 14-54 years in Mexico City (1997/98)

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.3 |
| Smoking prevalence in women (%) | 4.7 |
| Fertility rate (live births per women) | 2.7 |
| Oral Contraceptive Use (%) | 7.1 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 2335 | 11.0 (9.7-12.3) |
| Low-grade lesions | 165 | 37.6 (30.2-45.4) |
| High-grade lesions | 91 | 90.1 (82.1-95.4) |
| Cervical cancer: any type | 129 | 91.5* (85.3-95.7) |
| Cervical cancer: HPV 16/18 | 129 | 58.1 (49.1-66.8) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

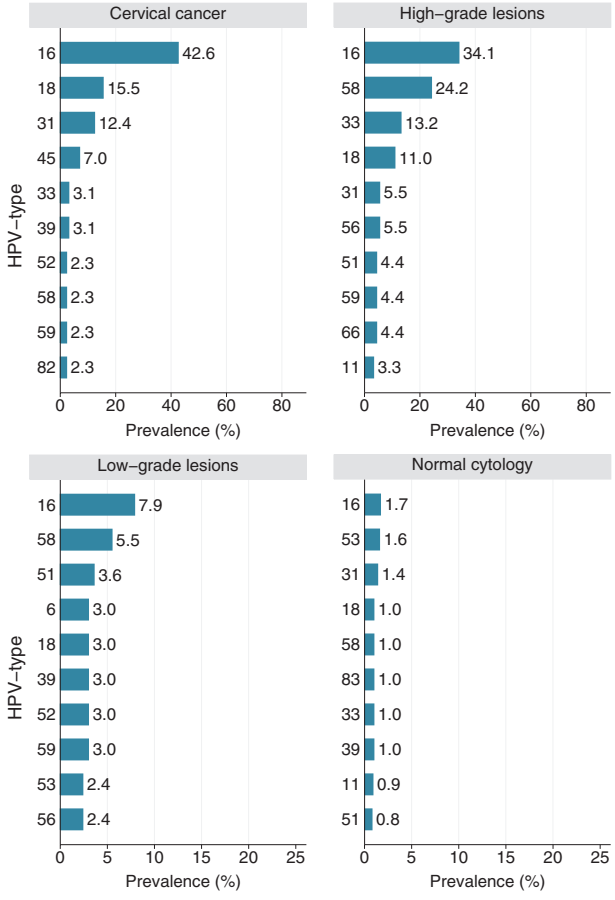
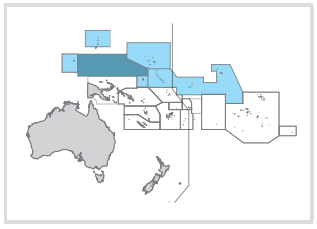



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 92 |

DTP: Diphtheria, Tetanus and Pertussis

# MICRONESIA



has a population of 33813 women ages 15 years and older who are at risk of developing cervical cancer. Data is not yet available on the burden of cervical cancer in Micronesia. However, in Micronesia, the region Micronesia belongs to, current estimates indicate that every year 19 women are diagnosed with cervical cancer and 10 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in Micronesia, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Micronesia , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Oceania Continent about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

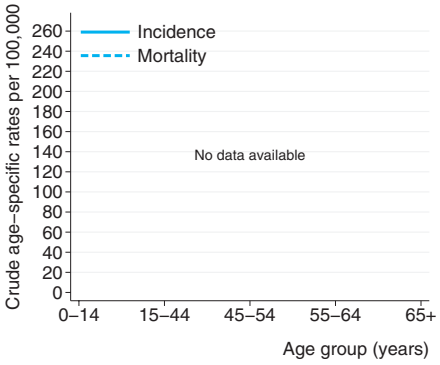



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

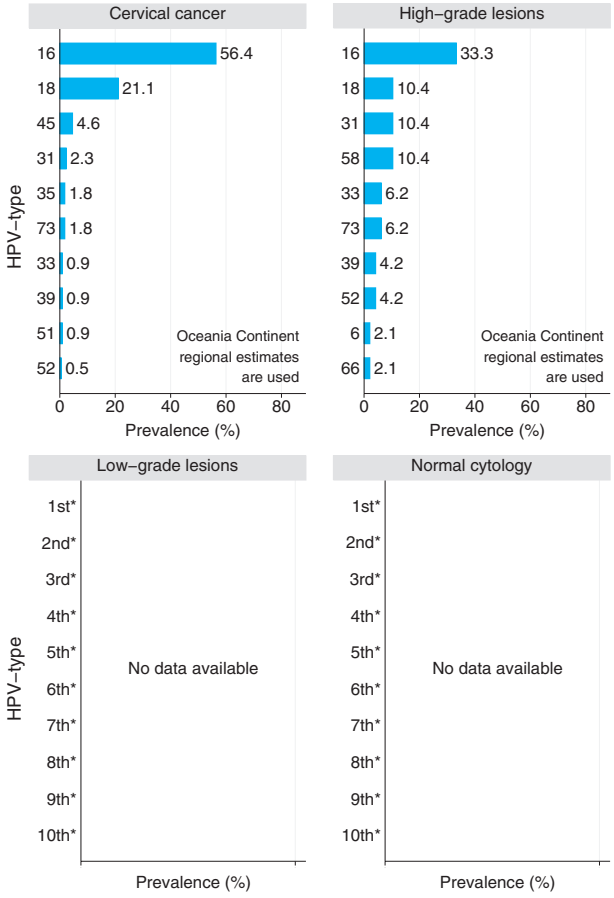
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions‡ | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type‡ | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18‡ | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 67 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# MONACO

Data is not yet available on the burden of cervical cancer in Monaco. However, in Western Europe, the region Monaco belongs to, current estimates indicate that every year 12744 women are diagnosed with cervical cancer and 5671 die from the disease. Cervical cancer ranks as the 8th most frequent cancer in women in Western Europe, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Monaco. However, in Western Europe about 6.1% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 73.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

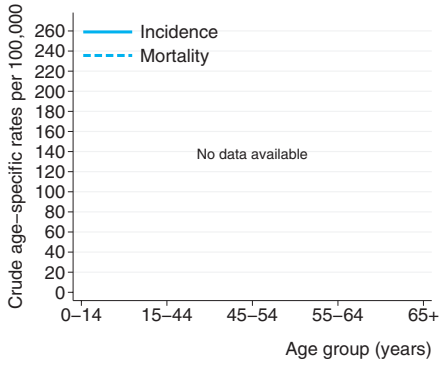



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 48701 | 6.1 (5.9-6.4) |
| Low-grade lesions† | 312 | 68.6 (63.1-73.7) |
| High-grade lesions† | 1664 | 93.3 (92.0-94.5) |
| Cervical cancer: any type† | 998 | 86.8* (84.5-88.8) |
| Cervical cancer: HPV 16/18† | 998 | 73.6 (70.8-76.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

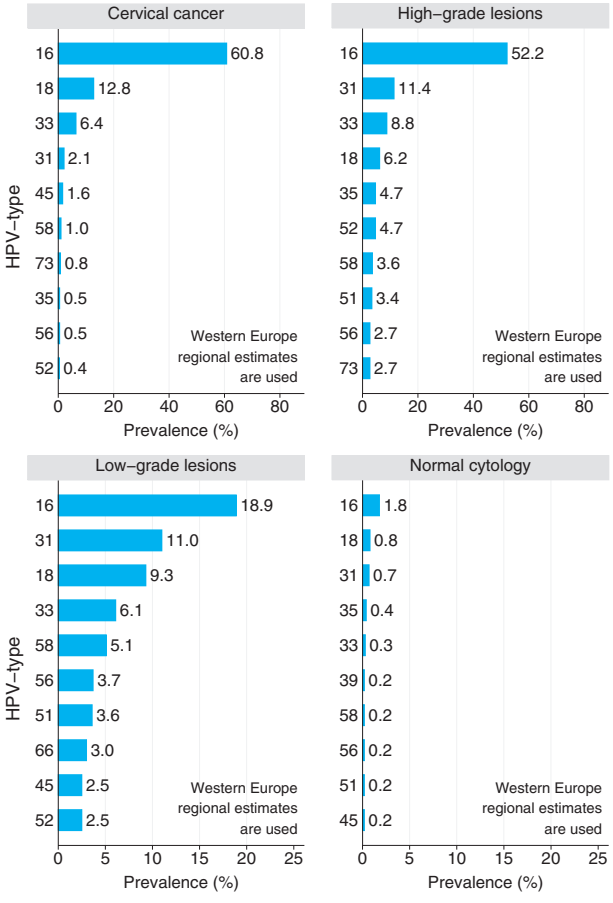



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# MONGOLIA

has a population of 927277 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 171 women are diagnosed with cervical cancer and 92 die from the disease. Cervical cancer ranks as the 3rd most frequent cancer in women in Mongolia, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Mongolia. However, in Eastern Asia, the region Mongolia belongs to, about 10.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 64.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 13.3 | 7.1 |
| Age-standardized rate | 18 | 10.1 |
| Cumulative risk 0-64 years (%) | 1.4 | 0.8 |
| SIR/SMR | 108 | 112 |
| Annual number of new cases/deaths | 171 | 92 |
| Ranking of cervical cancer (all ages) † | 3rd | 5th |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

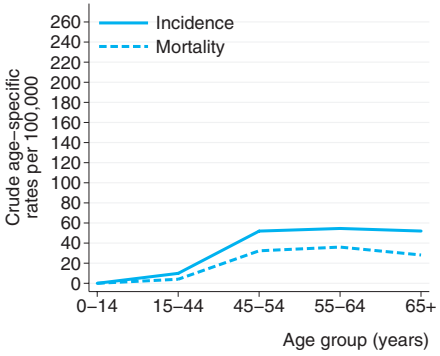



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 25.5 |
| Fertility rate (live births per women) | 2.3 |
| Oral Contraceptive Use (%) | 8.3 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 17767 | 10.6 (10.1-11.0) |
| Low-grade lesions† | 225 | 71.1 (64.7-76.9) |
| High-grade lesions† | 1132 | 81.3 (78.9-83.5) |
| Cervical cancer: any type† | 4176 | 83.8* (82.7-84.9) |
| Cervical cancer: HPV 16/18† | 4176 | 64.5 (63.1-66.0) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Asia regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

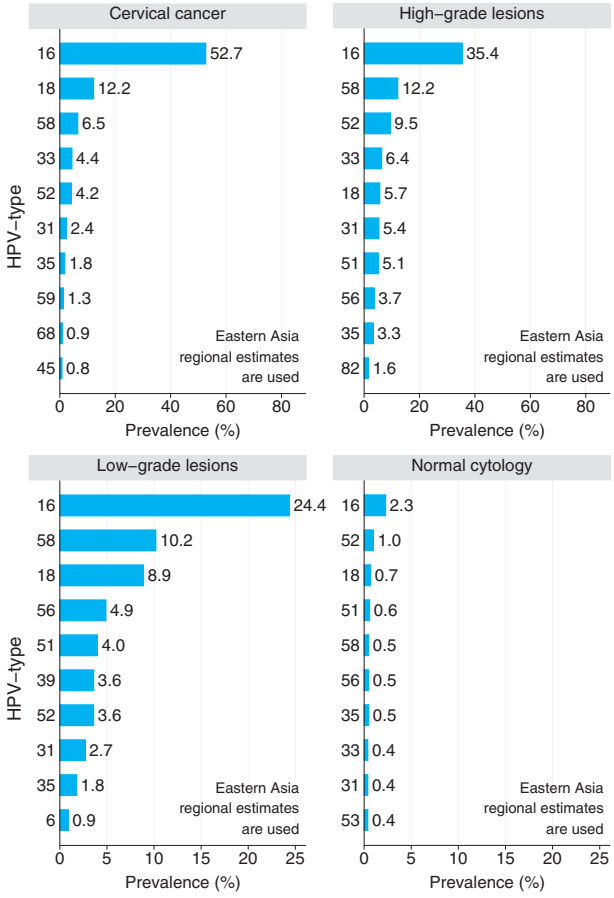



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# MONTENEGRO

has a population of 4.35 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1816 women are diagnosed with cervical cancer and 815 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Montenegro, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Montenegro. However, in Southern Europe, the region Montenegro belongs to, about 5.7% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 65.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 34.4 | 15.5 |
| Age-standardized rate | 27.3 | 10.1 |
| Cumulative risk 0-64 years (%) | 2 | 0.6 |
| SIR/SMR | 157 | 119 |
| Annual number of new cases/deaths | 1816 | 815 |
| Ranking of cervical cancer (all ages) † | 2nd | 4th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

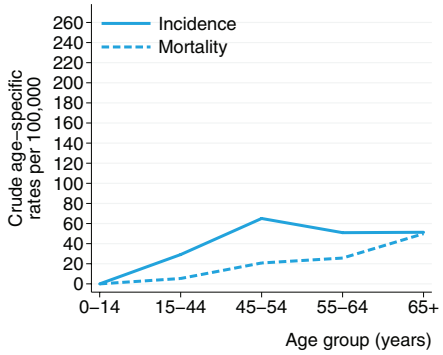



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 1.7 |
| Oral Contraceptive Use (%) | 4.7 |

Estimates for the population, Tables 1 and 3 and Figure 1 are aggregated for Serbia and Montenegro.

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4884 | 5.7 (5.0-6.3) |
| Low-grade lesions† | 3391 | 66.6 (64.9-68.1) |
| High-grade lesions† | 650 | 81.1 (77.9-84.0) |
| Cervical cancer: any type† | 732 | 83.7* (80.9-86.3) |
| Cervical cancer: HPV 16/18† | 732 | 65.3 (61.7-68.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

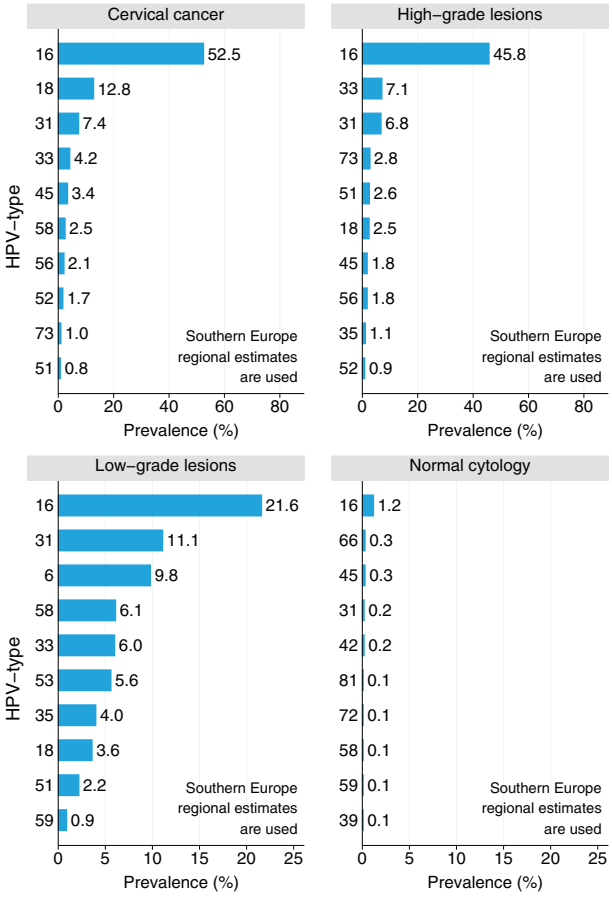
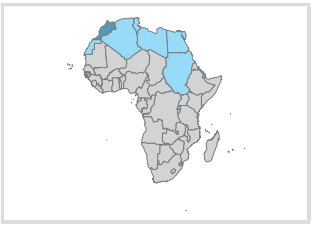



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 90 |
| Percentage of districts with >=80% DTP3 coverage | 95 |

DTP: Diphtheria, Tetanus and Pertussis

# MOROCCO



has a population of 11.02 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1550 women are diagnosed with cervical cancer and 1247 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Morocco, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 21.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 67.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 10 | 8.1 |
| Age-standardized rate | 13.2 | 10.7 |
| Cumulative risk 0-64 years (%) | 1.1 | 0.8 |
| SIR/SMR | 77 | 118 |
| Annual number of new cases/deaths | 1550 | 1247 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

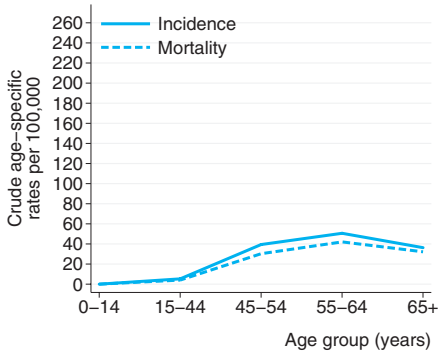



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 0.1 |
| Fertility rate (live births per women) | 3.0 |
| Oral Contraceptive Use (%) | 40.1 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 172 | 21.5 (15.6-28.4) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type | 152 | 94.7* (89.9-97.7) |
| Cervical cancer: HPV 16/18 | 152 | 67.1 (59.0-74.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

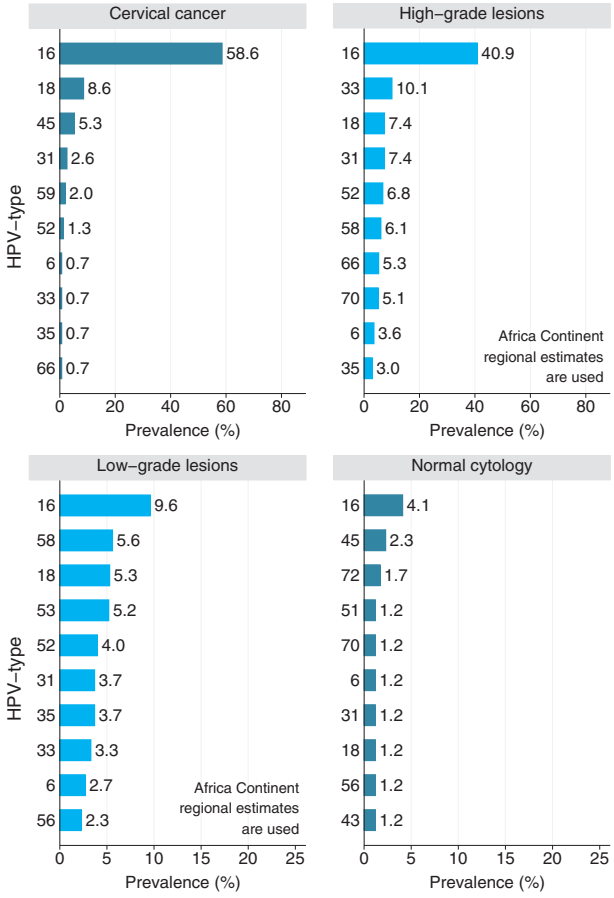
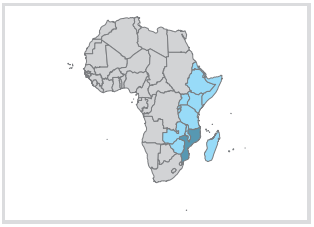



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 97 |
| Percentage of districts with >=80% DTP3 coverage | 99 |

DTP: Diphtheria, Tetanus and Pertussis

# MOZAMBIQUE



has a population of 5.88 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 2058 women are diagnosed with cervical cancer and 1654 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Mozambique, and the 1st most frequent cancer among women between 15 and 44 years of age. About 32.1% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 81.9% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 21.5 | 17.3 |
| Age-standardized rate | 33.6 | 27.2 |
| Cumulative risk 0-64 years (%) | 2.6 | 2 |
| SIR/SMR | 198 | 304 |
| Annual number of new cases/deaths | 2058 | 1654 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 1st | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

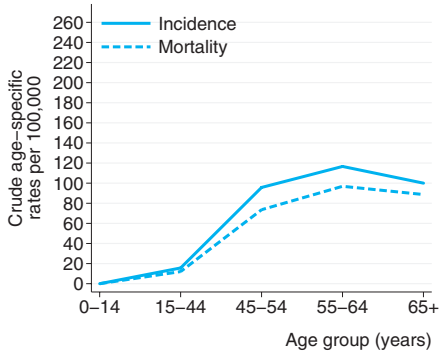



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 16.1 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 5.6 |
| Oral Contraceptive Use (%) | 4.9 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 196 | 32.1 (25.7-39.2) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type | 72 | 97.2* (90.3-99.7) |
| Cervical cancer: HPV 16/18 | 72 | 81.9 (71.1-90.0) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

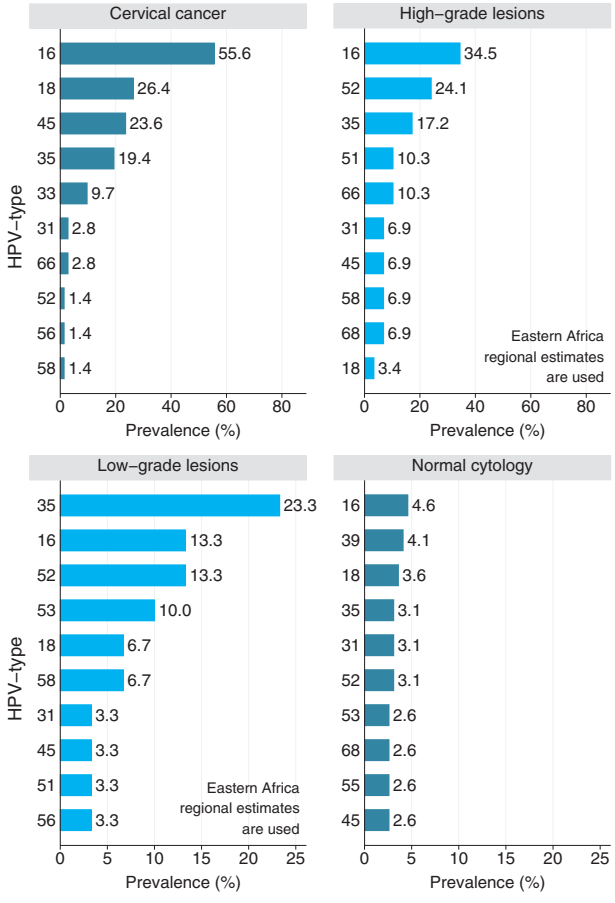



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 72 |
| Percentage of districts with >=80% DTP3 coverage | 90 |

DTP: Diphtheria, Tetanus and Pertussis

# MYANMAR

has a population of 18.08 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 5017 women are diagnosed with cervical cancer and 2594 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Myanmar, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Myanmar. However, in South-Eastern Asia, the region Myanmar belongs to, about 6.2% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 71.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 20.4 | 10.6 |
| Age-standardized rate | 24.6 | 13.1 |
| Cumulative risk 0-64 years (%) | 2 | 1.1 |
| SIR/SMR | 146 | 143 |
| Annual number of new cases/deaths | 5017 | 2594 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

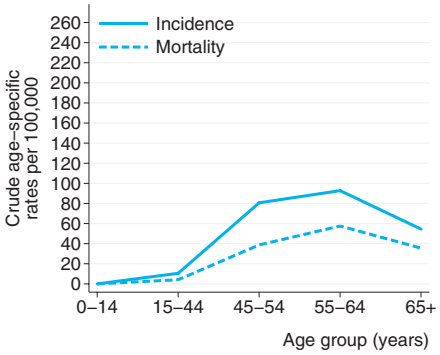



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

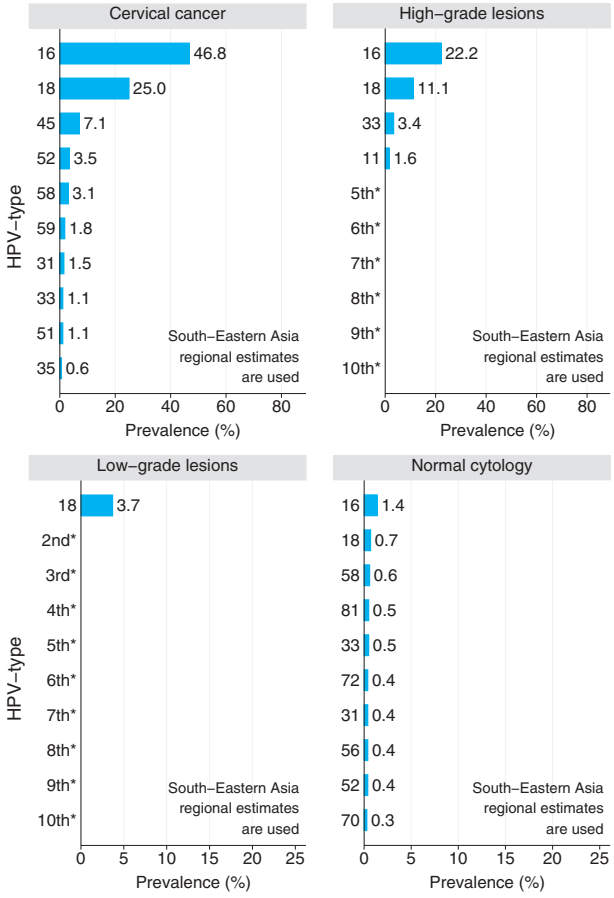
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.3 |
| Smoking prevalence in women (%) | 12.2 |
| Fertility rate (live births per women) | 2.9 |
| Oral Contraceptive Use (%) | 9.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4194 | 6.2 (5.5-6.9) |
| Low-grade lesions† | 27 | 33.3 (16.5-54.0) |
| High-grade lesions† | 207 | 61.8 (54.8-68.5) |
| Cervical cancer: any type† | 1090 | 92.1* (90.3-93.6) |
| Cervical cancer: HPV 16/18† | 1090 | 71.8 (69.1-74.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South-Eastern Asia regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 82 |
| Percentage of districts with >=80% DTP3 coverage | 62 |

DTP: Diphtheria, Tetanus and Pertussis

# NAMIBIA

has a population of 605392 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 133 women are diagnosed with cervical cancer and 109 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Namibia, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Namibia. However, in Southern Africa, the region Namibia belongs to, about 15.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 63.0% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 14.5 | 11.8 |
| Age-standardized rate | 22.2 | 18.1 |
| Cumulative risk 0-64 years (%) | 1.5 | 1.2 |
| SIR/SMR | 130 | 201 |
| Annual number of new cases/deaths | 133 | 109 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

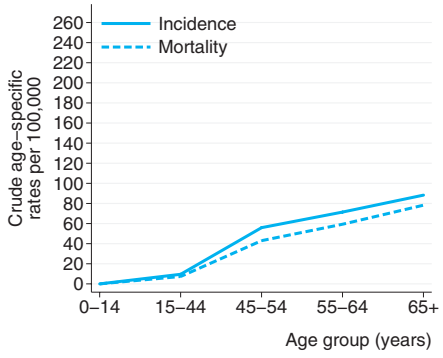



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

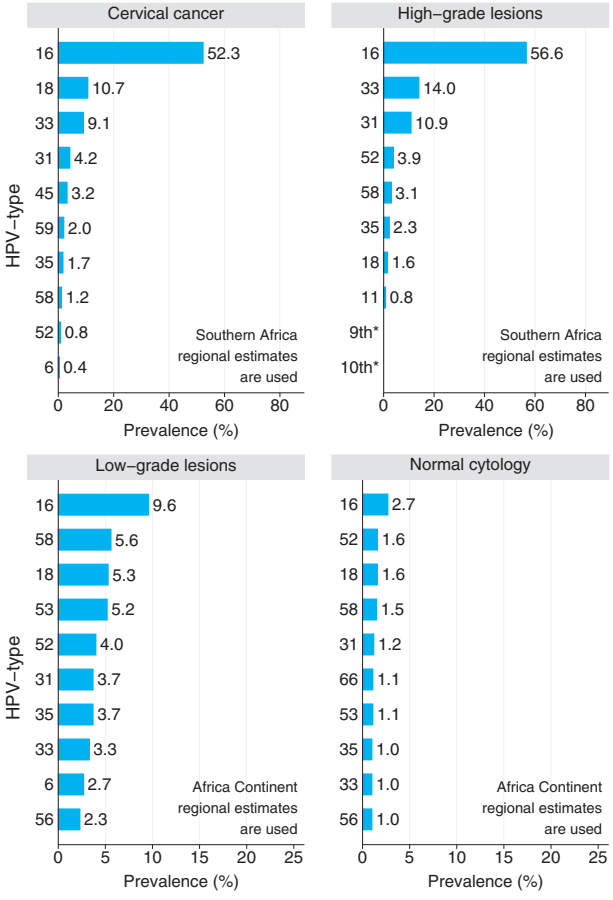
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 19.6 |
| Smoking prevalence in women (%) | 9.6 |
| Fertility rate (live births per women) | 5.2 |
| Oral Contraceptive Use (%) | 8.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 1269 | 15.5 (13.6-17.6) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions† | 129 | 88.4 (81.5-93.3) |
| Cervical cancer: any type† | 308 | 93.8* (90.5-96.2) |
| Cervical cancer: HPV 16/18† | 308 | 63.0 (57.3-68.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Africa regional estimate
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



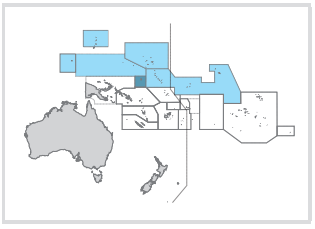

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 74 |
| Percentage of districts with >=80% DTP3 coverage | 32 |

DTP: Diphtheria, Tetanus and Pertussis

# NAURU



Data is not yet available on the burden of cervical cancer in Nauru. However, in Micronesia, the region Nauru belongs to, current estimates indicate that every year 19 women are diagnosed with cervical cancer and 10 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in Micronesia, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Nauru , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Oceania Continent about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

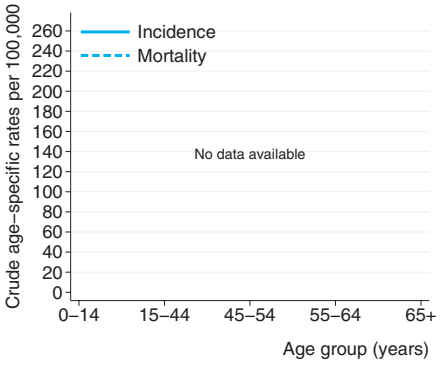



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

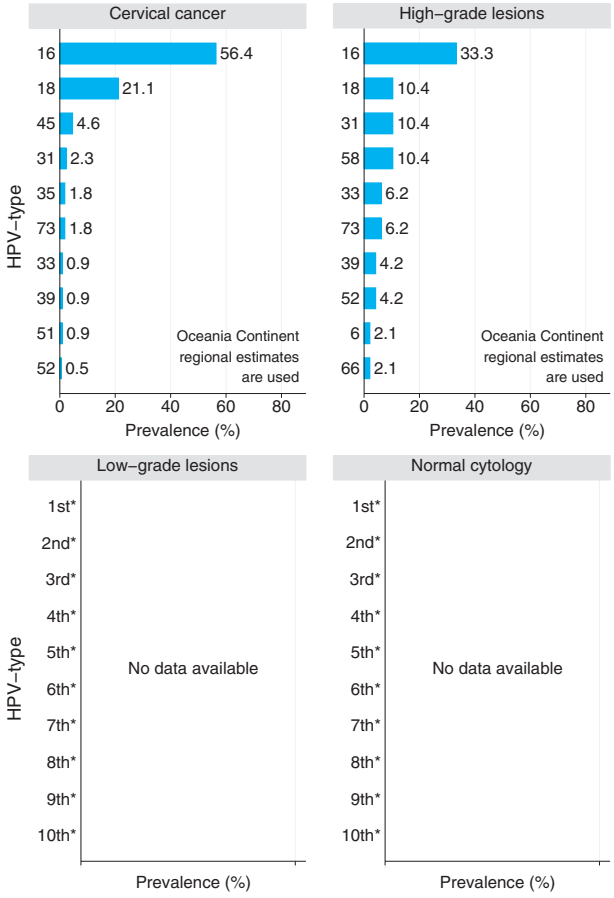
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions‡ | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type‡ | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18‡ | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 72 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# NEPAL

has a population of 8.54 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 2185 women are diagnosed with cervical cancer and 1129 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Nepal, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Nepal. However, in Southern Asia, the region Nepal belongs to, about 6.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 75.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 18.6 | 9.6 |
| Age-standardized rate | 26.4 | 14.1 |
| Cumulative risk 0-64 years (%) | 2.1 | 1.1 |
| SIR/SMR | 157 | 154 |
| Annual number of new cases/deaths | 2185 | 1129 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

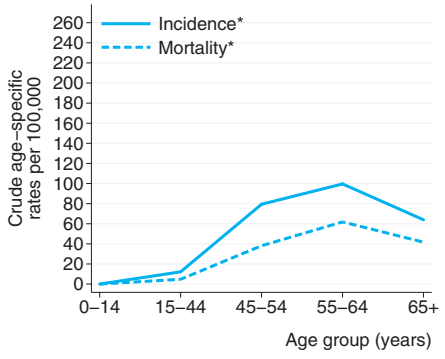



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

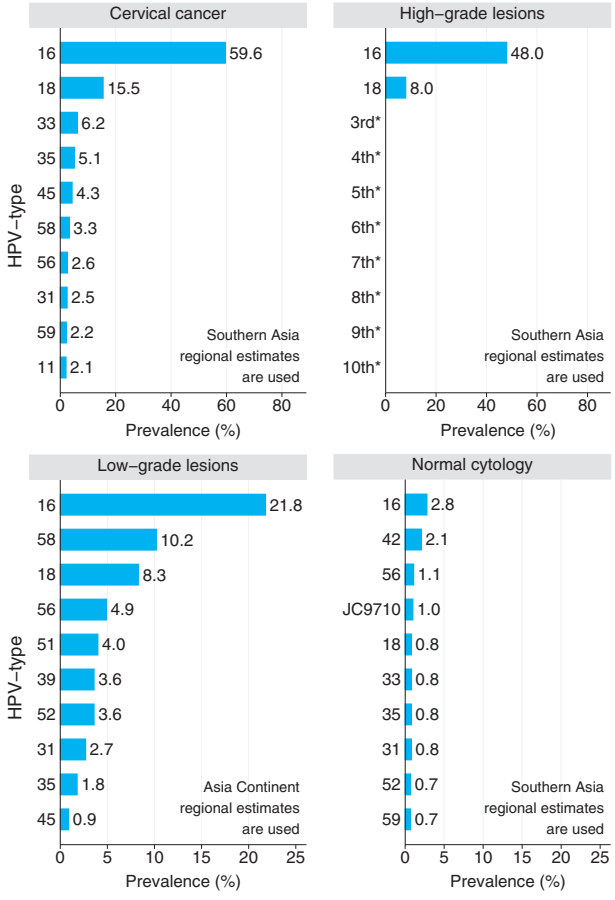
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.5 |
| Smoking prevalence in women (%) | 24 |
| Fertility rate (live births per women) | 4.3 |
| Oral Contraceptive Use (%) | 1.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 19164 | 6.6 (6.2-6.9) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions† | 25 | 64 (42.5-82.0) |
| Cervical cancer: any type† | 386 | 90.2* (86.7-92.9) |
| Cervical cancer: HPV 16/18† | 386 | 75.1 (70.5-79.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Asia regional estimate
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 89 |
| Percentage of districts with >=80% DTP3 coverage | 77 |

DTP: Diphtheria, Tetanus and Pertussis

# NETHERLANDS

has a population of 6.76 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 753 women are diagnosed with cervical cancer and 307 die from the disease. Cervical cancer ranks as the 11th most frequent cancer in women in Netherlands, and the 3rd most frequent cancer among women between 15 and 44 years of age. About 3.9% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 84.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 9.4 | 3.8 |
| Age-standardized rate | 7.3 | 2.3 |
| Cumulative risk 0-64 years (%) | 0.5 | 0.1 |
| SIR/SMR | 42 | 29 |
| Annual number of new cases/deaths | 753 | 307 |
| Ranking of cervical cancer (all ages) † | 11th | 15th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 4th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

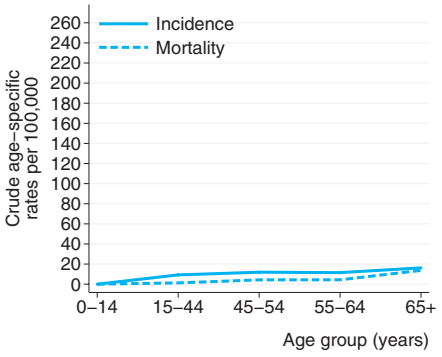



**Table 2. Cervical screening coverage**

| |
|---|
| 80% among women 30-64 years in the last 5 years (1996-1997) |

**Table 3. Factors contributing to cervical cancer**

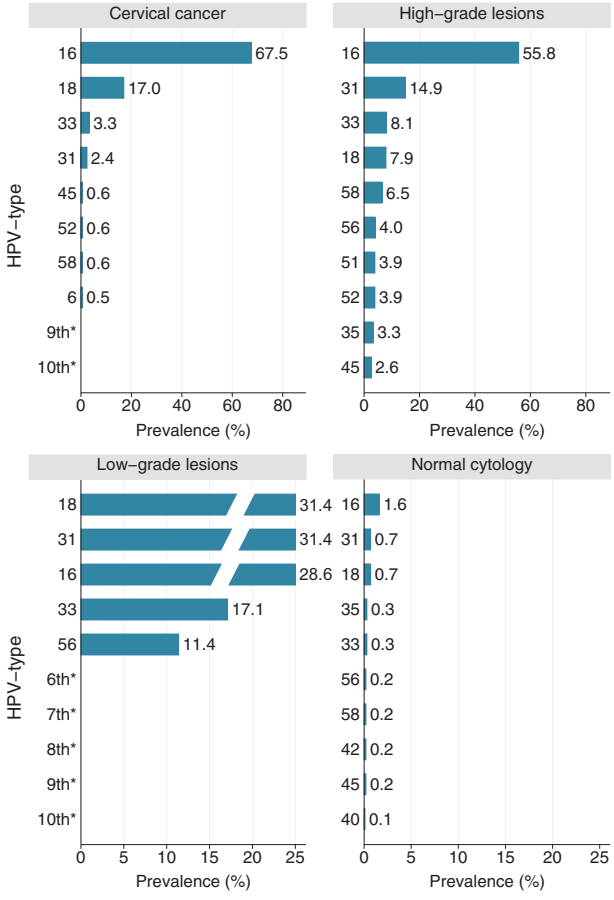
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | 28.4 |
| Fertility rate (live births per women) | 1.7 |
| Oral Contraceptive Use (%) | 49.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 26908 | 3.9 (3.6-4.1) |
| Low-grade lesions | 35 | 97.1 (85.1-99.9) |
| High-grade lesions | 731 | 97.7 (96.3-98.6) |
| Cervical cancer: any type | 212 | 90.6* (85.8-94.1) |
| Cervical cancer: HPV 16/18 | 212 | 84.4 (78.8-89.0) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# NEW ZEALAND

has a population of 1.63 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 228 women are diagnosed with cervical cancer and 82 die from the disease. Cervical cancer ranks as the 8th most frequent cancer in women in New Zealand, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of New Zealand , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time. In Australia and New Zealand, the region New Zealand belongs to, about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 11.7 | 4.2 |
| Age-standardized rate | 10 | 3.2 |
| Cumulative risk 0-64 years (%) | 0.7 | 0.2 |
| SIR/SMR | 58 | 36 |
| Annual number of new cases/deaths | 228 | 82 |
| Ranking of cervical cancer (all ages) † | 8th | 11th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

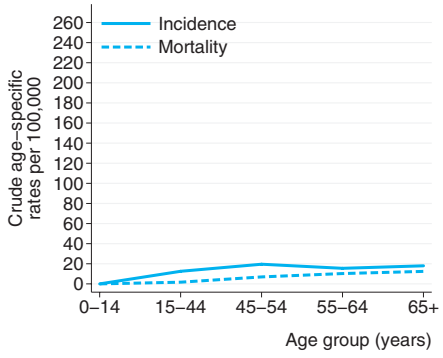



**Table 2. Cervical screening coverage**

| |
|---|
| 76% among women aged 20-69 years (1998); 99.14% among women aged 20-69 years (2003) |

**Table 3. Factors contributing to cervical cancer**

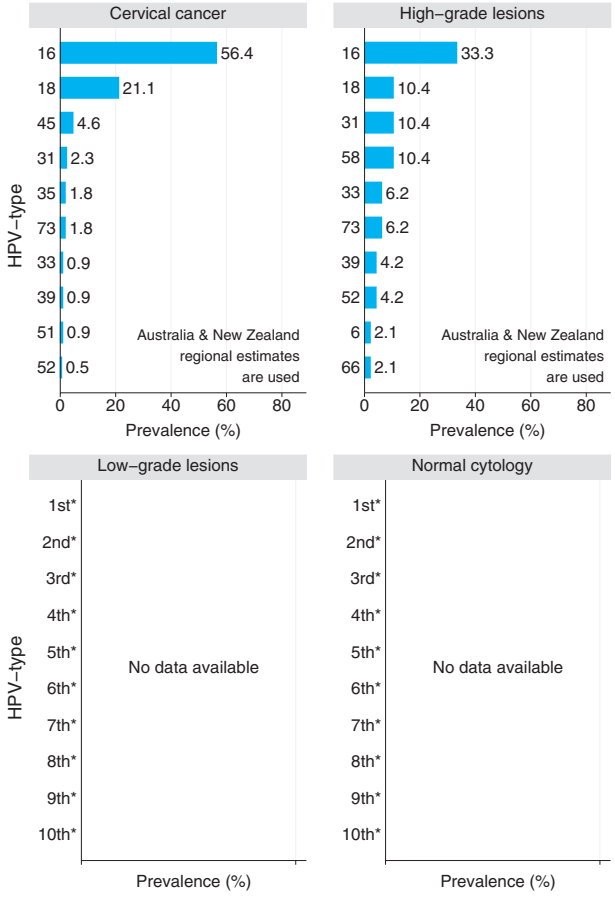
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 22.2 |
| Fertility rate (live births per women) | 2.0 |
| Oral Contraceptive Use (%) | 20.1 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions† | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type† | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18† | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Australia and New Zealand regional estimate
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 89 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# NICARAGUA

has a population of 1.70 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 809 women are diagnosed with cervical cancer and 354 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Nicaragua, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Nicaragua. However, in Central America, the region Nicaragua belongs to, about 20.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 58.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 30.2 | 13.2 |
| Age-standardized rate | 47.2 | 22.3 |
| Cumulative risk 0-64 years (%) | 3.1 | 1.3 |
| SIR/SMR | 281 | 241 |
| Annual number of new cases/deaths | 809 | 354 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

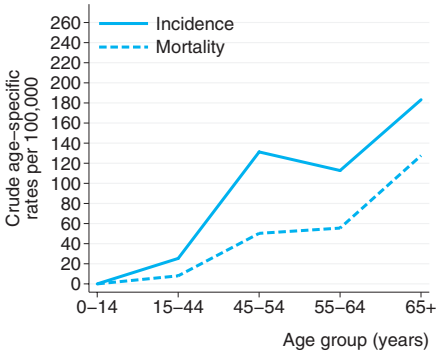



**Table 2. Cervical screening coverage**

20.5% in the last 12 months among women aged 15-49 years (1998)

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | 5.3 |
| Fertility rate (live births per women) | 3.3 |
| Oral Contraceptive Use (%) | 14.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 10232 | 20.5 (19.7-21.3) |
| Low-grade lesions† | 390 | 55.1 (50.0-60.1) |
| High-grade lesions† | 280 | 86.8 (82.2-90.5) |
| Cervical cancer: any type† | 341 | 90.3* (86.7-93.2) |
| Cervical cancer: HPV 16/18† | 341 | 58.4 (52.9-63.6) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Central America regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

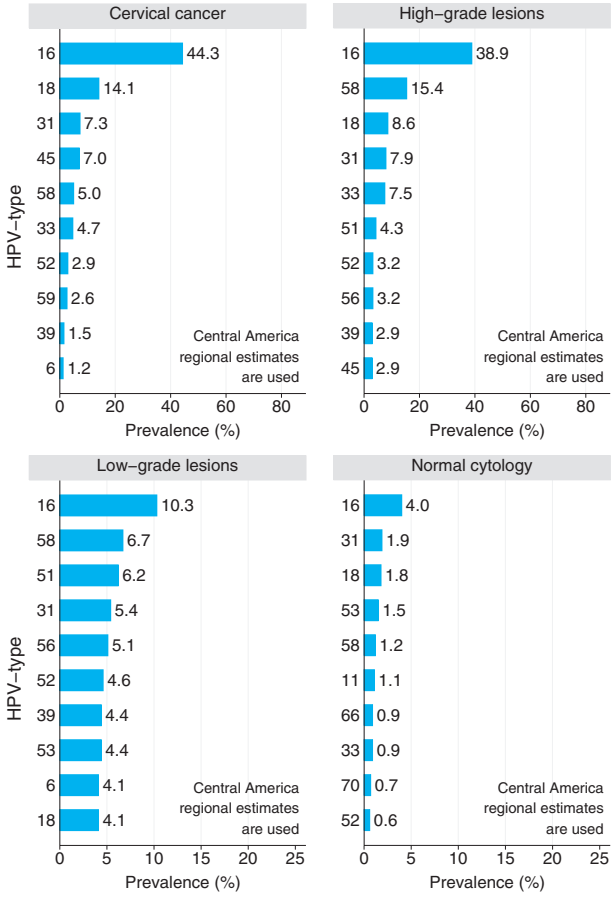
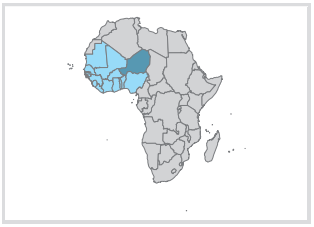



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 87 |
| Percentage of districts with >=80% DTP3 coverage | 59 |

DTP: Diphtheria, Tetanus and Pertussis

# NIGER



has a population of 3.49 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 679 women are diagnosed with cervical cancer and 532 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Niger, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Niger. However, in Western Africa, the region Niger belongs to, about 16.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 50.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 11.8 | 9.2 |
| Age-standardized rate | 19.9 | 15.7 |
| Cumulative risk 0-64 years (%) | 1.6 | 1.2 |
| SIR/SMR | 133 | 208 |
| Annual number of new cases/deaths | 679 | 532 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

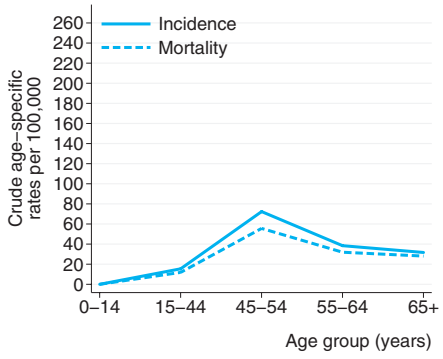



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.1 |
| Smoking prevalence in women (%) | 11.3 |
| Fertility rate (live births per women) | 7.5 |
| Oral Contraceptive Use (%) | 3.4 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2641 | 16.5 (15.1-18.0) |
| Low-grade lesions† | 271 | 59 (52.9-65.0) |
| High-grade lesions† | 138 | 79.7 (72.0-86.1) |
| Cervical cancer: any type† | 218 | 85.8* (80.4-90.1) |
| Cervical cancer: HPV 16/18† | 218 | 50.5 (43.6-57.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

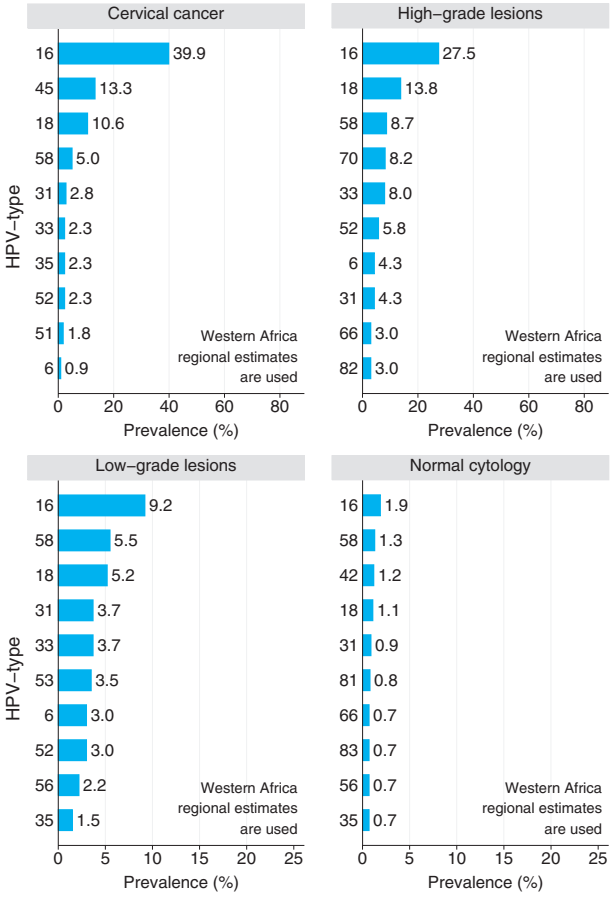
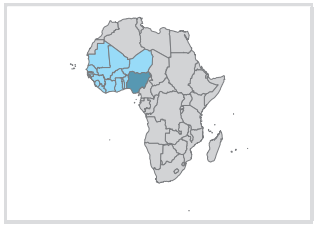



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 39 |
| Percentage of districts with >=80% DTP3 coverage | 88 |

DTP: Diphtheria, Tetanus and Pertussis

# NIGERIA



has a population of 36.59 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 9922 women are diagnosed with cervical cancer and 8030 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Nigeria, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 24.8% of women in the general population are estimated to harbour cervical HPV infection at a given time. Data on specific HPV-16 and 18 prevalence for Nigeria among women with invasive cervical cancer is not yet available, but in Western Africa 50.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 16.7 | 13.5 |
| Age-standardized rate | 28.5 | 23.3 |
| Cumulative risk 0-64 years (%) | 2.1 | 1.7 |
| SIR/SMR | 160 | 251 |
| Annual number of new cases/deaths | 9922 | 8030 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

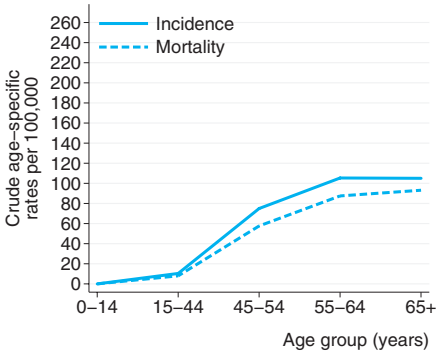



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

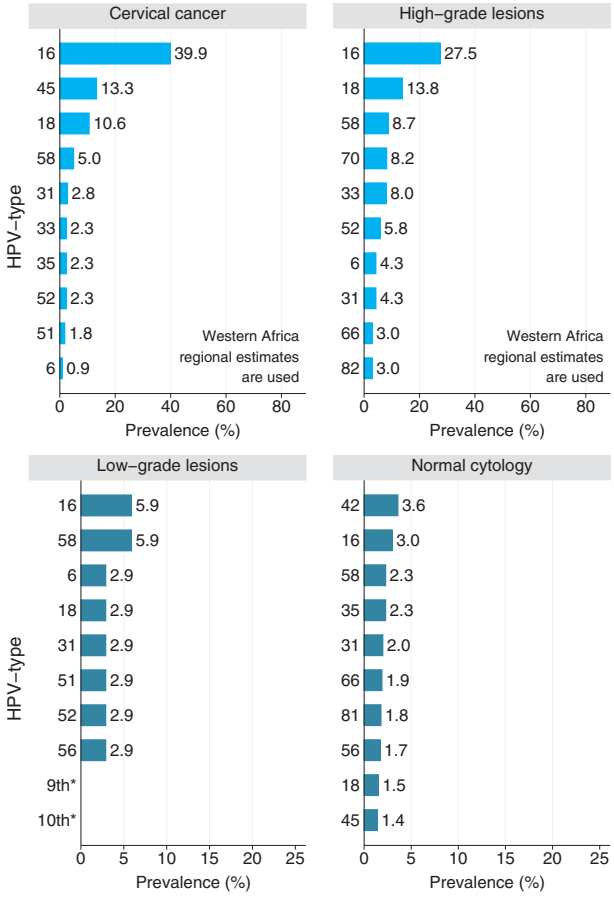
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 3.9 |
| Smoking prevalence in women (%) | 0.5 |
| Fertility rate (live births per women) | 5.1 |
| Oral Contraceptive Use (%) | 1.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 844 | 24.8 (21.9-27.8) |
| Low-grade lesions | 34 | 38.2 (22.2-56.4) |
| High-grade lesions† | 138 | 79.7 (72.0-86.1) |
| Cervical cancer: any type† | 218 | 85.8* (80.4-90.1) |
| Cervical cancer: HPV 16/18† | 218 | 50.5 (43.6-57.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



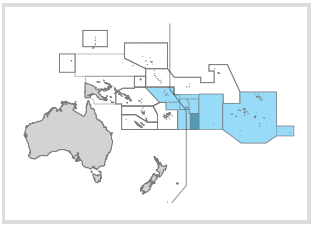

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 54 |
| Percentage of districts with >=80% DTP3 coverage | 40 |

DTP: Diphtheria, Tetanus and Pertussis

# NIUE



Data is not yet available on the burden of cervical cancer in Niue. However, in Polynesia, the region Niue belongs to, current estimates indicate that every year 72 women are diagnosed with cervical cancer and 38 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Polynesia, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Niue , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Oceania Continent about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

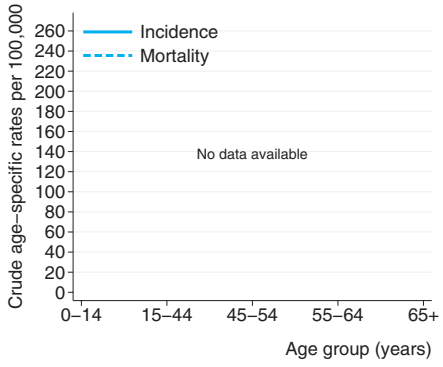



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

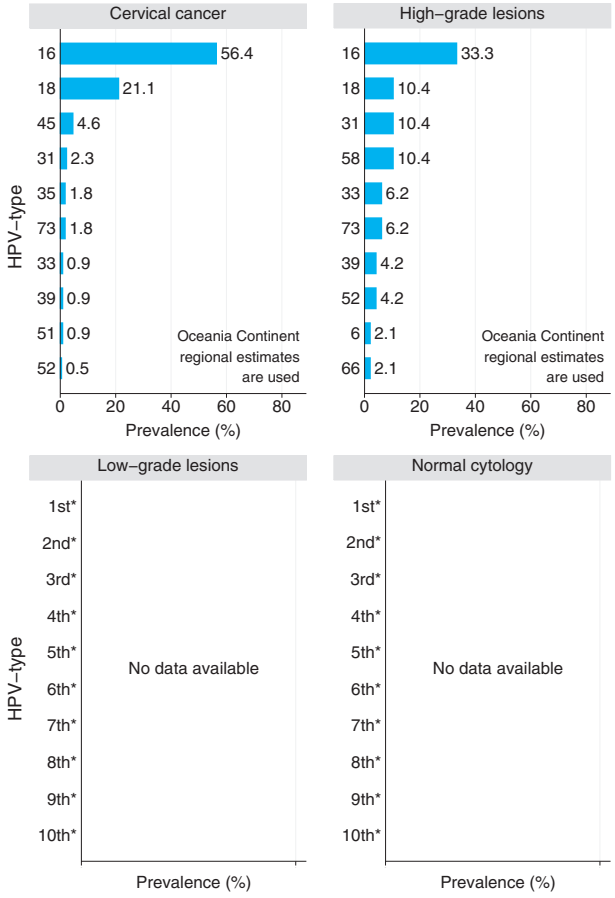
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions‡ | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type‡ | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18‡ | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



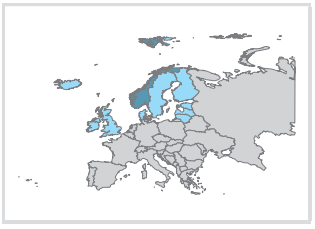

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# NORWAY



has a population of 1.88 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 291 women are diagnosed with cervical cancer and 125 die from the disease. Cervical cancer ranks as the 8th most frequent cancer in women in Norway, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Norway. However, in Northern Europe, the region Norway belongs to, about 8.0% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Norway 82.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 12.9 | 5.5 |
| Age-standardized rate | 10.4 | 3.5 |
| Cumulative risk 0-64 years (%) | 0.8 | 0.2 |
| SIR/SMR | 58 | 41 |
| Annual number of new cases/deaths | 291 | 125 |
| Ranking of cervical cancer (all ages) † | 8th | 11th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

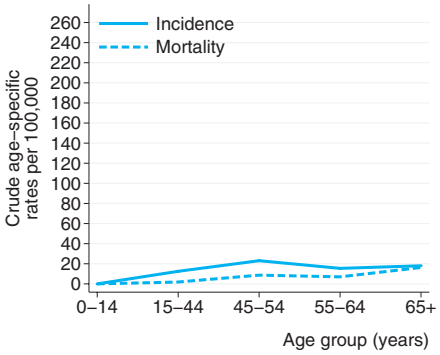



**Table 2. Cervical screening coverage**

| |
|---|
| 71% (1998-2000) |

**Table 3. Factors contributing to cervical cancer**

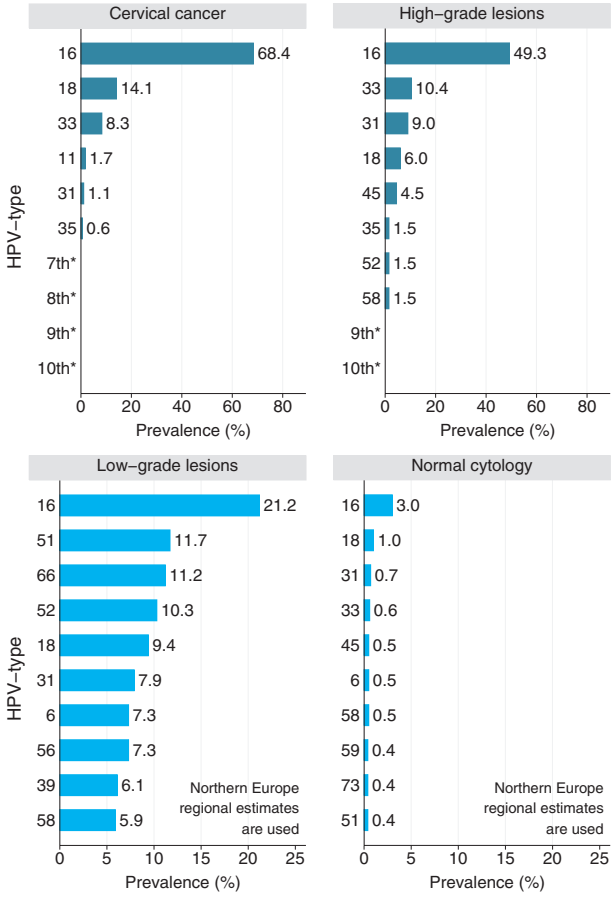
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 24.8 |
| Fertility rate (live births per women) | 1.8 |
| Oral Contraceptive Use (%) | 17.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 16235 | 8.0 (7.5-8.4) |
| Low-grade lesions† | 646 | 85.3 (82.3-87.9) |
| High-grade lesions | 67 | 79.1 (67.4-88.1) |
| Cervical cancer: any type | 361 | 98.3* (96.4-99.4) |
| Cervical cancer: HPV 16/18 | 361 | 82.5 (78.2-86.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Northern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 93 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# OMAN

has a population of 691640 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 46 women are diagnosed with cervical cancer and 25 die from the disease. Cervical cancer ranks as the 3rd most frequent cancer in women in Oman, and the 4th most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Oman. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 3.6 | 1.9 |
| Age-standardized rate | 6.9 | 3.9 |
| Cumulative risk 0-64 years (%) | 0.4 | 0.2 |
| SIR/SMR | 36 | 38 |
| Annual number of new cases/deaths | 46 | 25 |
| Ranking of cervical cancer (all ages) † | 3rd | 4th |
| Ranking of cervical cancer (15-44 years) † | 4th | 4th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

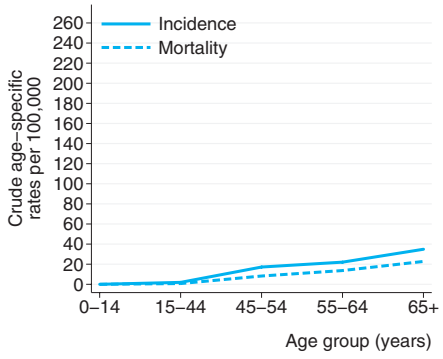



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 1.5 |
| Fertility rate (live births per women) | 7.4 |
| Oral Contraceptive Use (%) | 6.1 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

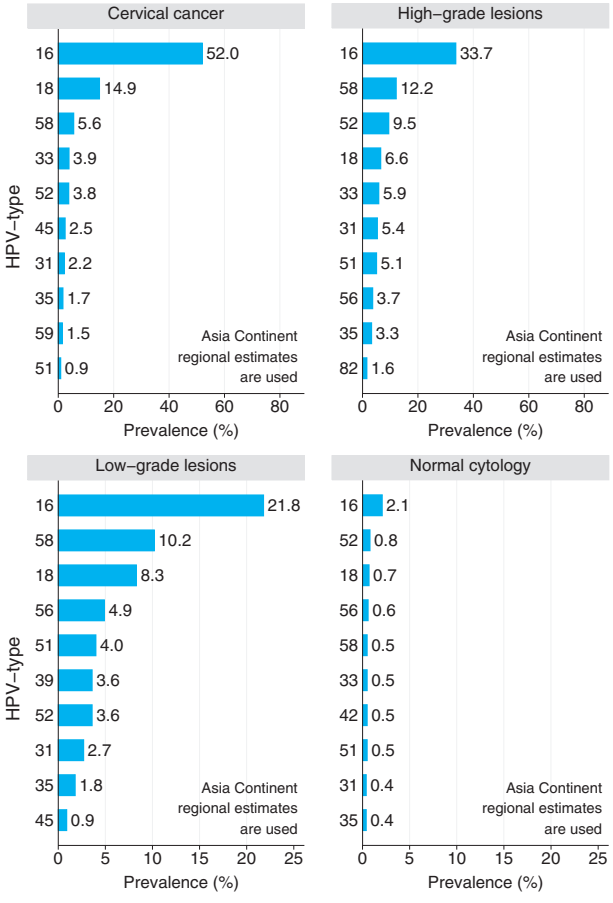



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# PAKISTAN

has a population of 47.27 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 2962 women are diagnosed with cervical cancer and 1605 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in Pakistan, and the 12th most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Pakistan. However, in Southern Asia, the region Pakistan belongs to, about 6.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 75.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 4.1 | 2.2 |
| Age-standardized rate | 6.5 | 3.6 |
| Cumulative risk 0-64 years (%) | 0.5 | 0.3 |
| SIR/SMR | 36 | 37 |
| Annual number of new cases/deaths | 2962 | 1605 |
| Ranking of cervical cancer (all ages) † | 4th | 6th |
| Ranking of cervical cancer (15-44 years) † | 12th | 13th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

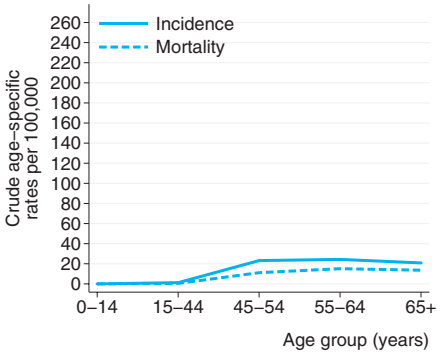



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

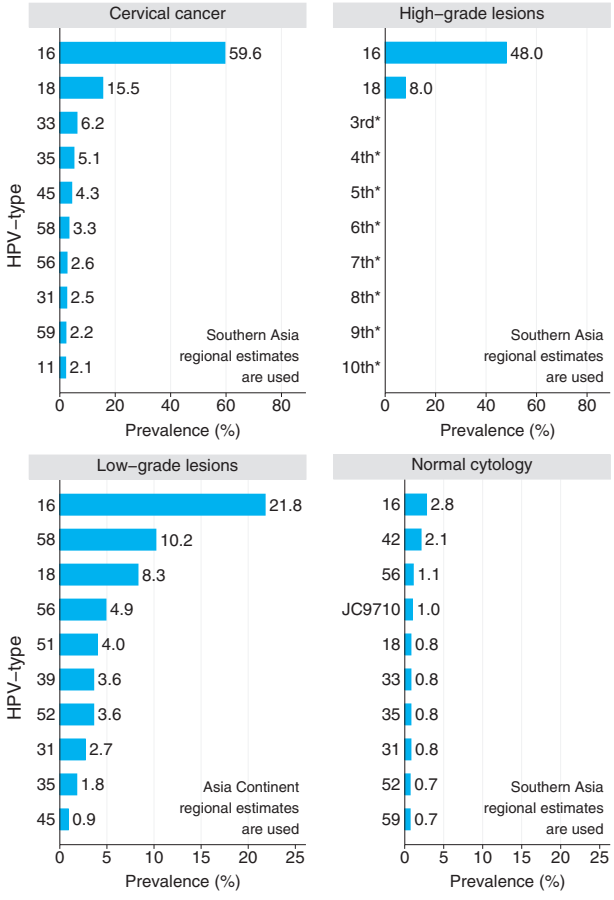
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 9 |
| Fertility rate (live births per women) | 4.8 |
| Oral Contraceptive Use (%) | 1.9 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 19164 | 6.6 (6.2-6.9) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions† | 25 | 64 (42.5-82.0) |
| Cervical cancer: any type† | 386 | 90.2* (86.7-92.9) |
| Cervical cancer: HPV 16/18† | 386 | 75.1 (70.5-79.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Asia regional estimate
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



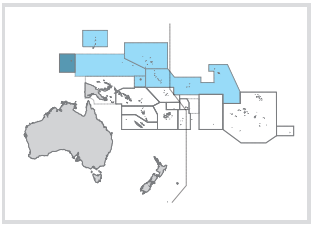

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 83 |
| Percentage of districts with >=80% DTP3 coverage | 55 |

DTP: Diphtheria, Tetanus and Pertussis

# PALAU



Data is not yet available on the burden of cervical cancer in Palau. However, in Micronesia, the region Palau belongs to, current estimates indicate that every year 19 women are diagnosed with cervical cancer and 10 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in Micronesia, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Palau , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Oceania Continent about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

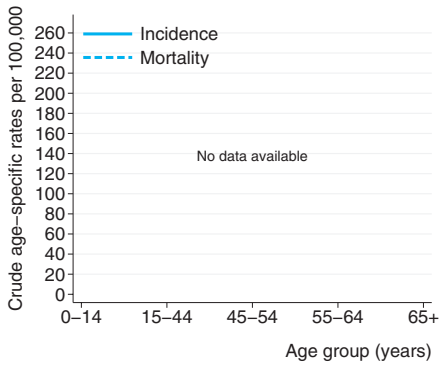



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

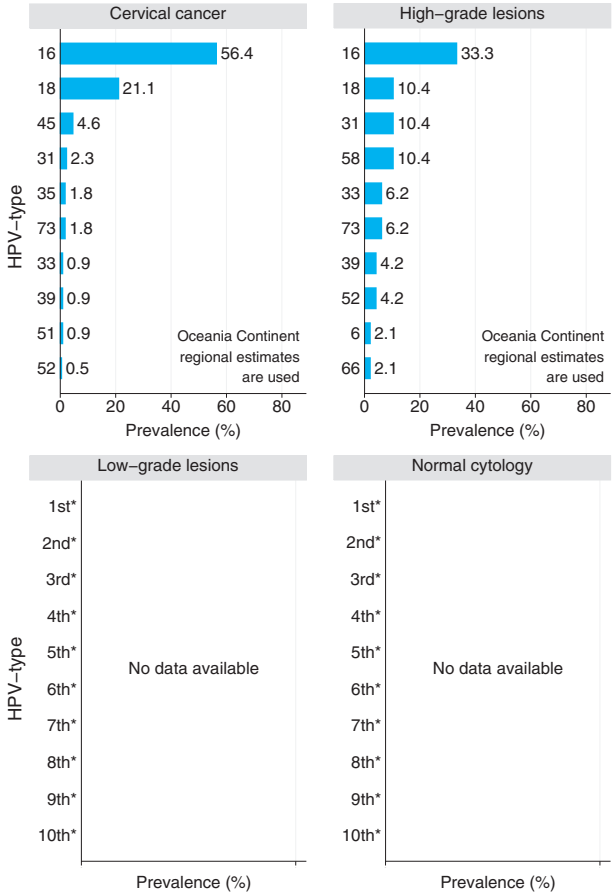
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 4 |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions‡ | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type‡ | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18‡ | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# PANAMA

has a population of 1.12 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 375 women are diagnosed with cervical cancer and 166 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Panama, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Panama. However, in Central America, the region Panama belongs to, about 20.5% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Panama 63.0% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 25.8 | 11.5 |
| Age-standardized rate | 28.2 | 12.9 |
| Cumulative risk 0-64 years (%) | 2 | 0.8 |
| SIR/SMR | 175 | 145 |
| Annual number of new cases/deaths | 375 | 166 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

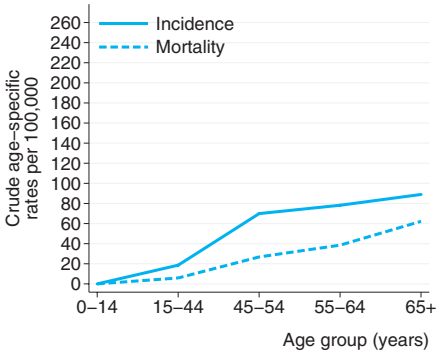



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.9 |
| Smoking prevalence in women (%) | 6.1 |
| Fertility rate (live births per women) | 2.7 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 10232 | 20.5 (19.7-21.3) |
| Low-grade lesions† | 390 | 55.1 (50.0-60.1) |
| High-grade lesions† | 280 | 86.8 (82.2-90.5) |
| Cervical cancer: any type | 73 | 100* (95.1-100.0) |
| Cervical cancer: HPV 16/18 | 73 | 63.0 (50.9-74.0) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Central America regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

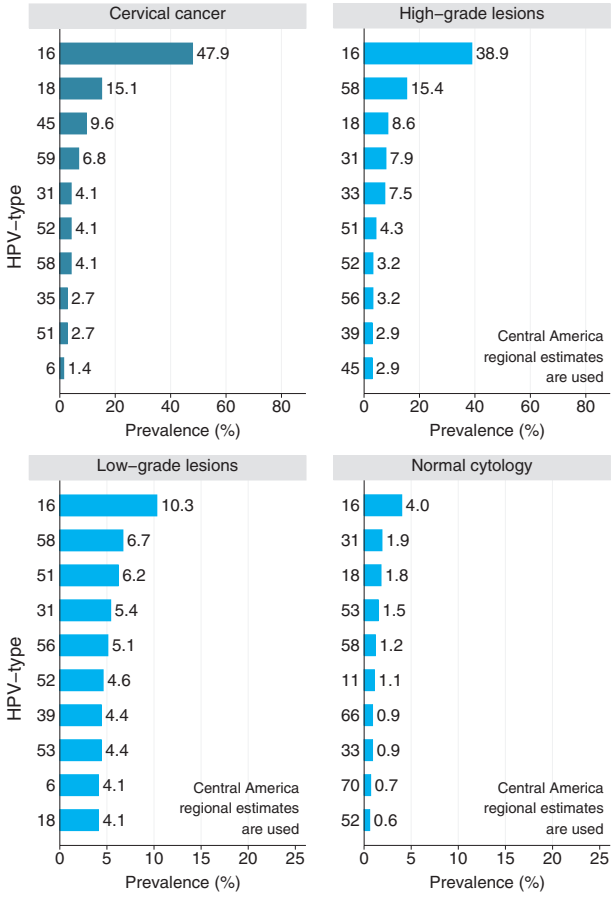
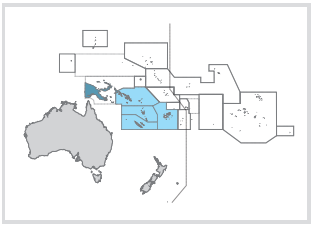



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 96 |

DTP: Diphtheria, Tetanus and Pertussis

# PAPUA NEW GUINEA



has a population of 1.70 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 637 women are diagnosed with cervical cancer and 341 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Papua New Guinea, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Papua New Guinea , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Oceania Continent about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 26.5 | 14.2 |
| Age-standardized rate | 40.4 | 22.6 |
| Cumulative risk 0-64 years (%) | 2.8 | 1.6 |
| SIR/SMR | 237 | 251 |
| Annual number of new cases/deaths | 637 | 341 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

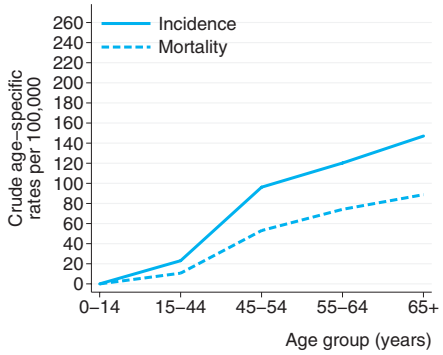



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

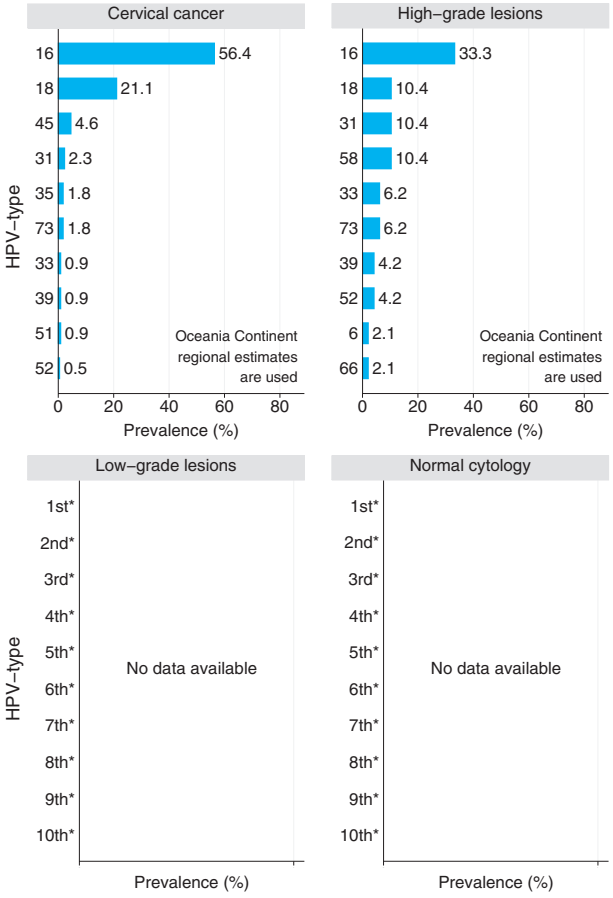
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.8 |
| Smoking prevalence in women (%) | 28 |
| Fertility rate (live births per women) | 4.8 |
| Oral Contraceptive Use (%) | 4.4 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions‡ | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type‡ | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18‡ | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 75 |
| Percentage of districts with >=80% DTP3 coverage | 42 |

DTP: Diphtheria, Tetanus and Pertussis

# PARAGUAY

has a population of 1.92 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1131 women are diagnosed with cervical cancer and 513 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Paraguay, and the 1st most frequent cancer among women between 15 and 44 years of age. About 19.8% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 77.9% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 39.6 | 18 |
| Age-standardized rate | 53.2 | 26.1 |
| Cumulative risk 0-64 years (%) | 3.9 | 1.8 |
| SIR/SMR | 331 | 290 |
| Annual number of new cases/deaths | 1131 | 513 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

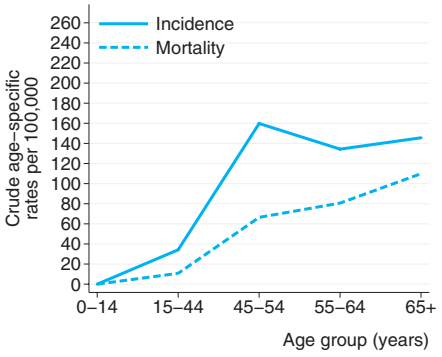



**Table 2. Cervical screening coverage**

| |
|---|
| 49.1% in the last 12 months among women aged 15-49 years (1996) |

**Table 3. Factors contributing to cervical cancer**

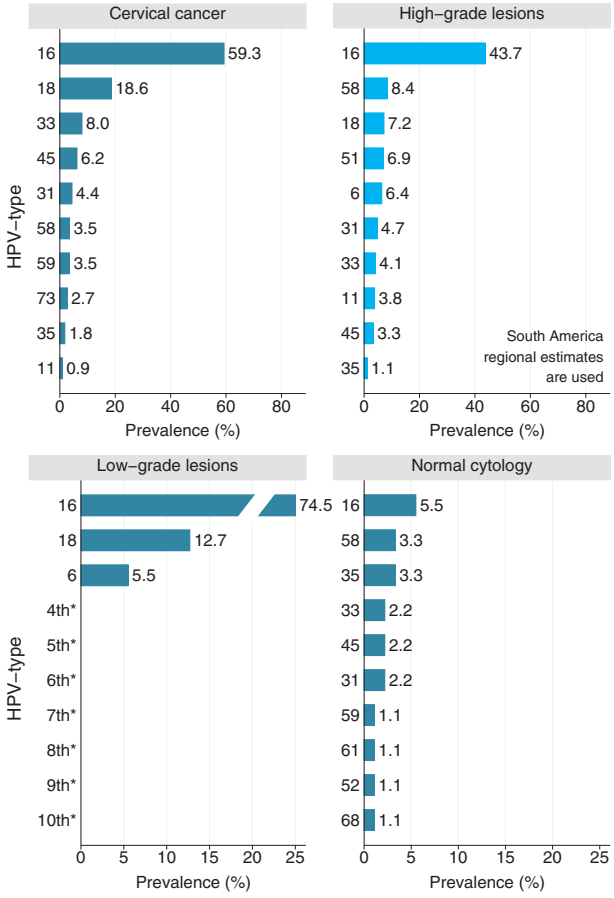
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.4 |
| Smoking prevalence in women (%) | 6.8 |
| Fertility rate (live births per women) | 4.3 |
| Oral Contraceptive Use (%) | 15.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 91 | 19.8 (12.2-29.4) |
| Low-grade lesions | 55 | 96.4 (87.5-99.6) |
| High-grade lesions† | 487 | 80.1 (76.3-83.5) |
| Cervical cancer: any type | 113 | 96.5* (91.2-99.0) |
| Cervical cancer: HPV 16/18 | 113 | 77.9 (69.1-85.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South America regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 73 |
| Percentage of districts with >=80% DTP3 coverage | 65 |

DTP: Diphtheria, Tetanus and Pertussis

# PERU

has a population of 9.48 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 5400 women are diagnosed with cervical cancer and 2663 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Peru, and the 1st most frequent cancer among women between 15 and 44 years of age. About 17.7% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 68.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 40.4 | 19.9 |
| Age-standardized rate | 48.2 | 24.6 |
| Cumulative risk 0-64 years (%) | 3.3 | 1.4 |
| SIR/SMR | 292 | 271 |
| Annual number of new cases/deaths | 5400 | 2663 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

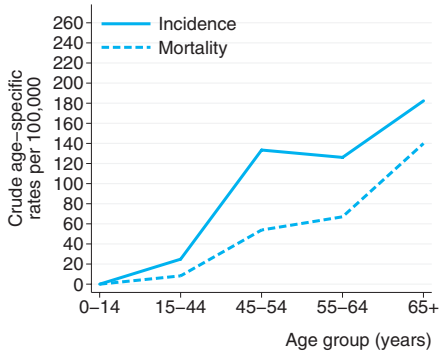



**Table 2. Cervical screening coverage**

42.9% in the last 12 months among women aged 15-49 years (1996); 40.3% in the last 3 years among women aged 25-59 years (2000/03)

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.6 |
| Smoking prevalence in women (%) | 17.8 |
| Fertility rate (live births per women) | 3.0 |
| Oral Contraceptive Use (%) | 6.7 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 175 | 17.7 (12.4-24.2) |
| Low-grade lesions† | 548 | 79 (75.4-82.4) |
| High-grade lesions† | 487 | 80.1 (76.3-83.5) |
| Cervical cancer: any type | 196 | 94.9* (90.8-97.5) |
| Cervical cancer: HPV 16/18 | 196 | 68.4 (61.4-74.8) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South America regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

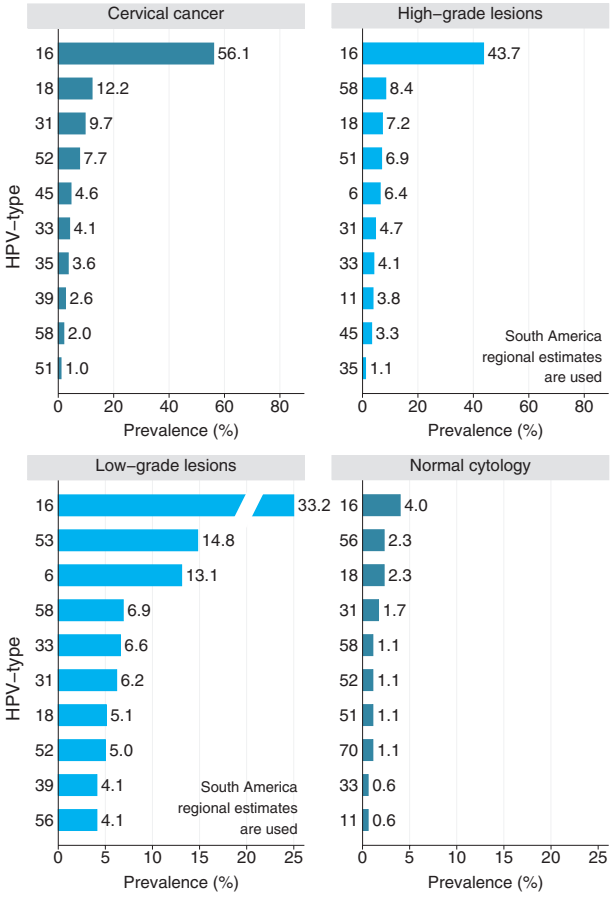



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 94 |
| Percentage of districts with >=80% DTP3 coverage | 65 |

DTP: Diphtheria, Tetanus and Pertussis

# PHILIPPINES

has a population of 26.98 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 6000 women are diagnosed with cervical cancer and 4349 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Philippines, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 9.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 64.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 15.4 | 11.2 |
| Age-standardized rate | 20.9 | 15.6 |
| Cumulative risk 0-64 years (%) | 1.5 | 1.1 |
| SIR/SMR | 123 | 171 |
| Annual number of new cases/deaths | 6000 | 4349 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

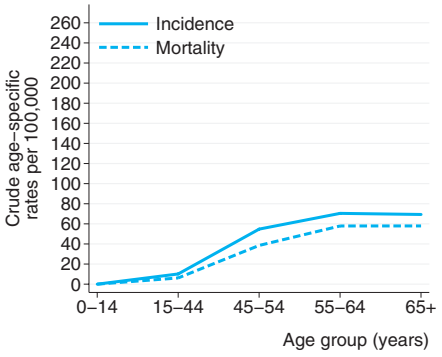



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

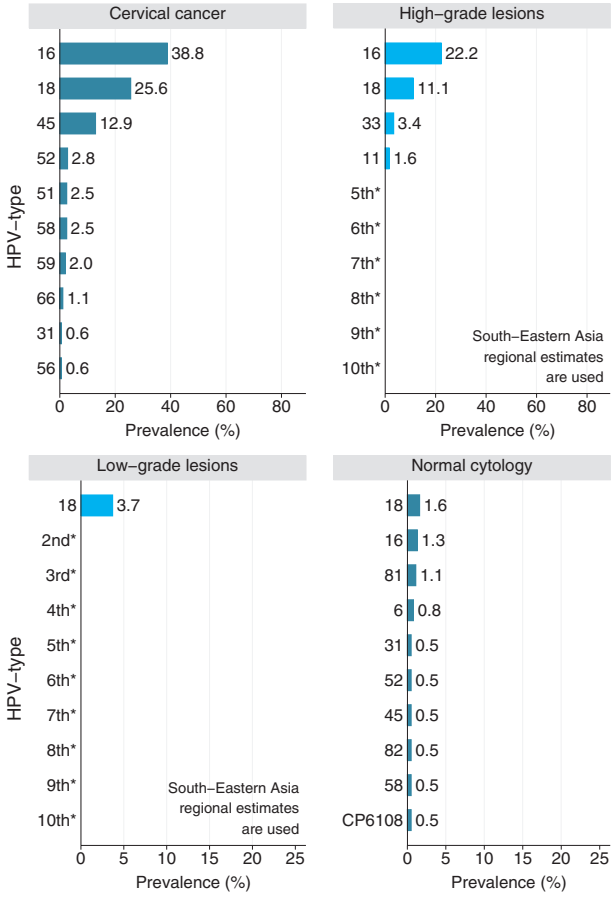
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 7.6 |
| Fertility rate (live births per women) | 3.8 |
| Oral Contraceptive Use (%) | 13.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 377 | 9.3 (6.6-12.7) |
| Low-grade lesions† | 27 | 33.3 (16.5-54.0) |
| High-grade lesions† | 207 | 61.8 (54.8-68.5) |
| Cervical cancer: any type | 356 | 93.5* (90.5-95.9) |
| Cervical cancer: HPV 16/18 | 356 | 64.3 (59.1-69.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South-Eastern Asia regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



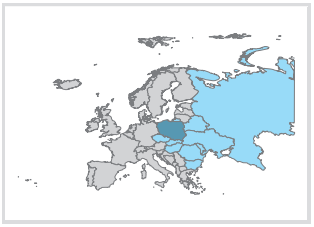

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 88 |
| Percentage of districts with >=80% DTP3 coverage | 44 |

DTP: Diphtheria, Tetanus and Pertussis

# POLAND



has a population of 16.78 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 4901 women are diagnosed with cervical cancer and 2278 die from the disease. Cervical cancer ranks as the 3rd most frequent cancer in women in Poland, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Poland. However, in Eastern Europe, the region Poland belongs to, about 29.1% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Poland 61.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 24.8 | 11.5 |
| Age-standardized rate | 18.4 | 7.8 |
| Cumulative risk 0-64 years (%) | 1.3 | 0.5 |
| SIR/SMR | 113 | 90 |
| Annual number of new cases/deaths | 4901 | 2278 |
| Ranking of cervical cancer (all ages) † | 3rd | 4th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

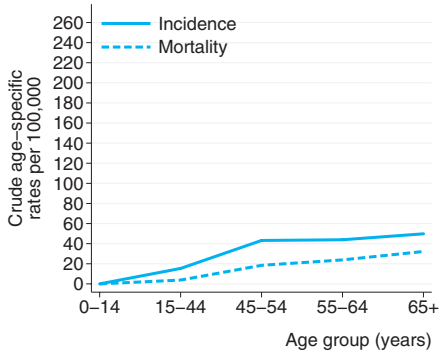



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

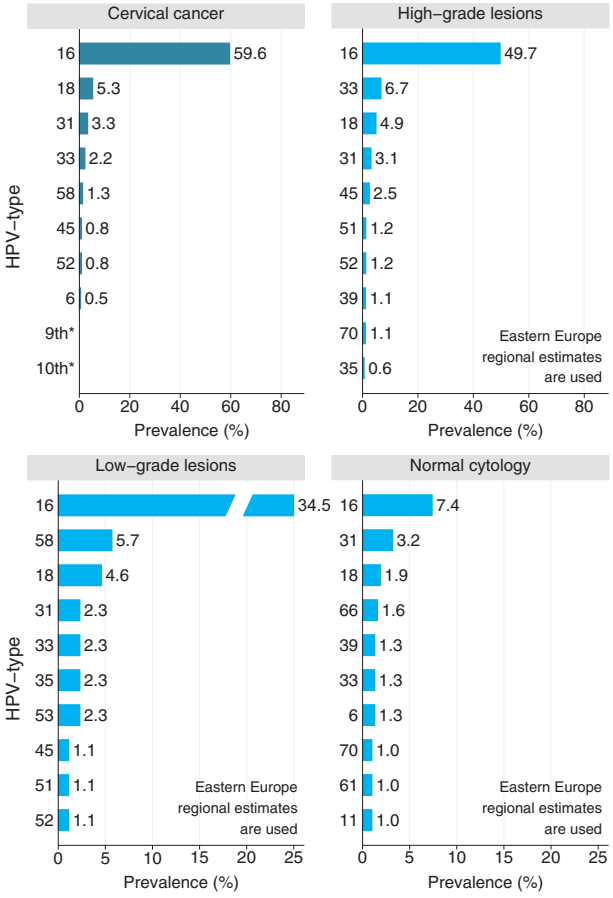
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 25 |
| Fertility rate (live births per women) | 1.3 |
| Oral Contraceptive Use (%) | 2.3 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 309 | 29.1 (24.1-34.5) |
| Low-grade lesions† | 87 | 52.9 (41.9-63.7) |
| High-grade lesions† | 163 | 75.5 (68.1-81.9) |
| Cervical cancer: any type | 183 | 68.9* (61.6-75.5) |
| Cervical cancer: HPV 16/18 | 183 | 61.7 (54.3-68.8) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# PORTUGAL

has a population of 4.61 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 956 women are diagnosed with cervical cancer and 378 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in Portugal, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Portugal. However, in Southern Europe, the region Portugal belongs to, about 5.7% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Portugal 95.0% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 18.4 | 7.3 |
| Age-standardized rate | 13.5 | 4.5 |
| Cumulative risk 0-64 years (%) | 1 | 0.3 |
| SIR/SMR | 80 | 52 |
| Annual number of new cases/deaths | 956 | 378 |
| Ranking of cervical cancer (all ages) † | 4th | 6th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

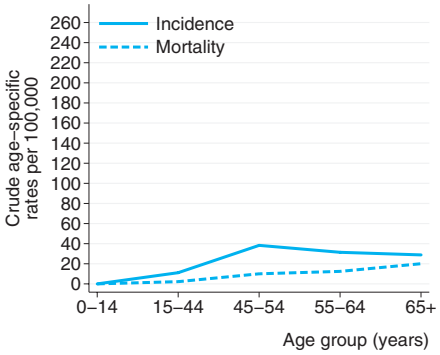



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

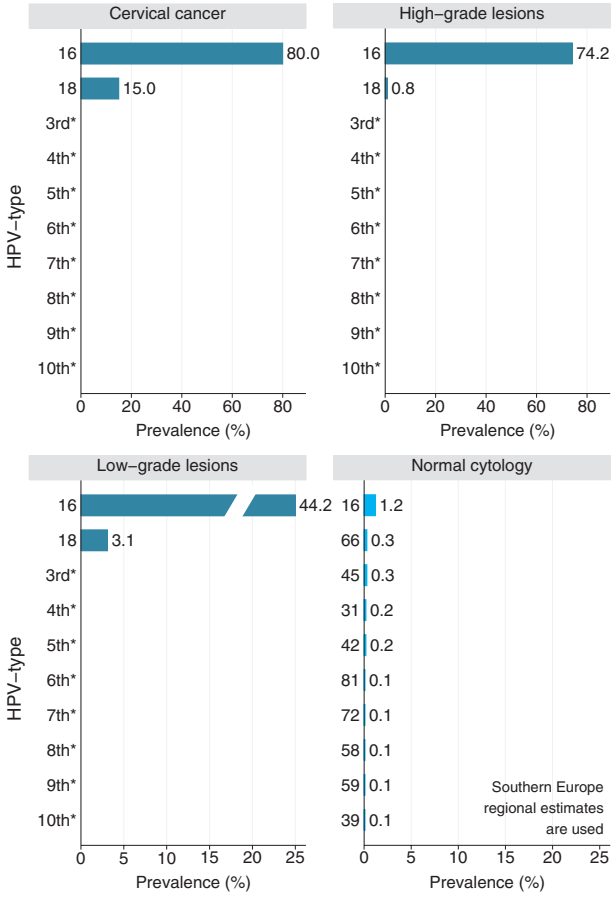
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.4 |
| Smoking prevalence in women (%) | 9.5 |
| Fertility rate (live births per women) | 1.5 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4884 | 5.7 (5.0-6.3) |
| Low-grade lesions | 416 | 82.9 (79.0-86.4) |
| High-grade lesions | 132 | 91.7 (85.6-95.8) |
| Cervical cancer: any type | 60 | 98.3* (91.1-100.0) |
| Cervical cancer: HPV 16/18 | 60 | 95.0 (86.1-99.0) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 93 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# QATAR

has a population of 178643 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 5 women are diagnosed with cervical cancer and 3 die from the disease. Cervical cancer ranks as the 12th most frequent cancer in women in Qatar, and the 9th most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Qatar. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 2.1 | 1 |
| Age-standardized rate | 3.9 | 2.2 |
| Cumulative risk 0-64 years (%) | 0.1 | 0.1 |
| SIR/SMR | 17 | 17 |
| Annual number of new cases/deaths | 5 | 3 |
| Ranking of cervical cancer (all ages) † | 12th | 15th |
| Ranking of cervical cancer (15-44 years) † | 9th | 11th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

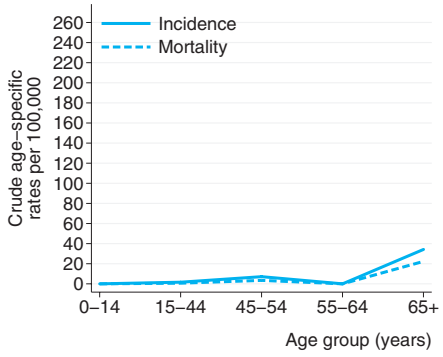



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 0.5 |
| Fertility rate (live births per women) | 4.1 |
| Oral Contraceptive Use (%) | 15.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

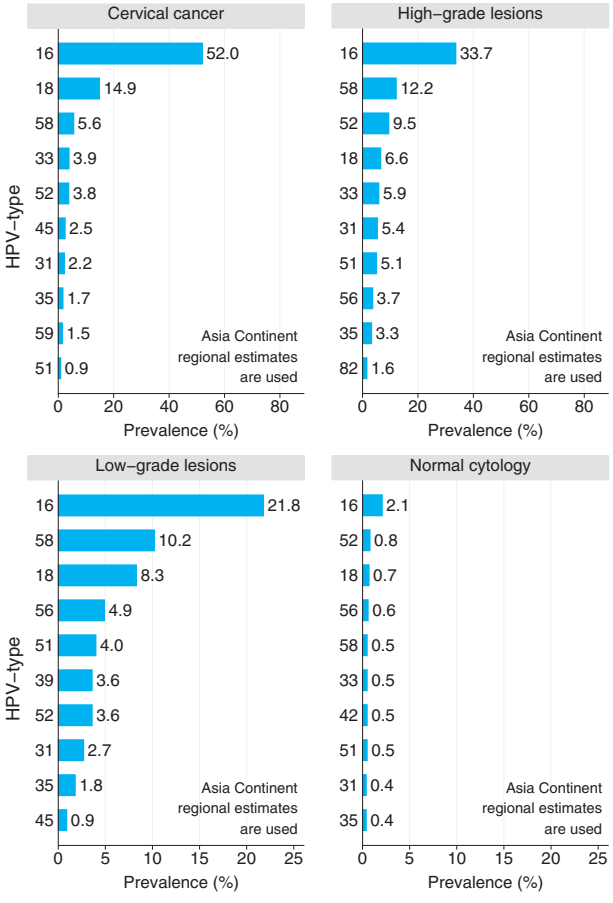



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 96 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# REPUBLIC OF KOREA

has a population of 19.62 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 4949 women are diagnosed with cervical cancer and 1327 die from the disease. Cervical cancer ranks as the 3rd most frequent cancer in women in Republic of Korea, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 21.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 21.1 | 5.6 |
| Age-standardized rate | 17.9 | 4.7 |
| Cumulative risk 0-64 years (%) | 1.3 | 0.3 |
| SIR/SMR | 112 | 54 |
| Annual number of new cases/deaths | 4949 | 1327 |
| Ranking of cervical cancer (all ages) † | 3rd | 5th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 5th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

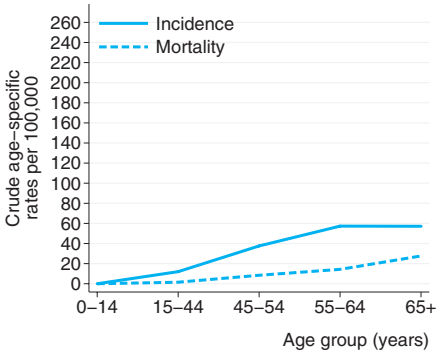



**Table 2. Cervical screening coverage**

| |
|---|
| 33% among women aged 30 years and over (1999-2000) |

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 4.4 |
| Fertility rate (live births per women) | 1.5 |
| Oral Contraceptive Use (%) | 1.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 3124 | 21.0 (19.6-22.5) |
| Low-grade lesions | 174 | 73 (65.7-79.4) |
| High-grade lesions | 378 | 88.4 (84.7-91.4) |
| Cervical cancer: any type | 336 | 88.7* (84.8-91.9) |
| Cervical cancer: HPV 16/18 | 336 | 70.8 (65.7-75.6) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

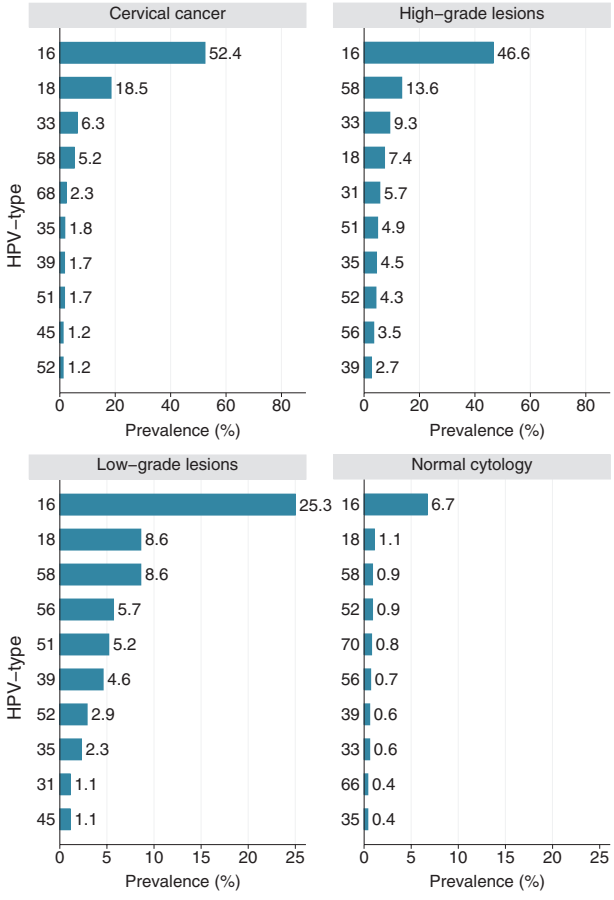
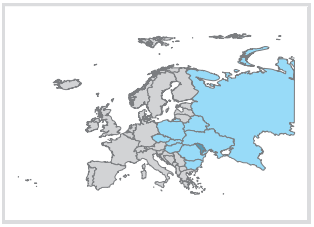



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# REPUBLIC OF MOLDOVA



has a population of 1.82 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 476 women are diagnosed with cervical cancer and 220 die from the disease. Cervical cancer ranks as the 3rd most frequent cancer in women in Republic of Moldova, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Republic of Moldova. However, in Eastern Europe, the region Republic of Moldova belongs to, about 29.1% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 21.4 | 9.9 |
| Age-standardized rate | 18 | 7.8 |
| Cumulative risk 0-64 years (%) | 1.3 | 0.5 |
| SIR/SMR | 108 | 87 |
| Annual number of new cases/deaths | 476 | 220 |
| Ranking of cervical cancer (all ages) † | 3rd | 3rd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

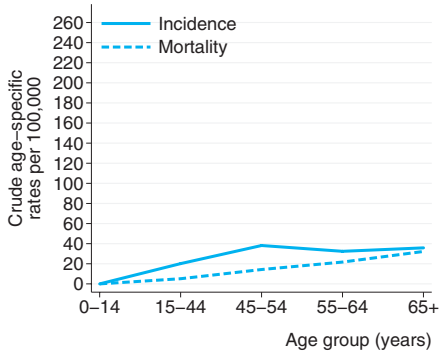



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.1 |
| Smoking prevalence in women (%) | 1.8 |
| Fertility rate (live births per women) | 1.3 |
| Oral Contraceptive Use (%) | 3.3 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 309 | 29.1 (24.1-34.5) |
| Low-grade lesions† | 87 | 52.9 (41.9-63.7) |
| High-grade lesions† | 163 | 75.5 (68.1-81.9) |
| Cervical cancer: any type† | 459 | 84.5* (80.9-87.7) |
| Cervical cancer: HPV 16/18† | 459 | 70.8 (66.4-74.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

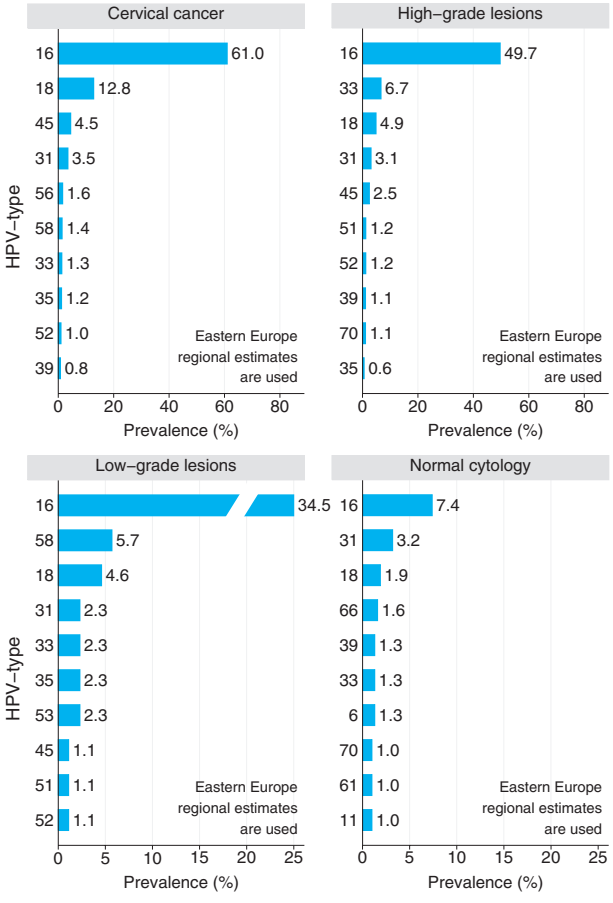
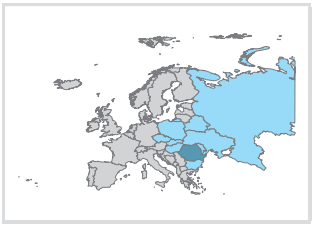



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 97 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# ROMANIA



has a population of 9.50 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 3448 women are diagnosed with cervical cancer and 2094 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Romania, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Romania. However, in Eastern Europe, the region Romania belongs to, about 29.1% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 30.3 | 18.4 |
| Age-standardized rate | 23.9 | 13 |
| Cumulative risk 0-64 years (%) | 1.8 | 0.9 |
| SIR/SMR | 138 | 141 |
| Annual number of new cases/deaths | 3448 | 2094 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

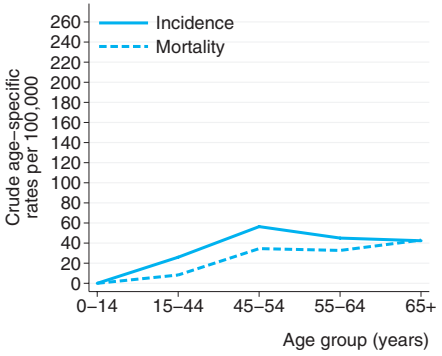



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 1.3 |
| Oral Contraceptive Use (%) | 7.9 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 309 | 29.1 (24.1-34.5) |
| Low-grade lesions† | 87 | 52.9 (41.9-63.7) |
| High-grade lesions† | 163 | 75.5 (68.1-81.9) |
| Cervical cancer: any type† | 459 | 84.5* (80.9-87.7) |
| Cervical cancer: HPV 16/18† | 459 | 70.8 (66.4-74.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

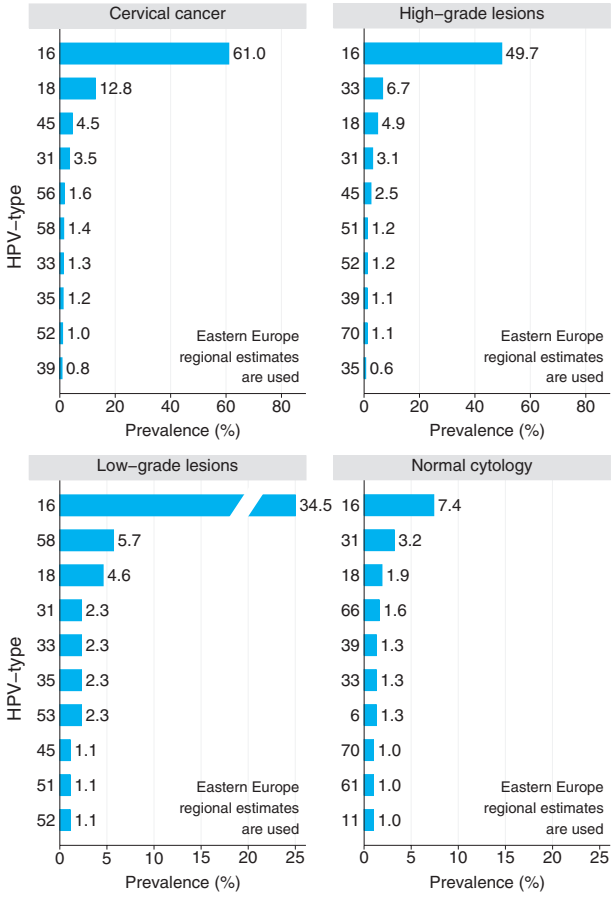
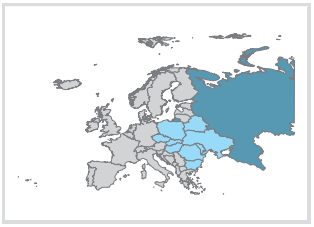



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 97 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# RUSSIAN FEDERATION



has a population of 66.07 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 12215 women are diagnosed with cervical cancer and 7784 die from the disease. Cervical cancer ranks as the 5th most frequent cancer in women in Russian Federation, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 29.1% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 73.9% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 16.1 | 10.2 |
| Age-standardized rate | 11.9 | 6.5 |
| Cumulative risk 0-64 years (%) | 0.9 | 0.4 |
| SIR/SMR | 70 | 76 |
| Annual number of new cases/deaths | 12215 | 7784 |
| Ranking of cervical cancer (all ages) † | 5th | 5th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

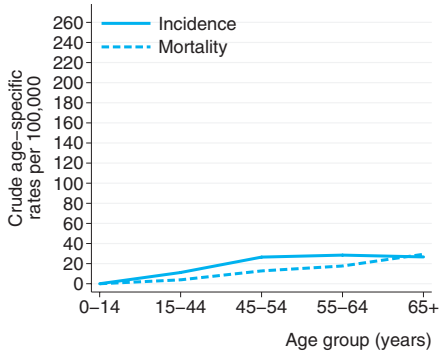



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

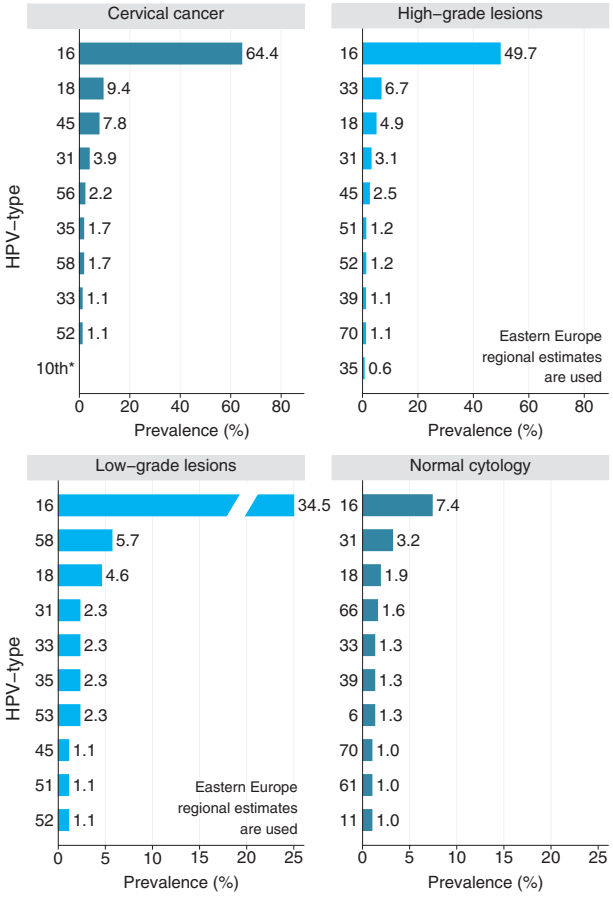
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.1 |
| Smoking prevalence in women (%) | 15.5 |
| Fertility rate (live births per women) | 1.3 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 309 | 29.1 (24.1-34.5) |
| Low-grade lesions† | 87 | 52.9 (41.9-63.7) |
| High-grade lesions† | 163 | 75.5 (68.1-81.9) |
| Cervical cancer: any type | 180 | 100* (98.0-100.0) |
| Cervical cancer: HPV 16/18 | 180 | 73.9 (66.8-80.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



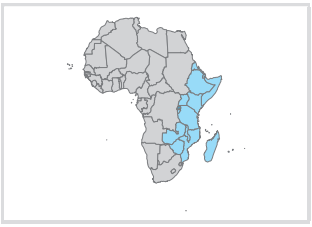

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# RWANDA



has a population of 2.68 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1087 women are diagnosed with cervical cancer and 878 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Rwanda, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Rwanda. However, in Eastern Africa, the region Rwanda belongs to, about 35.4% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 81.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 27.1 | 21.9 |
| Age-standardized rate | 49.4 | 40.4 |
| Cumulative risk 0-64 years (%) | 4 | 3.2 |
| SIR/SMR | 270 | 429 |
| Annual number of new cases/deaths | 1087 | 878 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

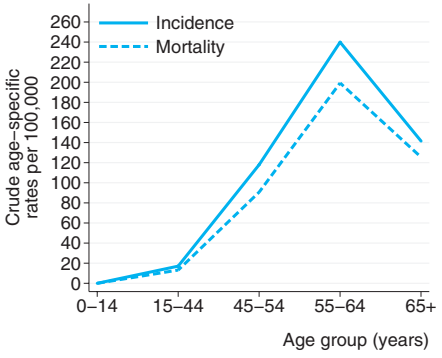



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 3.1 |
| Smoking prevalence in women (%) | 4 |
| Fertility rate (live births per women) | 5.9 |
| Oral Contraceptive Use (%) | 1.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2144 | 35.4 (33.4-37.5) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type† | 478 | 96.4* (94.4-97.9) |
| Cervical cancer: HPV 16/18† | 478 | 81.8 (78.0-85.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

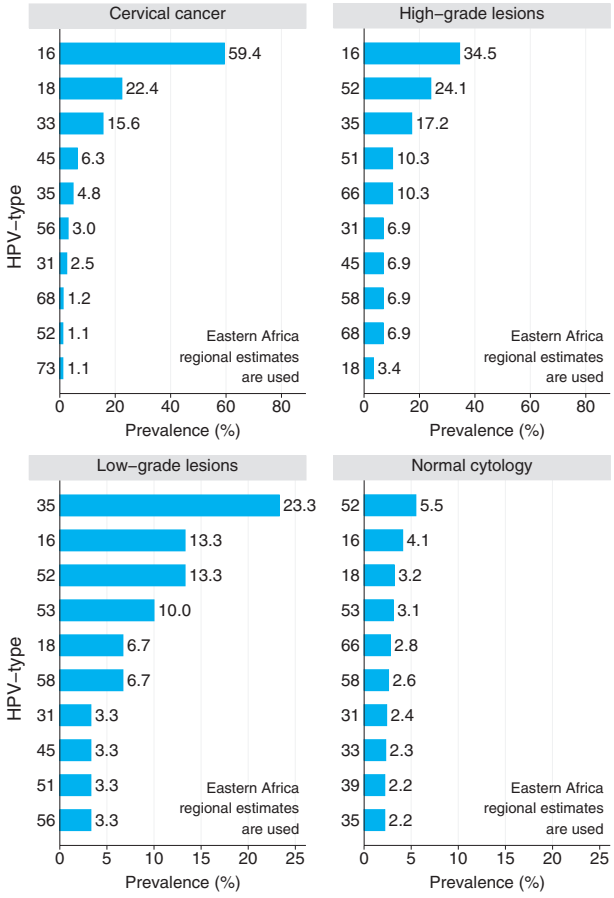



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 93 |

DTP: Diphtheria, Tetanus and Pertussis

# SAINT KITTS & NEVIS

Data is not yet available on the burden of cervical cancer in Saint Kitts & Nevis. However, in Caribbean, the region Saint Kitts & Nevis belongs to, current estimates indicate that every year 6369 women are diagnosed with cervical cancer and 3113 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Caribbean, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Saint Kitts & Nevis. However, in Americas Continent about 15.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Caribbean about 64.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

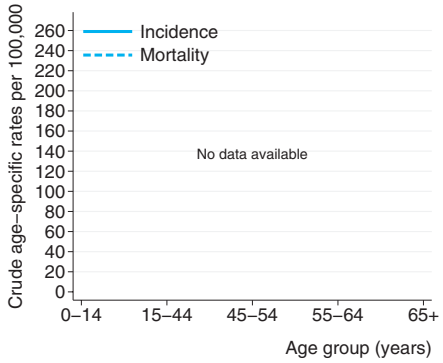



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

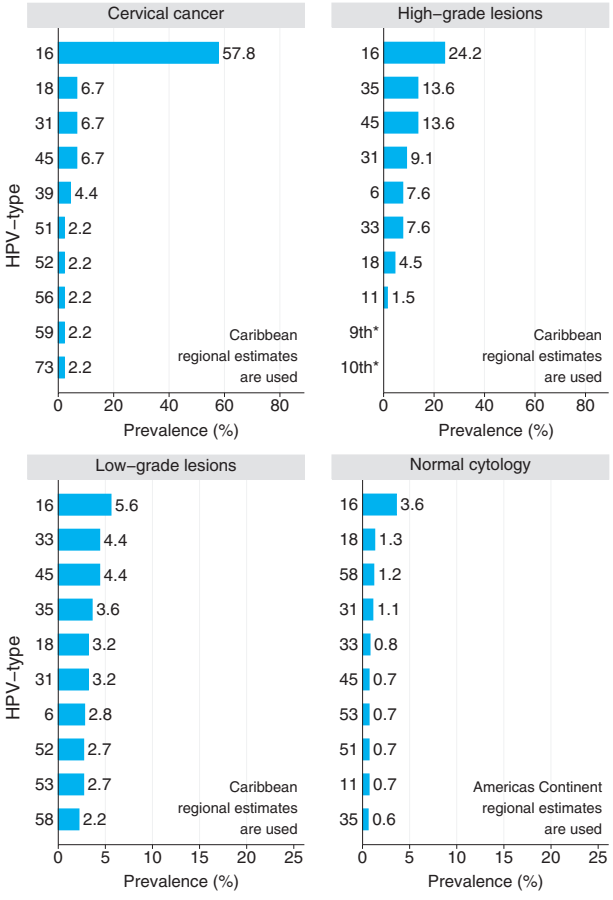
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 40399 | 15.6 (15.2-15.9) |
| Low-grade lesions† | 248 | 60.9 (54.5-67.0) |
| High-grade lesions† | 66 | 80.3 (68.7-89.1) |
| Cervical cancer: any type† | 45 | 97.8* (88.2-99.9) |
| Cervical cancer: HPV 16/18† | 45 | 64.4 (48.8-78.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Caribbean regional estimate
‡Americas Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 88 |

DTP: Diphtheria, Tetanus and Pertussis

# SAINT LUCIA

has a population of 58835 women ages 15 years and older who are at risk of developing cervical cancer. Data is not yet available on the burden of cervical cancer in Saint Lucia. However, in Caribbean, the region Saint Lucia belongs to, current estimates indicate that every year 6369 women are diagnosed with cervical cancer and 3113 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Caribbean, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Saint Lucia. However, in Americas Continent about 15.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Caribbean about 64.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

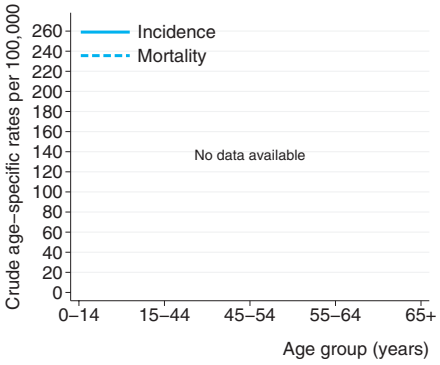



**Table 2. Cervical screening coverage**

| |
|---|
| No data available |

**Table 3. Factors contributing to cervical cancer**

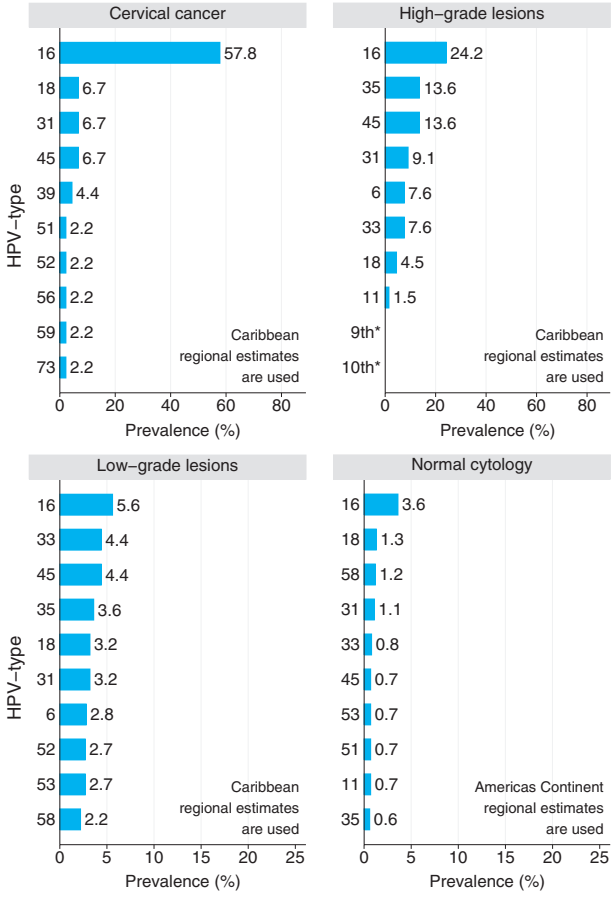
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 5.6 |
| Fertility rate (live births per women) | 2.0 |
| Oral Contraceptive Use (%) | 18.4 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 40399 | 15.6 (15.2-15.9) |
| Low-grade lesions† | 248 | 60.9 (54.5-67.0) |
| High-grade lesions† | 66 | 80.3 (68.7-89.1) |
| Cervical cancer: any type† | 45 | 97.8* (88.2-99.9) |
| Cervical cancer: HPV 16/18† | 45 | 64.4 (48.8-78.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Caribbean regional estimate
‡Americas Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 85 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# SAINT VINCENT & THE GRENADINES

has a population of 42216 women ages 15 years and older who are at risk of developing cervical cancer. Data is not yet available on the burden of cervical cancer in Saint Vincent & The Grenadines. However, in Caribbean, the region Saint Vincent & The Grenadines belongs to, current estimates indicate that every year 6369 women are diagnosed with cervical cancer and 3113 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Caribbean, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Saint Vincent & The Grenadines. However, in Americas Continent about 15.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Caribbean about 64.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

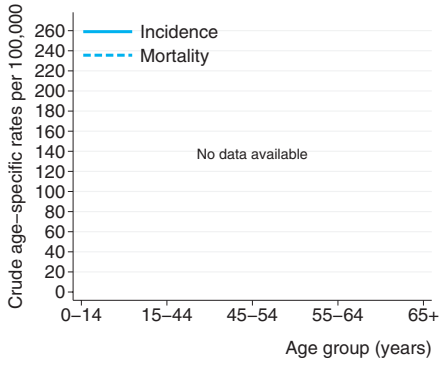



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

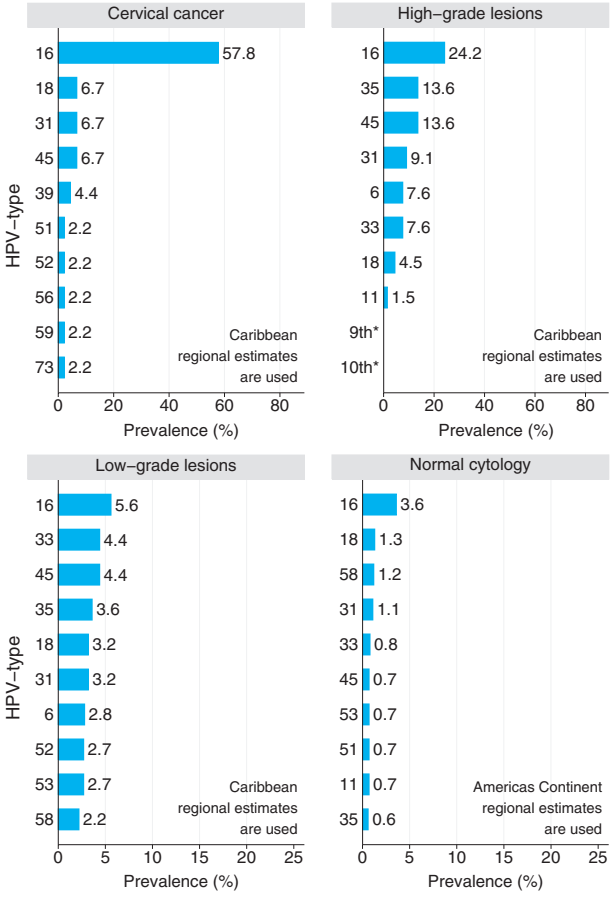
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 3.5 |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | 24.3 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 40399 | 15.6 (15.2-15.9) |
| Low-grade lesions† | 248 | 60.9 (54.5-67.0) |
| High-grade lesions† | 66 | 80.3 (68.7-89.1) |
| Cervical cancer: any type† | 45 | 97.8* (88.2-99.9) |
| Cervical cancer: HPV 16/18† | 45 | 64.4 (48.8-78.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Caribbean regional estimate
‡Americas Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# SAMOA

has a population of 52303 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 16 women are diagnosed with cervical cancer and 8 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Samoa, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Samoa , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Oceania Continent about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 20.3 | 10.6 |
| Age-standardized rate | 28 | 15 |
| Cumulative risk 0-64 years (%) | 2.2 | 1.2 |
| SIR/SMR | 174 | 168 |
| Annual number of new cases/deaths | 16 | 8 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

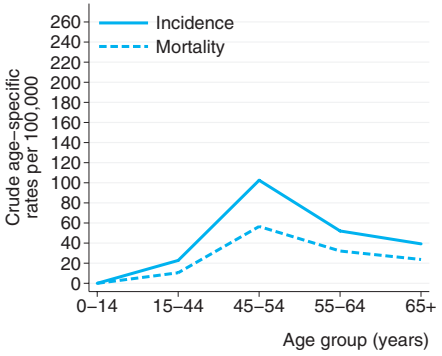



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

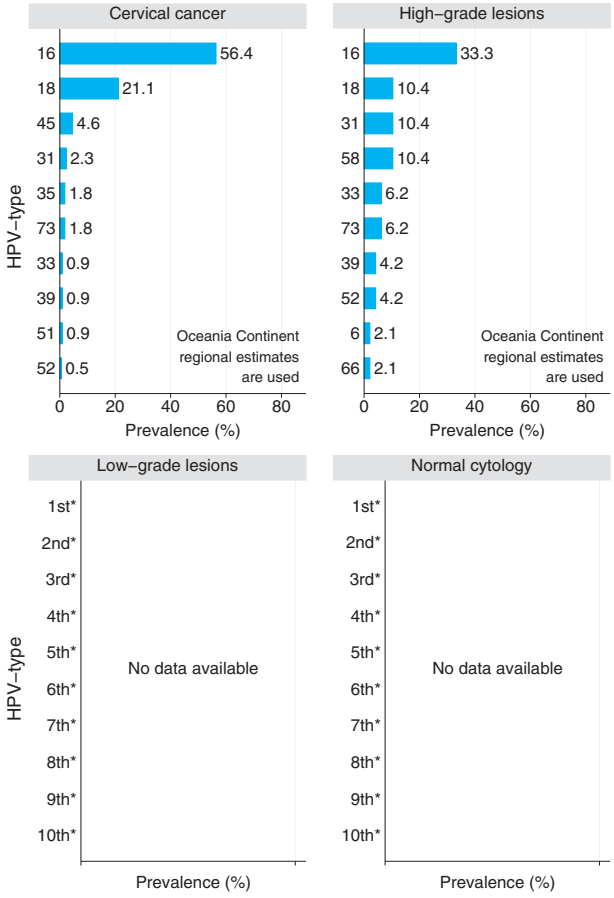
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 24 |
| Fertility rate (live births per women) | 4.9 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions‡ | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type‡ | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18‡ | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 56 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# SAN MARINO

Data is not yet available on the burden of cervical cancer in San Marino. However, in Southern Europe, the region San Marino belongs to, current estimates indicate that every year 10641 women are diagnosed with cervical cancer and 4131 die from the disease. Cervical cancer ranks as the 7th most frequent cancer in women in Southern Europe, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of San Marino. However, in Southern Europe about 5.7% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 65.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

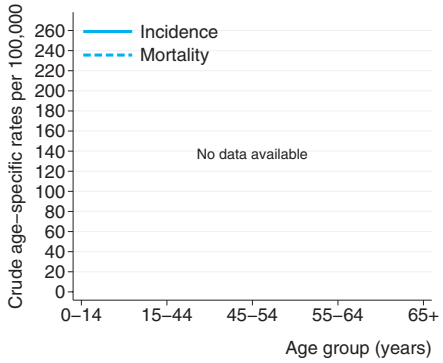



**Table 2. Cervical screening coverage**

| |
|---|
| No data available |

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 17 |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4884 | 5.7 (5.0-6.3) |
| Low-grade lesions† | 3391 | 66.6 (64.9-68.1) |
| High-grade lesions† | 650 | 81.1 (77.9-84.0) |
| Cervical cancer: any type† | 732 | 83.7* (80.9-86.3) |
| Cervical cancer: HPV 16/18† | 732 | 65.3 (61.7-68.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

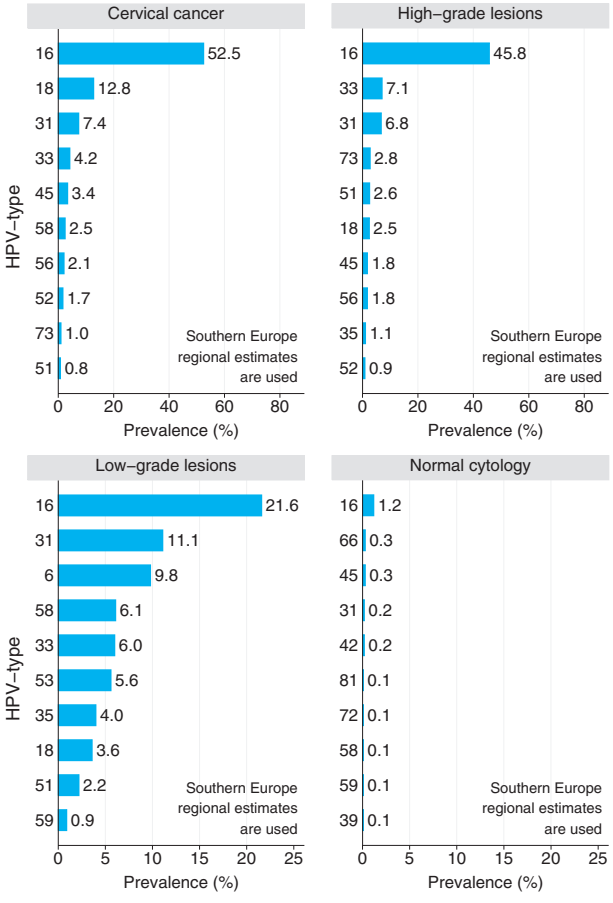
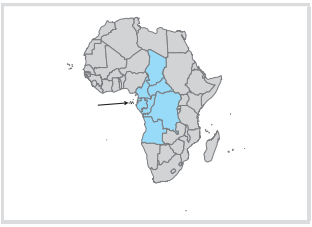



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# SAO TOME & PRINCIPE



has a population of 48303 women ages 15 years and older who are at risk of developing cervical cancer. Data is not yet available on the burden of cervical cancer in Sao Tome & Principe. However, in Middle Africa, the region Sao Tome & Principe belongs to, current estimates indicate that every year 8201 women are diagnosed with cervical cancer and 6687 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Middle Africa, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Sao Tome & Principe. However, in Africa Continent about 23.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

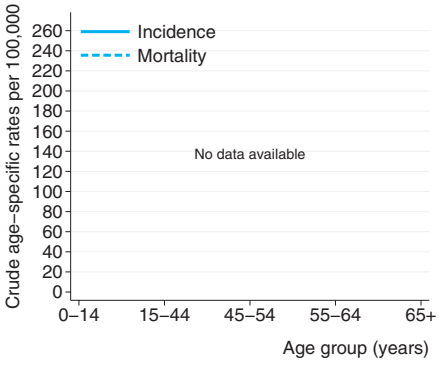



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | 16.7 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 6226 | 23.0 (21.9-24.0) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type‡ | 1339 | 93.9* (92.5-95.1) |
| Cervical cancer: HPV 16/18‡ | 1339 | 70.1 (67.5-72.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

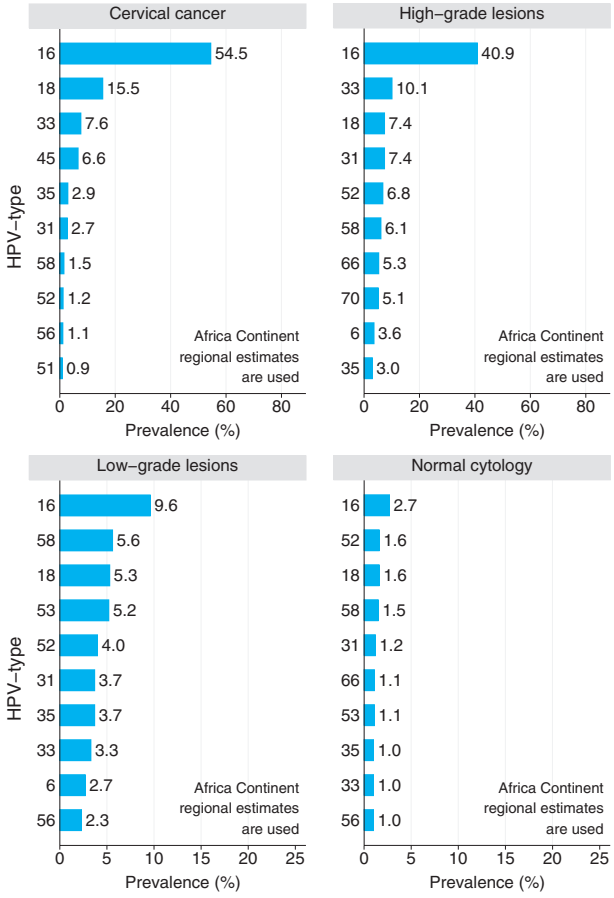



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# SAUDI ARABIA

has a population of 6.82 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 271 women are diagnosed with cervical cancer and 143 die from the disease. Cervical cancer ranks as the 7th most frequent cancer in women in Saudi Arabia, and the 8th most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Saudi Arabia. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 2.7 | 1.4 |
| Age-standardized rate | 4.6 | 2.5 |
| Cumulative risk 0-64 years (%) | 0.3 | 0.2 |
| SIR/SMR | 25 | 26 |
| Annual number of new cases/deaths | 271 | 143 |
| Ranking of cervical cancer (all ages) † | 7th | 10th |
| Ranking of cervical cancer (15-44 years) † | 8th | 8th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

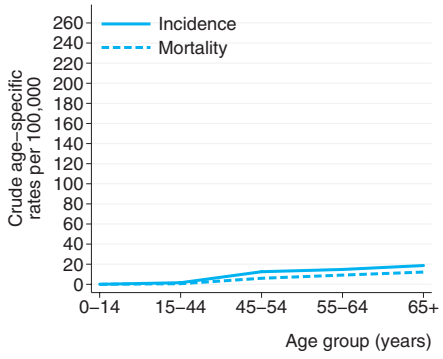



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 8.3 |
| Fertility rate (live births per women) | 6.1 |
| Oral Contraceptive Use (%) | 19.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

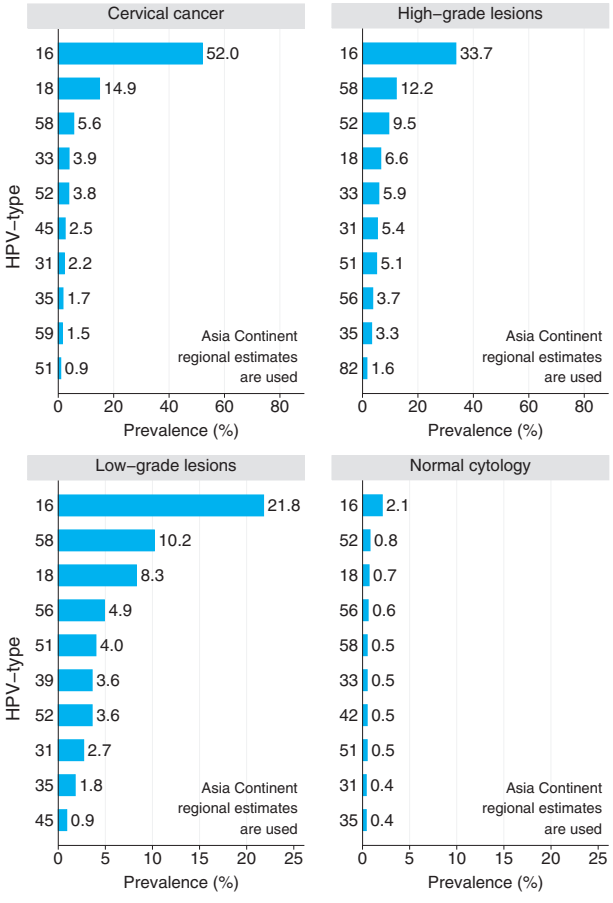
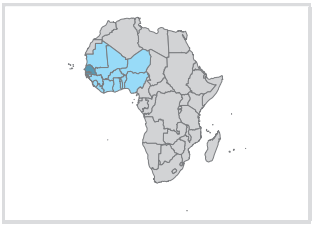



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 96 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# SENEGAL



has a population of 3.47 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 804 women are diagnosed with cervical cancer and 640 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Senegal, and the 1st most frequent cancer among women between 15 and 44 years of age. About 12.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 43.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 16.2 | 12.9 |
| Age-standardized rate | 26.2 | 21.1 |
| Cumulative risk 0-64 years (%) | 2 | 1.6 |
| SIR/SMR | 153 | 240 |
| Annual number of new cases/deaths | 804 | 640 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

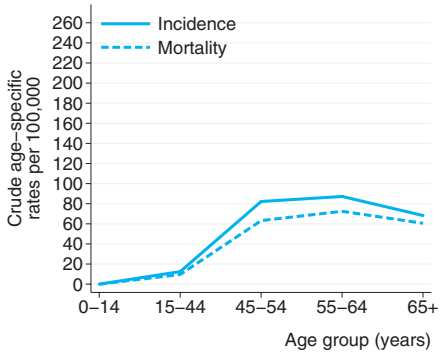



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.9 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 5.8 |
| Oral Contraceptive Use (%) | 3.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 1797 | 12.6 (11.1-14.3) |
| Low-grade lesions | 86 | 51.2 (40.1-62.1) |
| High-grade lesions | 89 | 80.9 (71.2-88.5) |
| Cervical cancer: any type | 71 | 67.6* (55.5-78.2) |
| Cervical cancer: HPV 16/18 | 71 | 43.7 (31.9-56.0) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

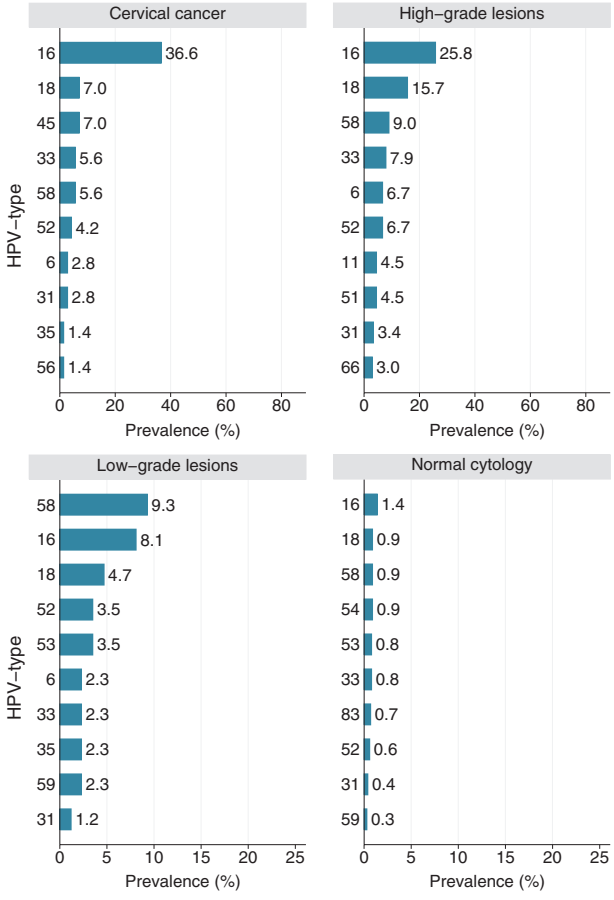



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 89 |
| Percentage of districts with >=80% DTP3 coverage | 79 |

DTP: Diphtheria, Tetanus and Pertussis

# SERBIA

has a population of 4.35 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1816 women are diagnosed with cervical cancer and 815 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Serbia, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Serbia. However, in Southern Europe, the region Serbia belongs to, about 5.7% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 65.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 34.4 | 15.5 |
| Age-standardized rate | 27.3 | 10.1 |
| Cumulative risk 0-64 years (%) | 2 | 0.6 |
| SIR/SMR | 157 | 119 |
| Annual number of new cases/deaths | 1816 | 815 |
| Ranking of cervical cancer (all ages) † | 2nd | 4th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

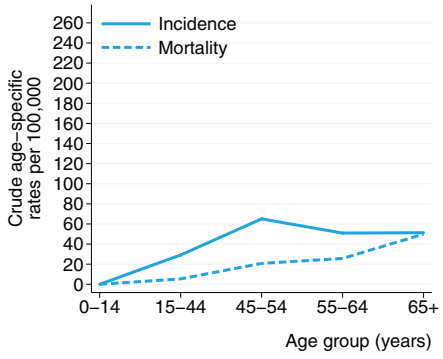



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 1.7 |
| Oral Contraceptive Use (%) | 4.7 |

Estimates for the population, Tables 1 and 3 and Figure 1 are aggregated for Serbia and Montenegro.

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4884 | 5.7 (5.0-6.3) |
| Low-grade lesions† | 3391 | 66.6 (64.9-68.1) |
| High-grade lesions† | 650 | 81.1 (77.9-84.0) |
| Cervical cancer: any type† | 732 | 83.7* (80.9-86.3) |
| Cervical cancer: HPV 16/18† | 732 | 65.3 (61.7-68.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

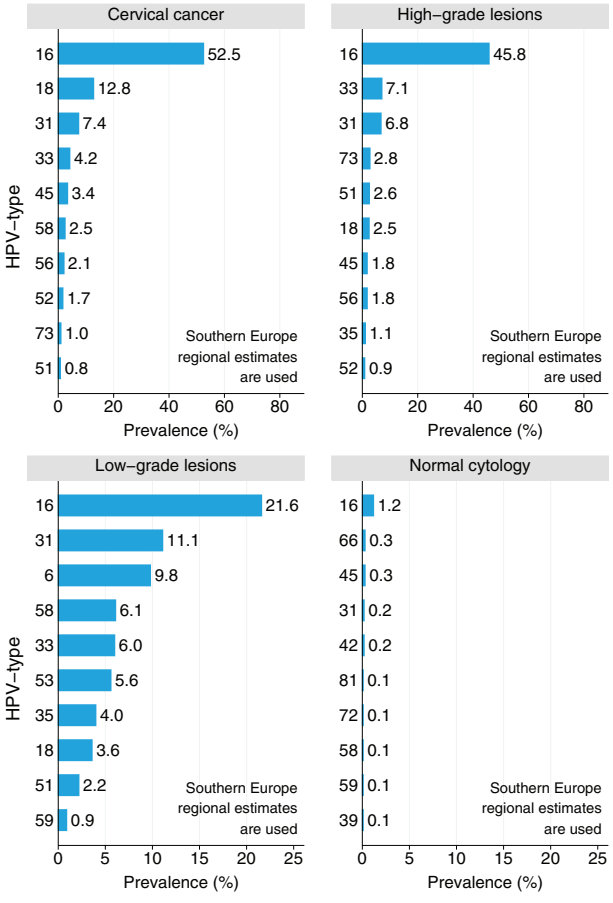
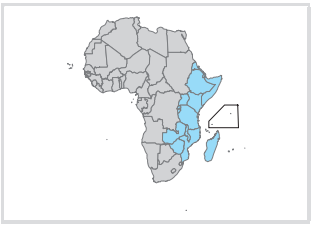



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 92 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# SEYCHELLES



Data is not yet available on the burden of cervical cancer in Seychelles. However, in Eastern Africa, the region Seychelles belongs to, current estimates indicate that every year 33903 women are diagnosed with cervical cancer and 27147 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Eastern Africa, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Seychelles. However, in Eastern Africa about 35.4% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 81.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

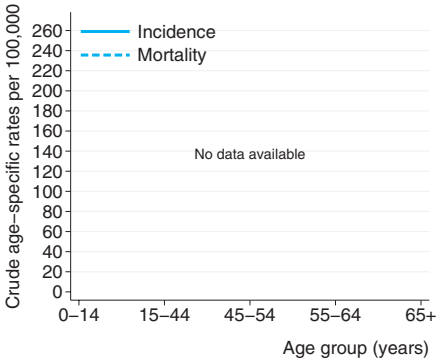



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 6.9 |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2144 | 35.4 (33.4-37.5) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type† | 478 | 96.4* (94.4-97.9) |
| Cervical cancer: HPV 16/18† | 478 | 81.8 (78.0-85.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

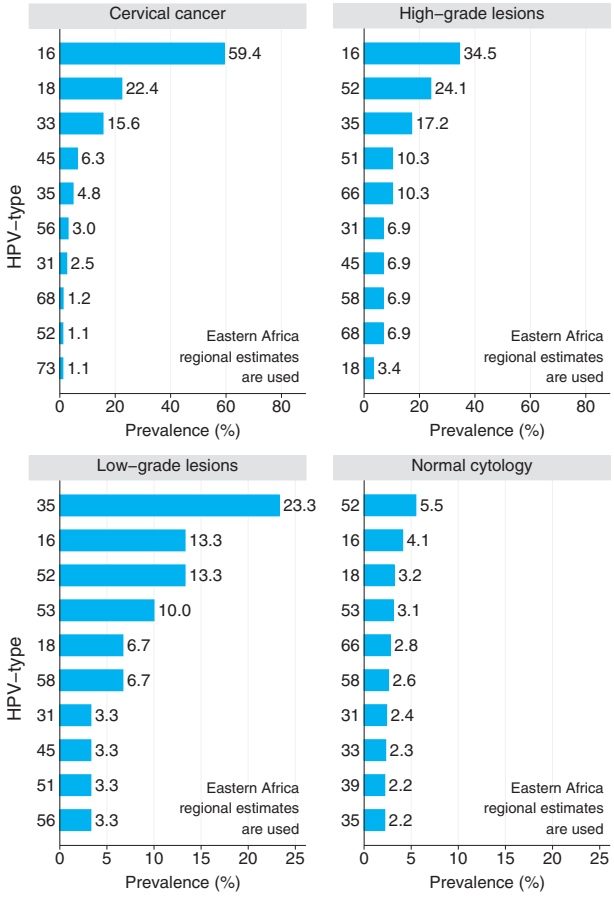
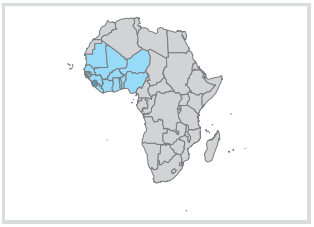



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# SIERRA LEONE



has a population of 1.62 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 452 women are diagnosed with cervical cancer and 362 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Sierra Leone, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Sierra Leone. However, in Western Africa, the region Sierra Leone belongs to, about 16.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 50.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 18.4 | 14.8 |
| Age-standardized rate | 29.3 | 23.8 |
| Cumulative risk 0-64 years (%) | 2.2 | 1.8 |
| SIR/SMR | 171 | 265 |
| Annual number of new cases/deaths | 452 | 362 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

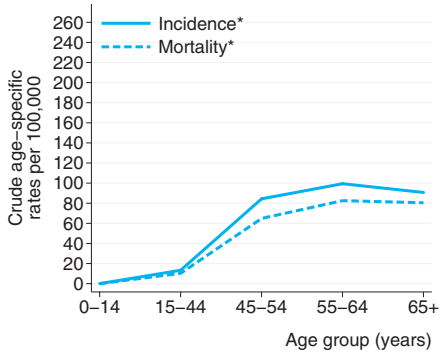



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.6 |
| Smoking prevalence in women (%) | 7.4 |
| Fertility rate (live births per women) | 6.3 |
| Oral Contraceptive Use (%) | 2.5 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2641 | 16.5 (15.1-18.0) |
| Low-grade lesions† | 271 | 59 (52.9-65.0) |
| High-grade lesions† | 138 | 79.7 (72.0-86.1) |
| Cervical cancer: any type† | 218 | 85.8* (80.4-90.1) |
| Cervical cancer: HPV 16/18† | 218 | 50.5 (43.6-57.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

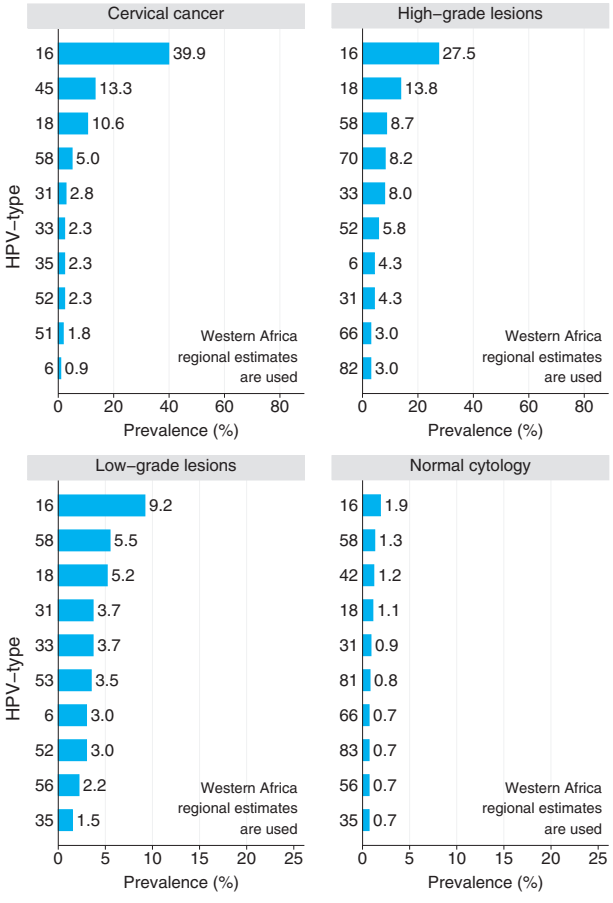



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 64 |
| Percentage of districts with >=80% DTP3 coverage | 50 |

DTP: Diphtheria, Tetanus and Pertussis

# SINGAPORE

has a population of 1.74 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 323 women are diagnosed with cervical cancer and 205 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in Singapore, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Singapore. However, in South-Eastern Asia, the region Singapore belongs to, about 6.2% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 71.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 15.7 | 9.9 |
| Age-standardized rate | 13.2 | 8.4 |
| Cumulative risk 0-64 years (%) | 0.9 | 0.6 |
| SIR/SMR | 81 | 92 |
| Annual number of new cases/deaths | 323 | 205 |
| Ranking of cervical cancer (all ages) † | 4th | 5th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 4th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

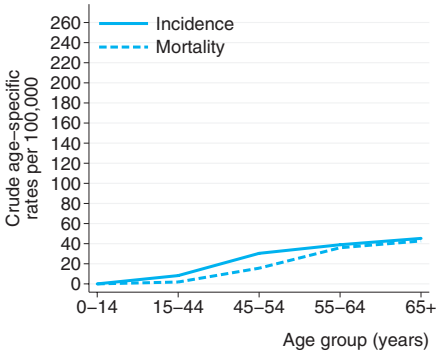



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

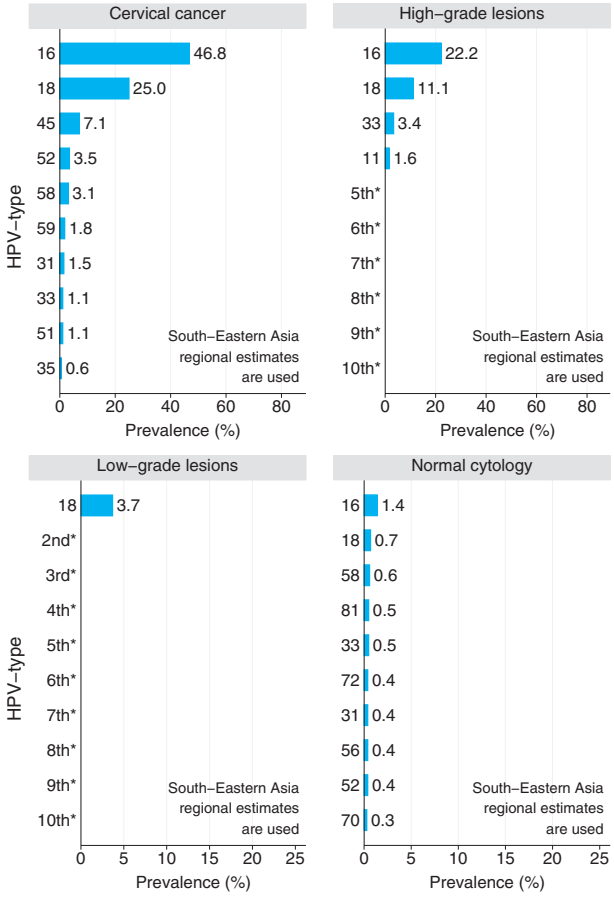
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.3 |
| Smoking prevalence in women (%) | 3.5 |
| Fertility rate (live births per women) | 1.7 |
| Oral Contraceptive Use (%) | 10.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4194 | 6.2 (5.5-6.9) |
| Low-grade lesions† | 27 | 33.3 (16.5-54.0) |
| High-grade lesions† | 207 | 61.8 (54.8-68.5) |
| Cervical cancer: any type† | 1090 | 92.1* (90.3-93.6) |
| Cervical cancer: HPV 16/18† | 1090 | 71.8 (69.1-74.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South-Eastern Asia regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



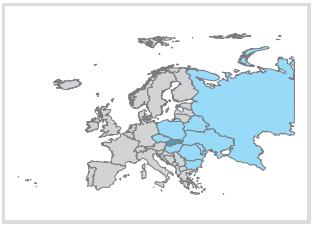

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# SLOVAKIA



has a population of 2.34 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 654 women are diagnosed with cervical cancer and 242 die from the disease. Cervical cancer ranks as the 4th most frequent cancer in women in Slovakia, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Slovakia. However, in Eastern Europe, the region Slovakia belongs to, about 29.1% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 23.6 | 8.7 |
| Age-standardized rate | 18.5 | 6.1 |
| Cumulative risk 0-64 years (%) | 1.4 | 0.4 |
| SIR/SMR | 110 | 70 |
| Annual number of new cases/deaths | 654 | 242 |
| Ranking of cervical cancer (all ages) † | 4th | 7th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

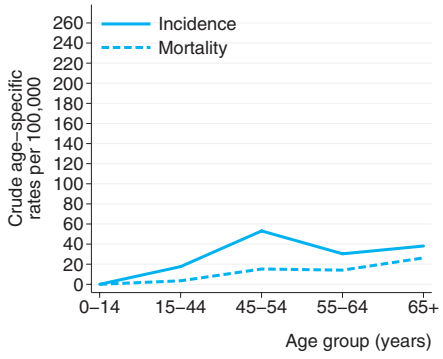



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 14.7 |
| Fertility rate (live births per women) | 1.2 |
| Oral Contraceptive Use (%) | 5.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 309 | 29.1 (24.1-34.5) |
| Low-grade lesions† | 87 | 52.9 (41.9-63.7) |
| High-grade lesions† | 163 | 75.5 (68.1-81.9) |
| Cervical cancer: any type† | 459 | 84.5* (80.9-87.7) |
| Cervical cancer: HPV 16/18† | 459 | 70.8 (66.4-74.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

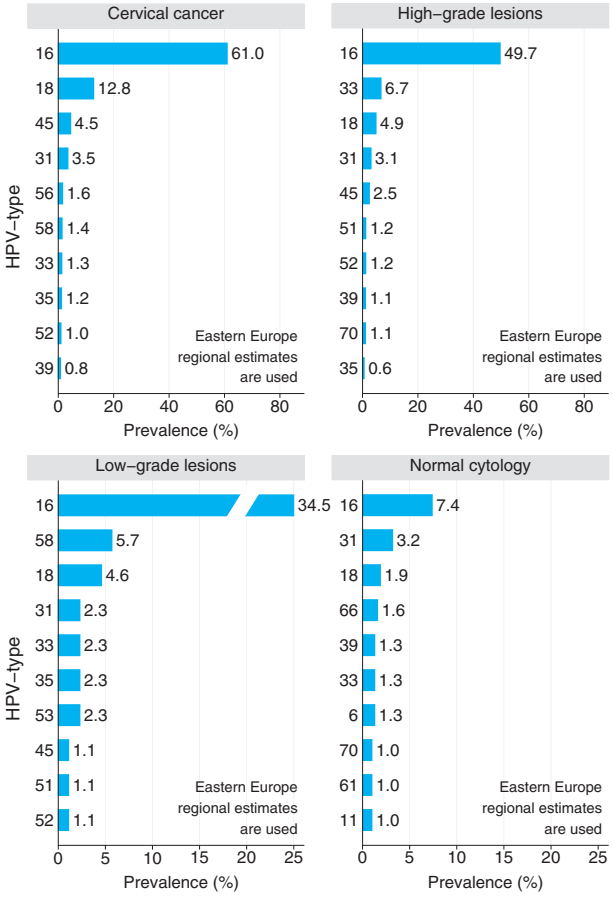



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# SLOVENIA

has a population of 872721 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 207 women are diagnosed with cervical cancer and 79 die from the disease. Cervical cancer ranks as the 5th most frequent cancer in women in Slovenia, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Slovenia. However, in Southern Europe, the region Slovenia belongs to, about 5.7% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 65.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 20.3 | 7.7 |
| Age-standardized rate | 16.1 | 4.7 |
| Cumulative risk 0-64 years (%) | 1.2 | 0.3 |
| SIR/SMR | 87 | 55 |
| Annual number of new cases/deaths | 207 | 79 |
| Ranking of cervical cancer (all ages) † | 5th | 7th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

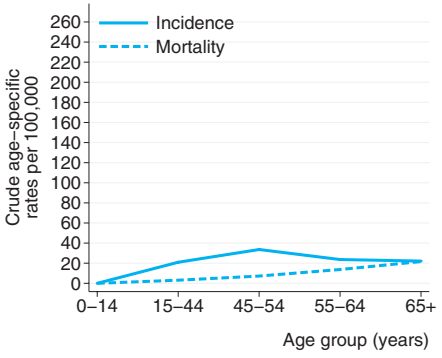



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 20.1 |
| Fertility rate (live births per women) | 1.2 |
| Oral Contraceptive Use (%) | 21.7 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4884 | 5.7 (5.0-6.3) |
| Low-grade lesions† | 3391 | 66.6 (64.9-68.1) |
| High-grade lesions† | 650 | 81.1 (77.9-84.0) |
| Cervical cancer: any type† | 732 | 83.7* (80.9-86.3) |
| Cervical cancer: HPV 16/18† | 732 | 65.3 (61.7-68.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

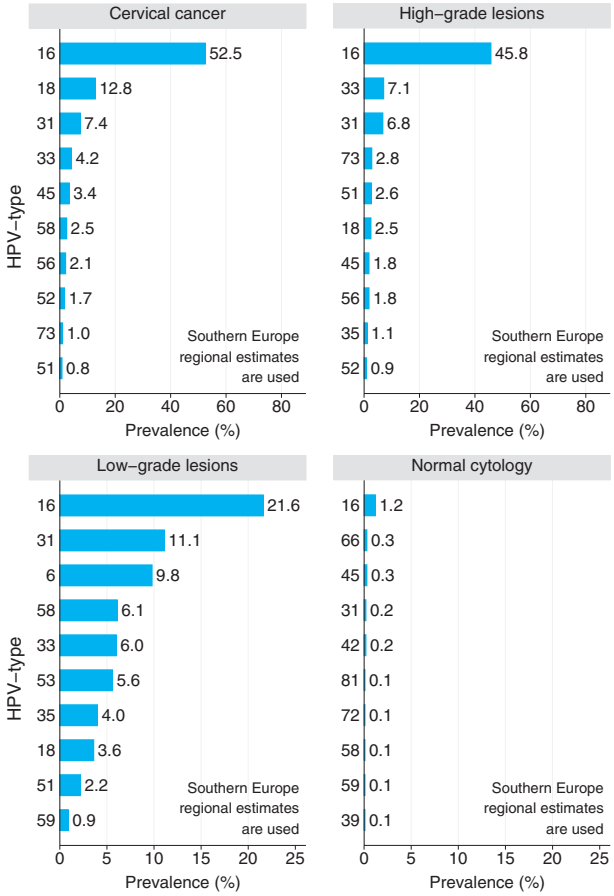
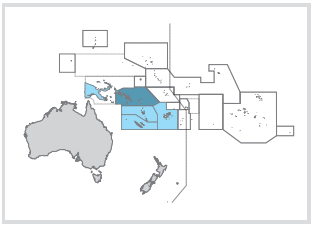



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 97 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# SOLOMON ISLANDS



has a population of 137930 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 58 women are diagnosed with cervical cancer and 31 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Solomon Islands, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Solomon Islands , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Oceania Continent about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 25.2 | 13.5 |
| Age-standardized rate | 42.8 | 23.9 |
| Cumulative risk 0-64 years (%) | 3.1 | 1.7 |
| SIR/SMR | 251 | 267 |
| Annual number of new cases/deaths | 58 | 31 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

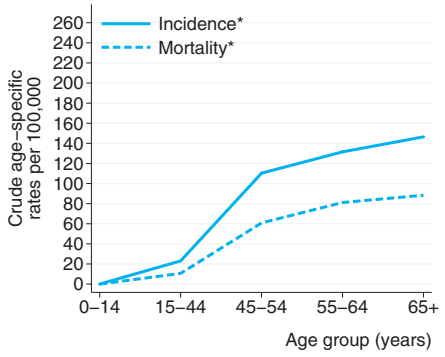



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

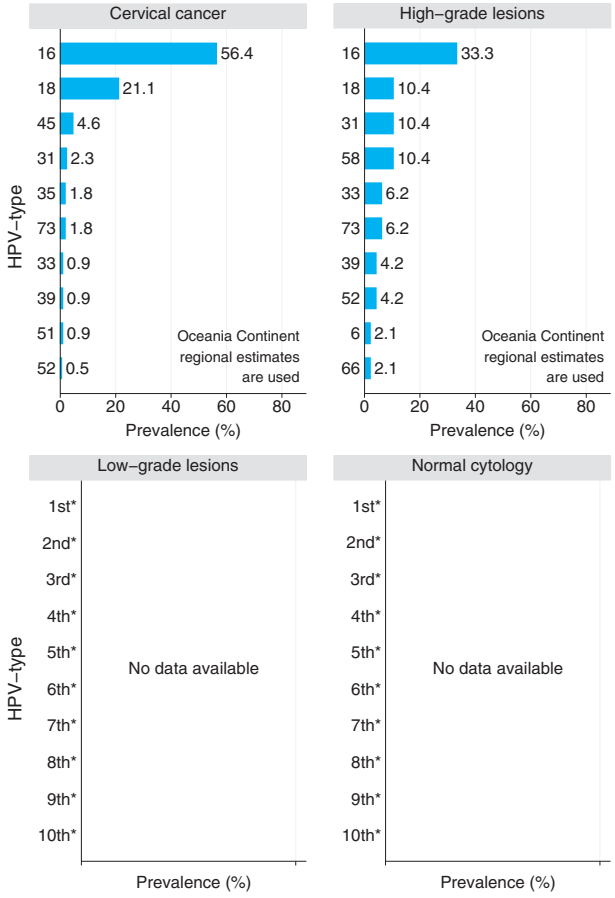
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 23 |
| Fertility rate (live births per women) | 6.1 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions‡ | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type‡ | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18‡ | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



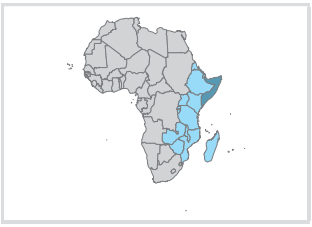

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 91 |
| Percentage of districts with >=80% DTP3 coverage | 23 |

DTP: Diphtheria, Tetanus and Pertussis

# SOMALIA



has a population of 2.34 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1134 women are diagnosed with cervical cancer and 906 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Somalia, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Somalia. However, in Eastern Africa, the region Somalia belongs to, about 35.4% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 81.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 23.6 | 18.9 |
| Age-standardized rate | 42.7 | 34.6 |
| Cumulative risk 0-64 years (%) | 3.2 | 2.6 |
| SIR/SMR | 248 | 392 |
| Annual number of new cases/deaths | 1134 | 906 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

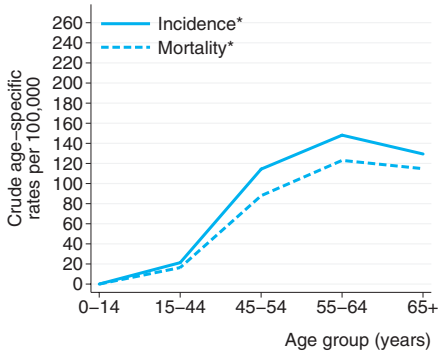



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.9 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2144 | 35.4 (33.4-37.5) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type† | 478 | 96.4* (94.4-97.9) |
| Cervical cancer: HPV 16/18† | 478 | 81.8 (78.0-85.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

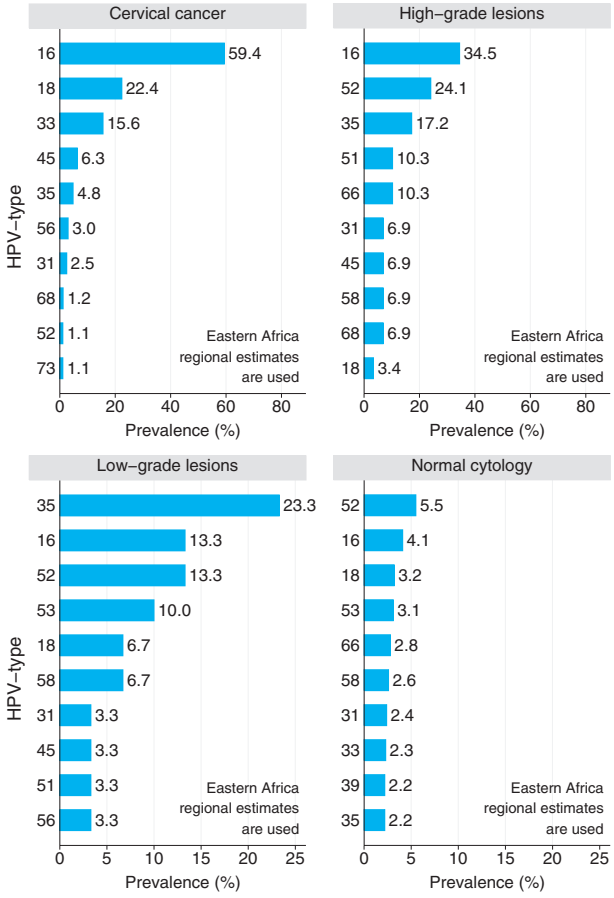



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 35 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# SOUTH AFRICA

has a population of 16.48 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 6742 women are diagnosed with cervical cancer and 3681 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in South Africa, and the 1st most frequent cancer among women between 15 and 44 years of age. About 15.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 63.0% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 30.2 | 16.5 |
| Age-standardized rate | 37.5 | 21 |
| Cumulative risk 0-64 years (%) | 2.8 | 1.6 |
| SIR/SMR | 226 | 234 |
| Annual number of new cases/deaths | 6742 | 3681 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

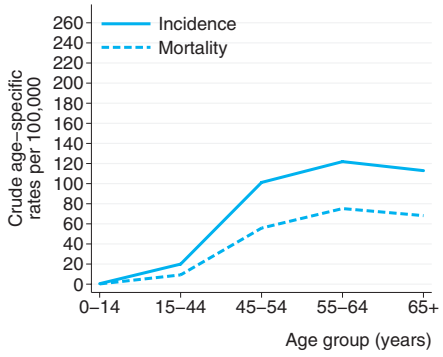



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

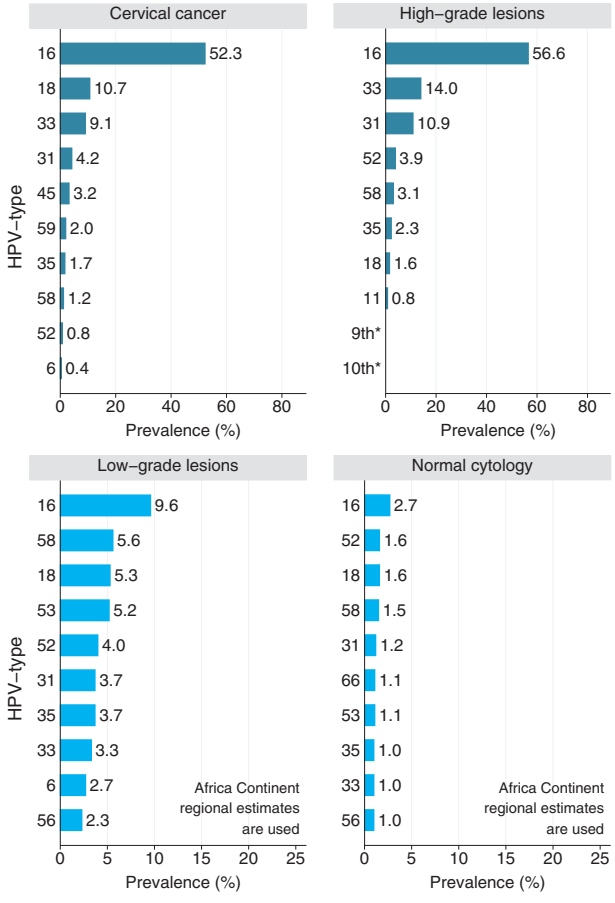
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 18.8 |
| Smoking prevalence in women (%) | 7.7 |
| Fertility rate (live births per women) | 2.9 |
| Oral Contraceptive Use (%) | 10.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 1269 | 15.5 (13.6-17.6) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions | 129 | 88.4 (81.5-93.3) |
| Cervical cancer: any type | 308 | 93.8* (90.5-96.2) |
| Cervical cancer: HPV 16/18 | 308 | 63.0 (57.3-68.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 96 |

DTP: Diphtheria, Tetanus and Pertussis

# SPAIN

has a population of 18.91 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 2103 women are diagnosed with cervical cancer and 739 die from the disease. Cervical cancer ranks as the 7th most frequent cancer in women in Spain, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 2.4% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 55.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 10.3 | 3.6 |
| Age-standardized rate | 7.6 | 2.2 |
| Cumulative risk 0-64 years (%) | 0.6 | 0.1 |
| SIR/SMR | 45 | 26 |
| Annual number of new cases/deaths | 2103 | 739 |
| Ranking of cervical cancer (all ages) † | 7th | 13th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 6th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

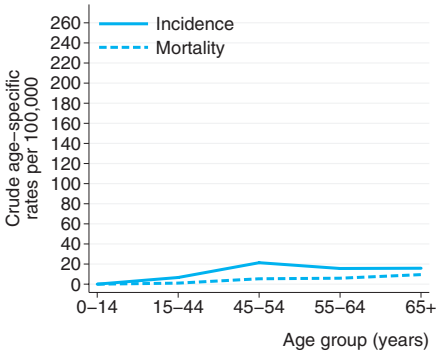



**Table 2. Cervical screening coverage**

| |
|---|
| 44% had one or more tests in the last 3 years (2002) |

**Table 3. Factors contributing to cervical cancer**

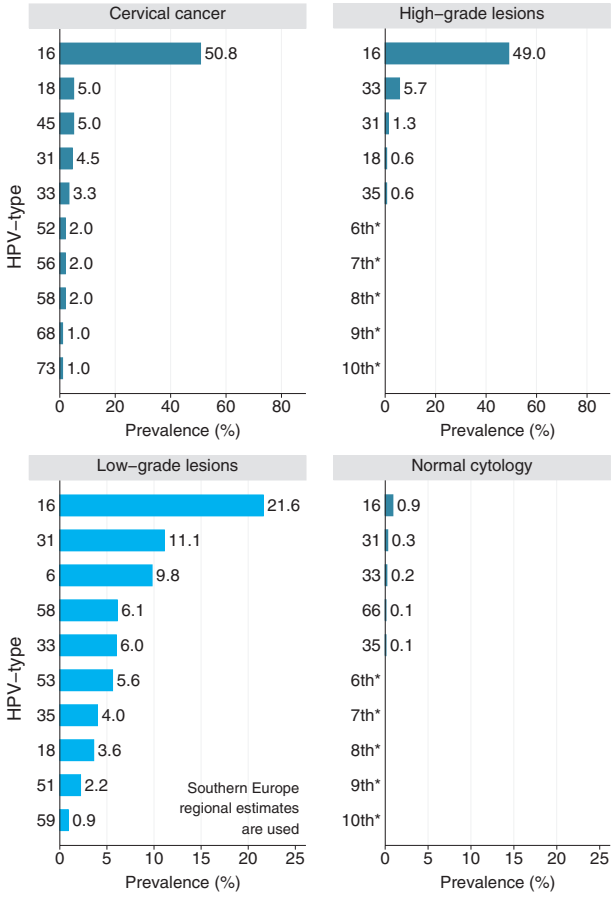
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.6 |
| Smoking prevalence in women (%) | 24.6 |
| Fertility rate (live births per women) | 1.2 |
| Oral Contraceptive Use (%) | 14.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 1176 | 2.4 (1.6-3.4) |
| Low-grade lesions† | 3391 | 66.6 (64.9-68.1) |
| High-grade lesions | 157 | 70.7 (62.9-77.7) |
| Cervical cancer: any type | 242 | 77.7* (71.9-82.8) |
| Cervical cancer: HPV 16/18 | 242 | 55.8 (49.3-62.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 95 |

DTP: Diphtheria, Tetanus and Pertussis

# SRI LANKA

has a population of 7.74 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1544 women are diagnosed with cervical cancer and 840 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Sri Lanka, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Sri Lanka. However, in Southern Asia, the region Sri Lanka belongs to, about 6.6% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 75.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 16.4 | 8.9 |
| Age-standardized rate | 17.2 | 9.5 |
| Cumulative risk 0-64 years (%) | 1.3 | 0.7 |
| SIR/SMR | 103 | 103 |
| Annual number of new cases/deaths | 1544 | 840 |
| Ranking of cervical cancer (all ages) † | 2nd | 3rd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

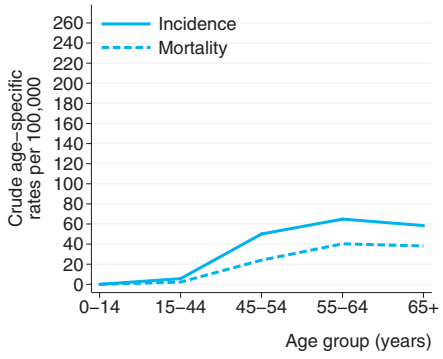



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

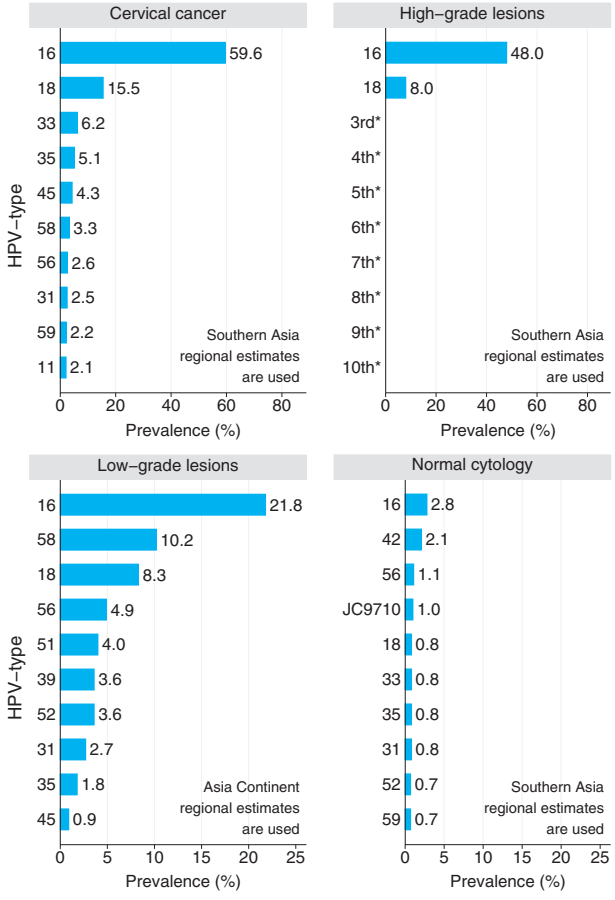
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 1.7 |
| Fertility rate (live births per women) | 2.3 |
| Oral Contraceptive Use (%) | 6.7 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 19164 | 6.6 (6.2-6.9) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions† | 25 | 64 (42.5-82.0) |
| Cervical cancer: any type† | 386 | 90.2* (86.7-92.9) |
| Cervical cancer: HPV 16/18† | 386 | 75.1 (70.5-79.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Asia regional estimate
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



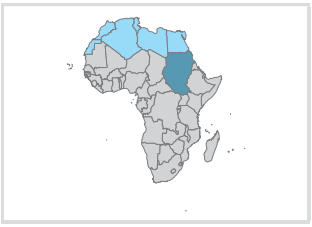

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# SUDAN



has a population of 11.02 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1664 women are diagnosed with cervical cancer and 1354 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Sudan, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Sudan. However, in Northern Africa, the region Sudan belongs to, about 21.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 72.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 10.3 | 8.4 |
| Age-standardized rate | 15.4 | 12.7 |
| Cumulative risk 0-64 years (%) | 1.1 | 0.9 |
| SIR/SMR | 87 | 136 |
| Annual number of new cases/deaths | 1664 | 1354 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

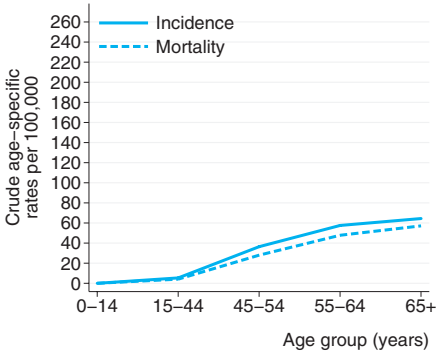



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.6 |
| Smoking prevalence in women (%) | 1.5 |
| Fertility rate (live births per women) | 4.6 |
| Oral Contraceptive Use (%) | 5.1 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 172 | 21.5 (15.6-28.4) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type† | 335 | 95.5* (92.7-97.5) |
| Cervical cancer: HPV 16/18† | 335 | 72.5 (67.4-77.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Northern Africa regional estimate
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

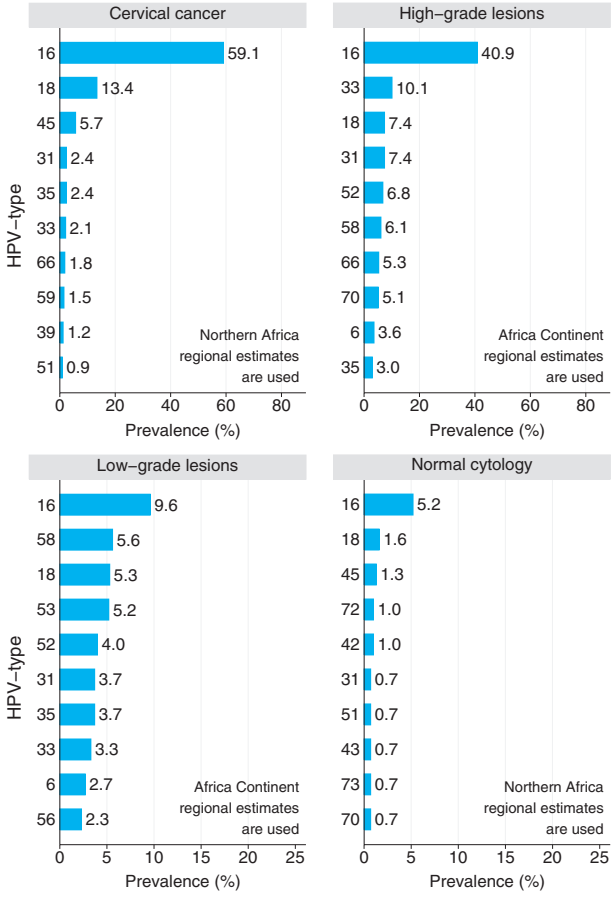



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 78 |
| Percentage of districts with >=80% DTP3 coverage | 72 |

DTP: Diphtheria, Tetanus and Pertussis

# SURINAME

has a population of 159845 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 51 women are diagnosed with cervical cancer and 26 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Suriname, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Suriname. However, in South America, the region Suriname belongs to, about 14.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 67.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 24.2 | 12.3 |
| Age-standardized rate | 27 | 14 |
| Cumulative risk 0-64 years (%) | 1.6 | 0.7 |
| SIR/SMR | 173 | 164 |
| Annual number of new cases/deaths | 51 | 26 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

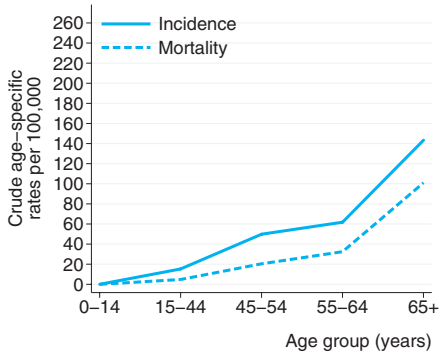



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.9 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 2.7 |
| Oral Contraceptive Use (%) | 24.5 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4354 | 14.3 (13.3-15.4) |
| Low-grade lesions† | 548 | 79 (75.4-82.4) |
| High-grade lesions† | 487 | 80.1 (76.3-83.5) |
| Cervical cancer: any type† | 1041 | 91.1* (89.2-92.7) |
| Cervical cancer: HPV 16/18† | 1041 | 67.3 (64.4-70.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South America regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

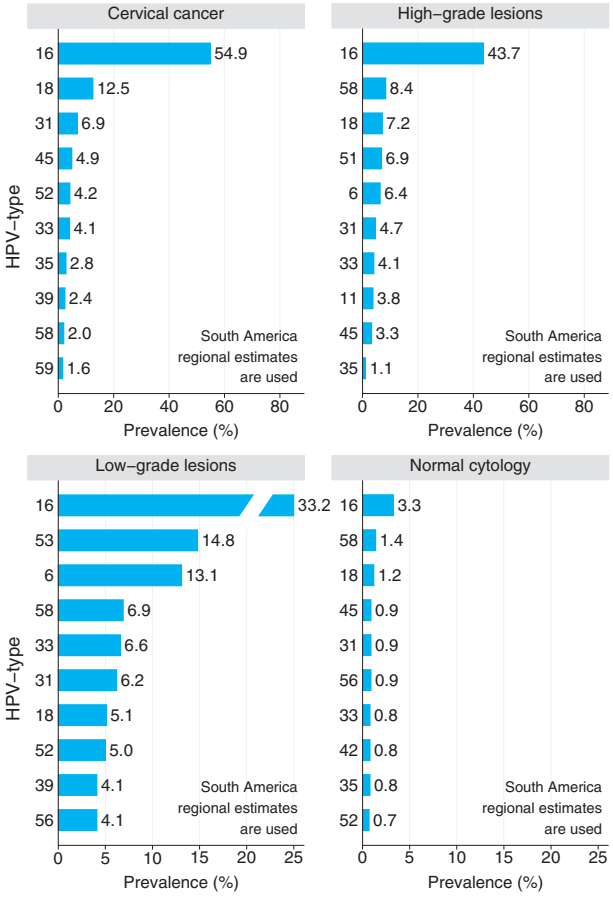
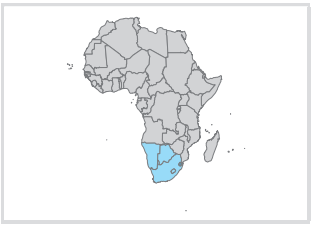



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 84 |
| Percentage of districts with >=80% DTP3 coverage | 90 |

DTP: Diphtheria, Tetanus and Pertussis

# SWAZILAND



has a population of 324281 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 186 women are diagnosed with cervical cancer and 150 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Swaziland, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Swaziland. However, in Southern Africa, the region Swaziland belongs to, about 15.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 63.0% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 39.4 | 31.6 |
| Age-standardized rate | 58.9 | 47.6 |
| Cumulative risk 0-64 years (%) | 4.6 | 3.7 |
| SIR/SMR | 346 | 532 |
| Annual number of new cases/deaths | 186 | 150 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

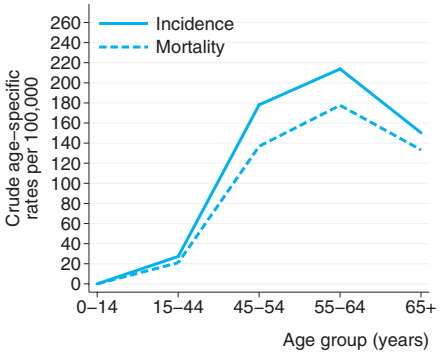



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

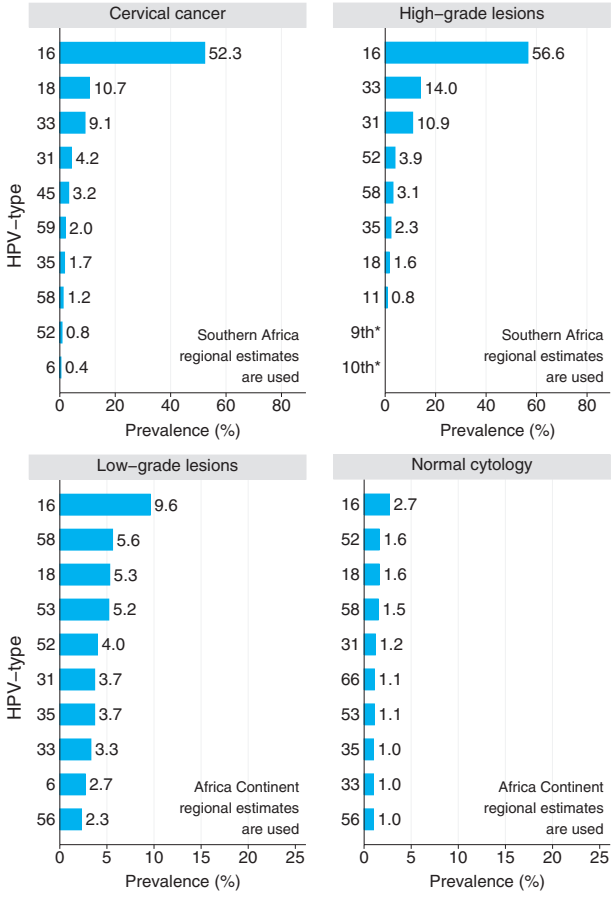
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 33.4 |
| Smoking prevalence in women (%) | 2.9 |
| Fertility rate (live births per women) | 5.0 |
| Oral Contraceptive Use (%) | 5.4 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 1269 | 15.5 (13.6-17.6) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions† | 129 | 88.4 (81.5-93.3) |
| Cervical cancer: any type† | 308 | 93.8* (90.5-96.2) |
| Cervical cancer: HPV 16/18† | 308 | 63.0 (57.3-68.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Southern Africa regional estimate
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



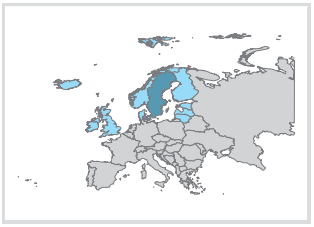

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 68 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# SWEDEN



has a population of 3.79 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 485 women are diagnosed with cervical cancer and 249 die from the disease. Cervical cancer ranks as the 10th most frequent cancer in women in Sweden, and the 3rd most frequent cancer among women between 15 and 44 years of age. About 5.8% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 68.0% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 10.9 | 5.6 |
| Age-standardized rate | 8.2 | 3.1 |
| Cumulative risk 0-64 years (%) | 0.6 | 0.2 |
| SIR/SMR | 45 | 38 |
| Annual number of new cases/deaths | 485 | 249 |
| Ranking of cervical cancer (all ages) † | 10th | 12th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

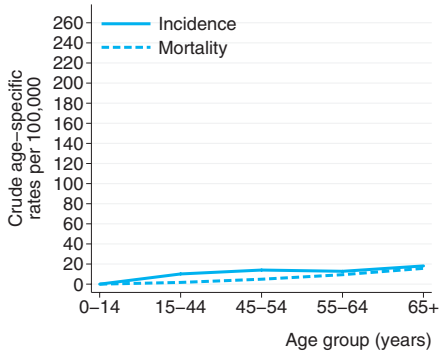



**Table 2. Cervical screening coverage**

>80% in Northern Sweden, 20-30% in Malmo, 50-70% in most counties (2000)

**Table 3. Factors contributing to cervical cancer**

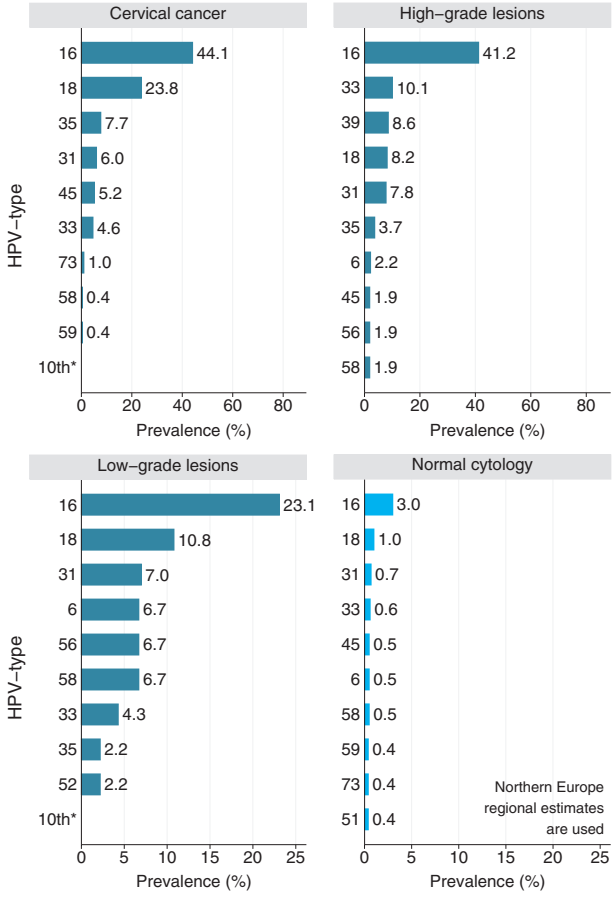
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | 18.3 |
| Fertility rate (live births per women) | 1.6 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 617 | 5.8 (4.1-8.0) |
| Low-grade lesions | 186 | 76.3 (69.6-82.3) |
| High-grade lesions | 383 | 80.4 (76.1-84.3) |
| Cervical cancer: any type | 562 | 75.4* (71.7-79.0) |
| Cervical cancer: HPV 16/18 | 562 | 68.0 (63.9-71.8) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# SWITZERLAND

has a population of 3.16 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 389 women are diagnosed with cervical cancer and 108 die from the disease. Cervical cancer ranks as the 10th most frequent cancer in women in Switzerland, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Switzerland. However, in Western Europe, the region Switzerland belongs to, about 6.1% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 73.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 10.7 | 3 |
| Age-standardized rate | 8.3 | 1.7 |
| Cumulative risk 0-64 years (%) | 0.7 | 0.1 |
| SIR/SMR | 44 | 20 |
| Annual number of new cases/deaths | 389 | 108 |
| Ranking of cervical cancer (all ages) † | 10th | 16th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

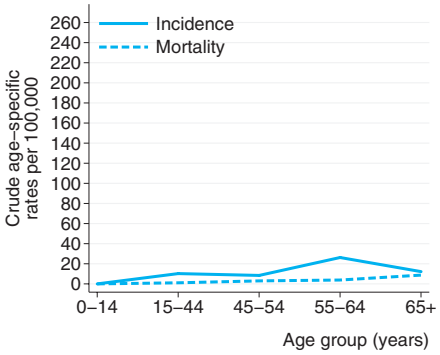



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.4 |
| Smoking prevalence in women (%) | 23.1 |
| Fertility rate (live births per women) | 1.4 |
| Oral Contraceptive Use (%) | 34.1 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 48701 | 6.1 (5.9-6.4) |
| Low-grade lesions† | 312 | 68.6 (63.1-73.7) |
| High-grade lesions† | 1664 | 93.3 (92.0-94.5) |
| Cervical cancer: any type† | 998 | 86.8* (84.5-88.8) |
| Cervical cancer: HPV 16/18† | 998 | 73.6 (70.8-76.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

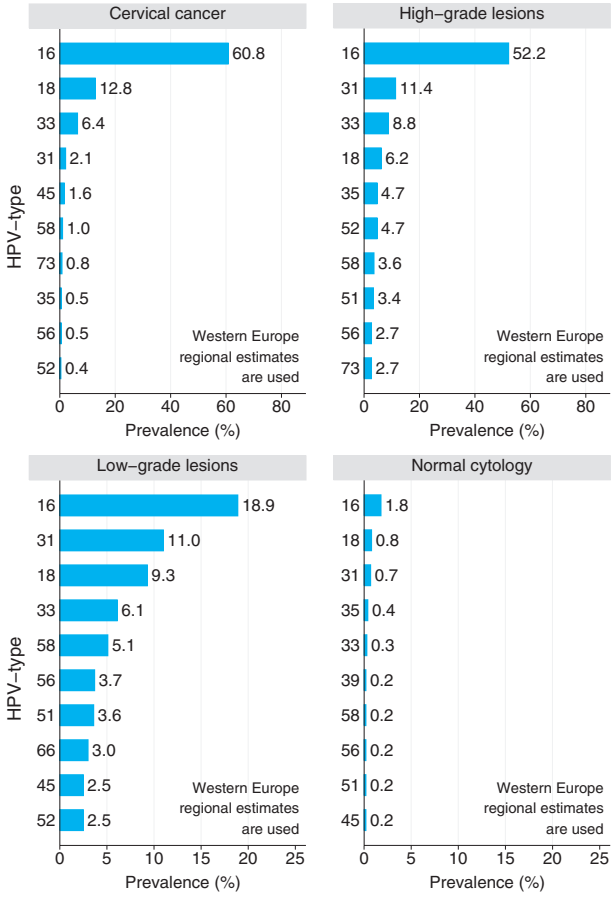



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# SYRIA

has a population of 6.02 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 118 women are diagnosed with cervical cancer and 55 die from the disease. Cervical cancer ranks as the 14th most frequent cancer in women in Syria, and the 10th most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Syria. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 1.4 | 0.7 |
| Age-standardized rate | 2 | 1 |
| Cumulative risk 0-64 years (%) | 0.1 | 0.1 |
| SIR/SMR | 13 | 12 |
| Annual number of new cases/deaths | 118 | 55 |
| Ranking of cervical cancer (all ages) † | 14th | 14th |
| Ranking of cervical cancer (15-44 years) † | 10th | 9th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

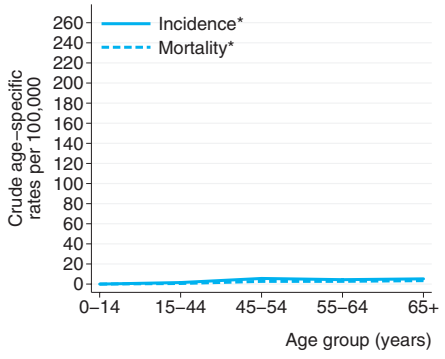



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 9.92 |
| Fertility rate (live births per women) | 4.7 |
| Oral Contraceptive Use (%) | 9.9 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

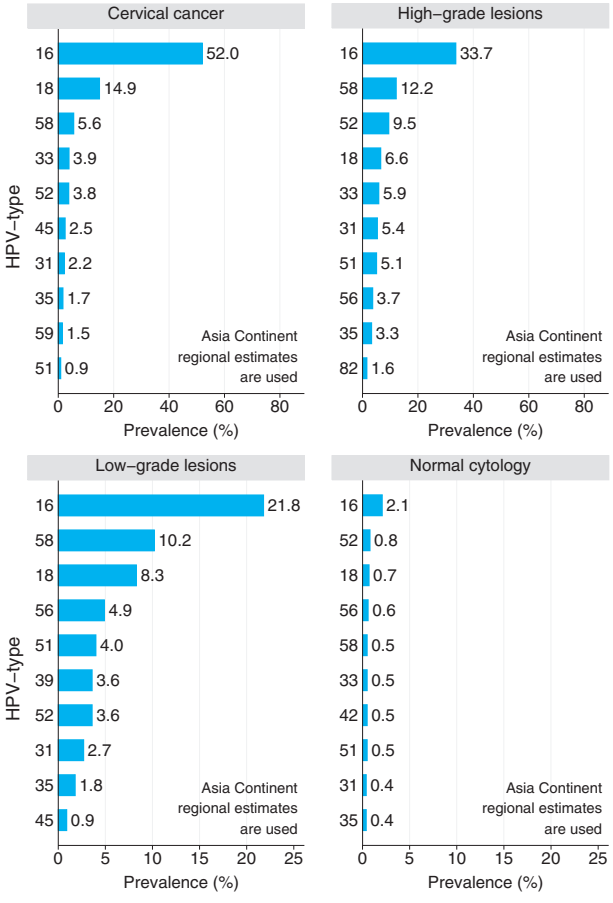



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# TAJIKISTAN

has a population of 2.03 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 232 women are diagnosed with cervical cancer and 70 die from the disease. Cervical cancer ranks as the 3rd most frequent cancer in women in Tajikistan, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Tajikistan. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 7.5 | 2.3 |
| Age-standardized rate | 9.9 | 3.5 |
| Cumulative risk 0-64 years (%) | 0.8 | 0.3 |
| SIR/SMR | 63 | 37 |
| Annual number of new cases/deaths | 232 | 70 |
| Ranking of cervical cancer (all ages) † | 3rd | 5th |
| Ranking of cervical cancer (15-44 years) † | 1st | 6th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

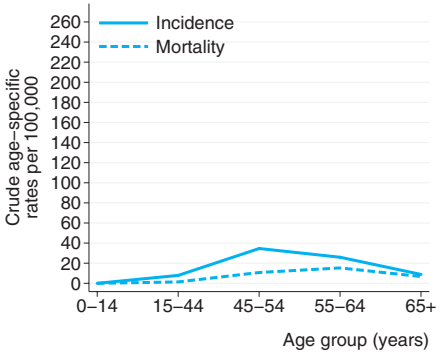



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 4.2 |
| Oral Contraceptive Use (%) | 0.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

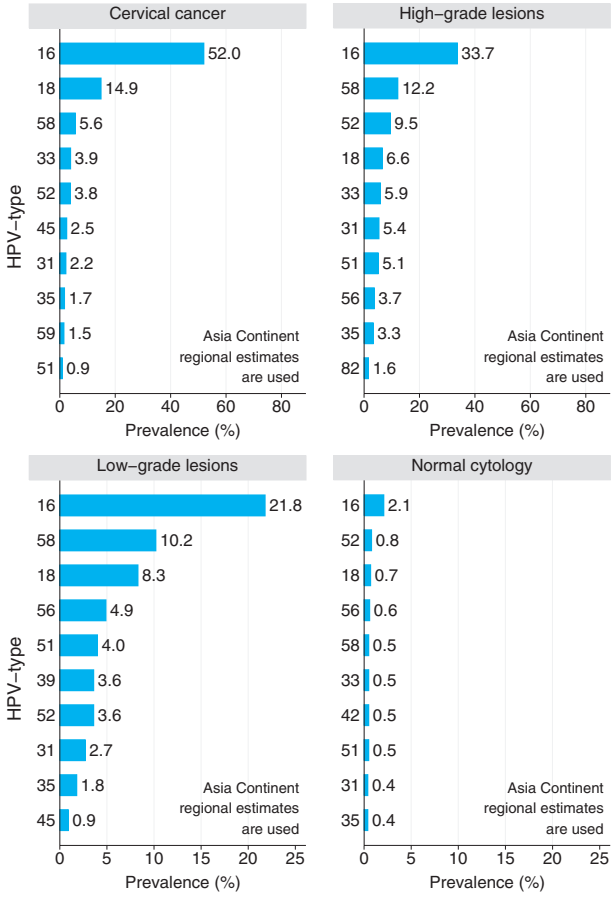
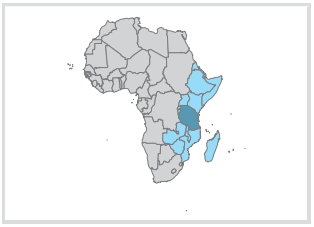



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 86 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# TANZANIA



has a population of 11.14 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 7515 women are diagnosed with cervical cancer and 6009 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Tanzania, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Tanzania. However, in Eastern Africa, the region Tanzania belongs to, about 35.4% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Tanzania 72.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 40.6 | 32.5 |
| Age-standardized rate | 68.6 | 55.6 |
| Cumulative risk 0-64 years (%) | 5.1 | 4 |
| SIR/SMR | 399 | 629 |
| Annual number of new cases/deaths | 7515 | 6009 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

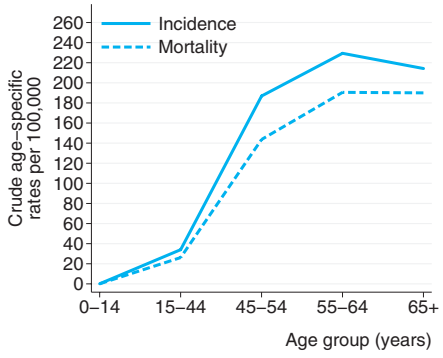



**Table 2. Cervical screening coverage**

| |
|---|
| No data available |

**Table 3. Factors contributing to cervical cancer**

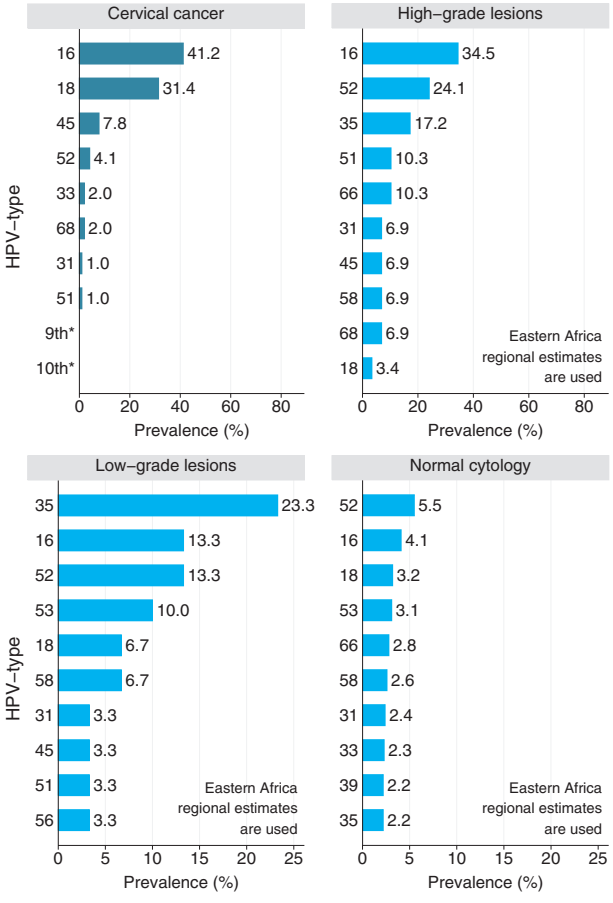
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 6.5 |
| Smoking prevalence in women (%) | 1.3 |
| Fertility rate (live births per women) | 5.6 |
| Oral Contraceptive Use (%) | 5.3 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2144 | 35.4 (33.4-37.5) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type | 102 | 94.1* (87.6-97.8) |
| Cervical cancer: HPV 16/18 | 102 | 72.5 (62.8-80.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 90 |
| Percentage of districts with >=80% DTP3 coverage | 73 |

DTP: Diphtheria, Tetanus and Pertussis

# THAILAND

has a population of 25.14 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 6243 women are diagnosed with cervical cancer and 2620 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Thailand, and the 1st most frequent cancer among women between 15 and 44 years of age. About 6.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 71.9% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 19.2 | 8.1 |
| Age-standardized rate | 19.8 | 8.4 |
| Cumulative risk 0-64 years (%) | 1.5 | 0.6 |
| SIR/SMR | 122 | 96 |
| Annual number of new cases/deaths | 6243 | 2620 |
| Ranking of cervical cancer (all ages) † | 1st | 3rd |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

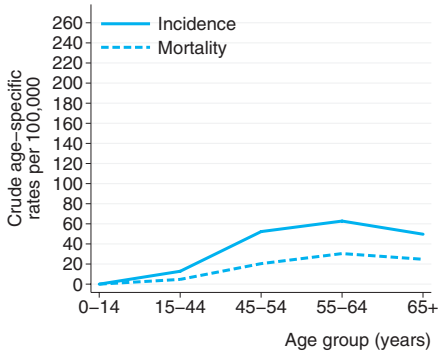



**Table 2. Cervical screening coverage**

| |
|---|
| <5% (2003) |

**Table 3. Factors contributing to cervical cancer**

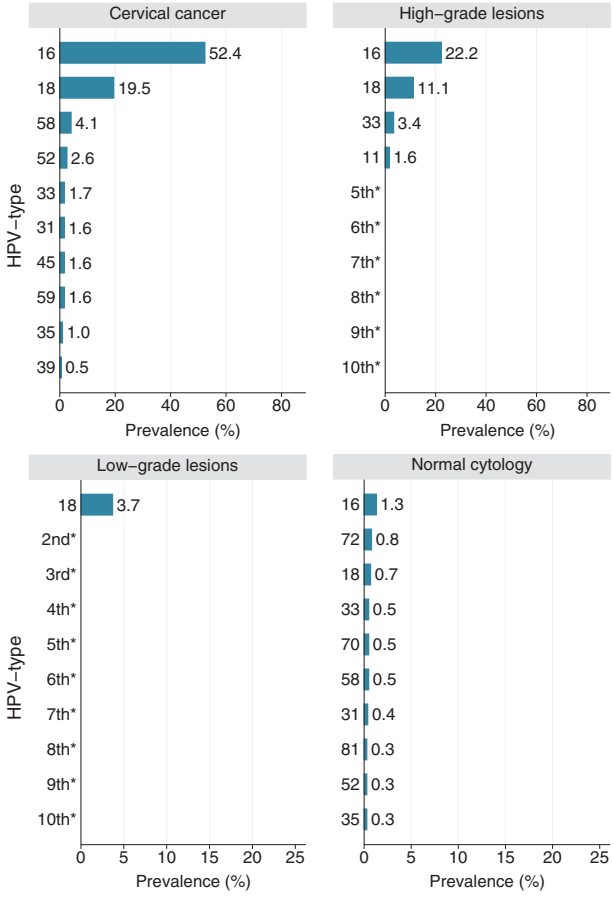
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.4 |
| Smoking prevalence in women (%) | 2.9 |
| Fertility rate (live births per women) | 2.0 |
| Oral Contraceptive Use (%) | 23.1 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 1920 | 6.3 (5.3-7.5) |
| Low-grade lesions | 27 | 33.3 (16.5-54.0) |
| High-grade lesions | 207 | 61.8 (54.8-68.5) |
| Cervical cancer: any type | 590 | 90* (87.3-92.3) |
| Cervical cancer: HPV 16/18 | 590 | 71.9 (68.0-75.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# TIMOR-LESTE

has a population of 264413 women ages 15 years and older who are at risk of developing cervical cancer. Data is not yet available on the burden of cervical cancer in Timor-Leste. However, in South-Eastern Asia, the region Timor-Leste belongs to, current estimates indicate that every year 42538 women are diagnosed with cervical cancer and 22594 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in South-Eastern Asia, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Timor-Leste. However, in South-Eastern Asia about 6.2% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 71.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

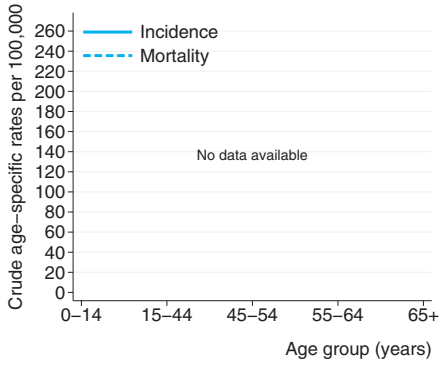



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

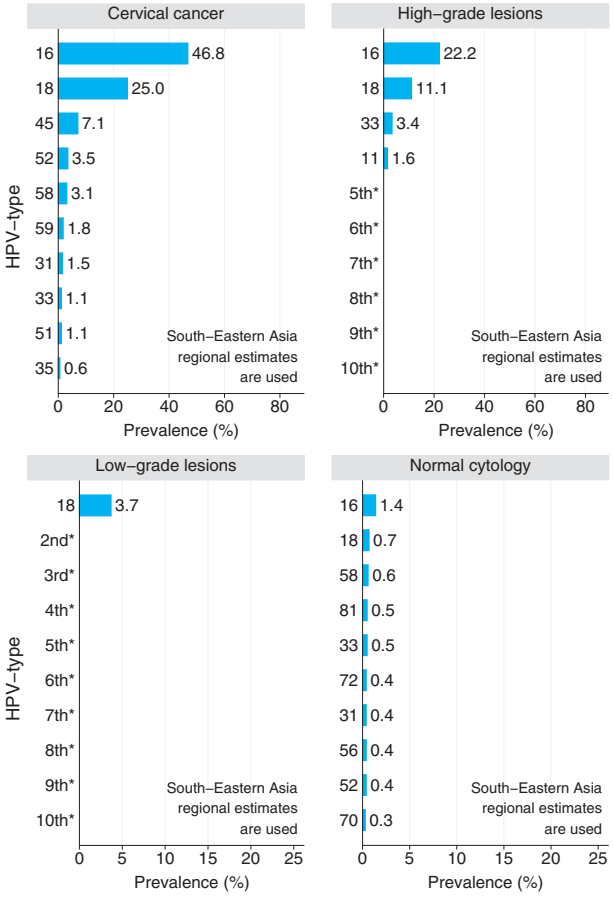
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 4.7 |
| Oral Contraceptive Use (%) | 0.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4194 | 6.2 (5.5-6.9) |
| Low-grade lesions† | 27 | 33.3 (16.5-54.0) |
| High-grade lesions† | 207 | 61.8 (54.8-68.5) |
| Cervical cancer: any type† | 1090 | 92.1* (90.3-93.6) |
| Cervical cancer: HPV 16/18† | 1090 | 71.8 (69.1-74.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South-Eastern Asia regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



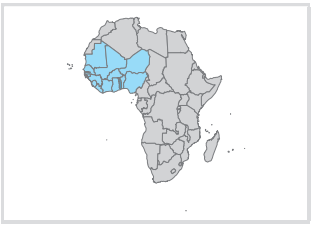

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 67 |
| Percentage of districts with >=80% DTP3 coverage | 23 |

DTP: Diphtheria, Tetanus and Pertussis

# TOGO



has a population of 1.77 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 435 women are diagnosed with cervical cancer and 349 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Togo, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Togo. However, in Western Africa, the region Togo belongs to, about 16.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 50.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence* | Mortality* |
|---|---|---|
| Crude rate | 18.1 | 14.6 |
| Age-standardized rate | 29.3 | 23.8 |
| Cumulative risk 0-64 years (%) | 2.2 | 1.8 |
| SIR/SMR | 171 | 265 |
| Annual number of new cases/deaths | 435 | 349 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
*No data available, calculated from the average of neighbouring countries.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**
*No data available, calculated from the average of neighbouring countries.

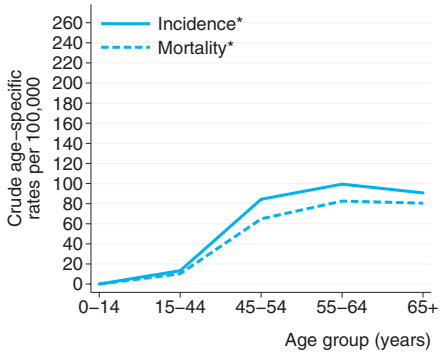



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 3.2 |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | 5.4 |
| Oral Contraceptive Use (%) | 2.5 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2641 | 16.5 (15.1-18.0) |
| Low-grade lesions† | 271 | 59 (52.9-65.0) |
| High-grade lesions† | 138 | 79.7 (72.0-86.1) |
| Cervical cancer: any type† | 218 | 85.8* (80.4-90.1) |
| Cervical cancer: HPV 16/18† | 218 | 50.5 (43.6-57.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Western Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

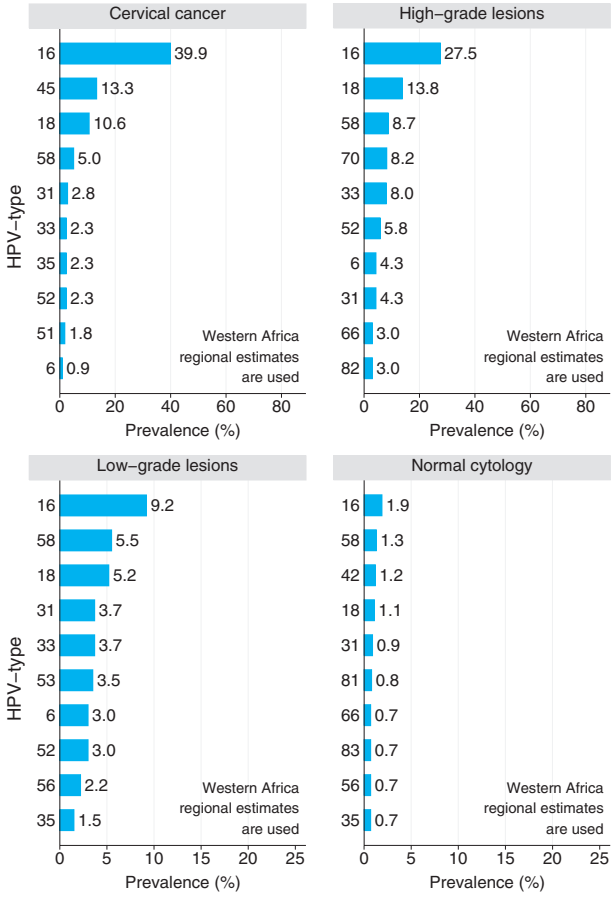
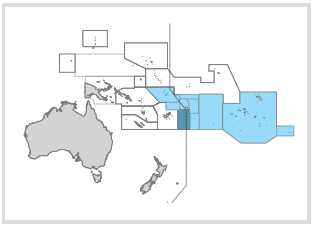



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 87 |
| Percentage of districts with >=80% DTP3 coverage | 80 |

DTP: Diphtheria, Tetanus and Pertussis

# TONGA



has a population of 32067 women ages 15 years and older who are at risk of developing cervical cancer. Data is not yet available on the burden of cervical cancer in Tonga. However, in Polynesia, the region Tonga belongs to, current estimates indicate that every year 72 women are diagnosed with cervical cancer and 38 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Polynesia, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Tonga , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Oceania Continent about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

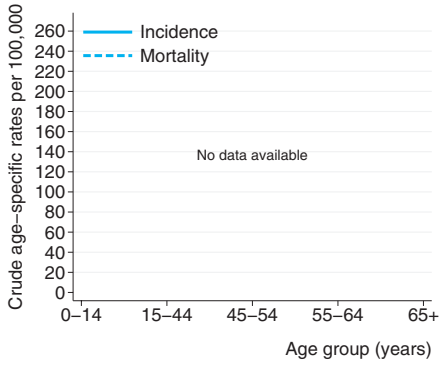



**Table 2. Cervical screening coverage**

| |
|---|
| No data available |

**Table 3. Factors contributing to cervical cancer**

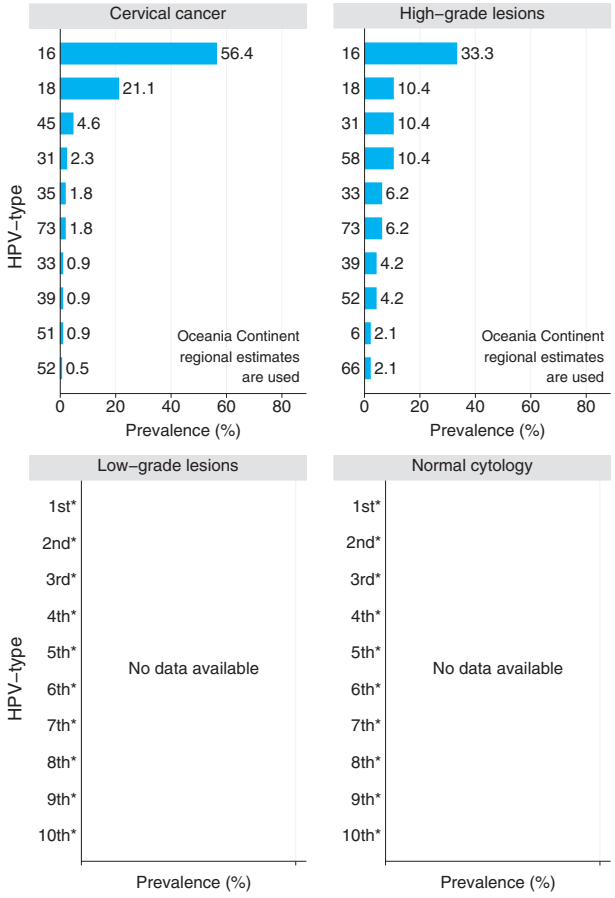
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 10.5 |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions‡ | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type‡ | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18‡ | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# TRINIDAD & TOBAGO

has a population of 522065 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 186 women are diagnosed with cervical cancer and 73 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Trinidad & Tobago, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Trinidad & Tobago. However, in Americas Continent about 15.6% of women in the general population are estimated to harbour cervical HPV infection at a given time. In Caribbean, the region Trinidad & Tobago belongs to, about 64.4% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 28.3 | 11.1 |
| Age-standardized rate | 27.1 | 10.7 |
| Cumulative risk 0-64 years (%) | 1.9 | 0.7 |
| SIR/SMR | 167 | 120 |
| Annual number of new cases/deaths | 186 | 73 |
| Ranking of cervical cancer (all ages) † | 2nd | 2nd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

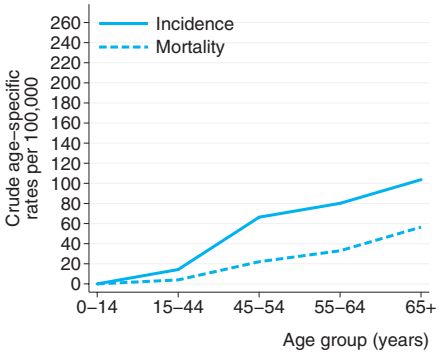



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

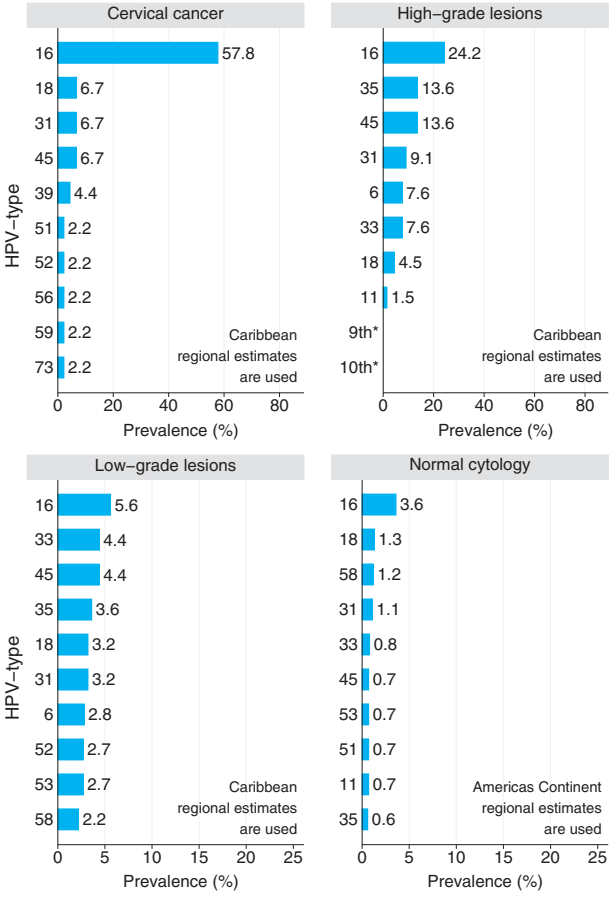
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 2.6 |
| Smoking prevalence in women (%) | 8 |
| Fertility rate (live births per women) | 1.7 |
| Oral Contraceptive Use (%) | 10.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 40399 | 15.6 (15.2-15.9) |
| Low-grade lesions† | 248 | 60.9 (54.5-67.0) |
| High-grade lesions† | 66 | 80.3 (68.7-89.1) |
| Cervical cancer: any type† | 45 | 97.8* (88.2-99.9) |
| Cervical cancer: HPV 16/18† | 45 | 64.4 (48.8-78.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Caribbean regional estimate
‡Americas Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



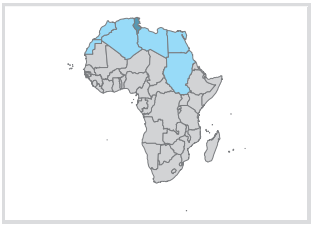

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 92 |
| Percentage of districts with >=80% DTP3 coverage | 78 |

DTP: Diphtheria, Tetanus and Pertussis

# TUNISIA



has a population of 3.74 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 284 women are diagnosed with cervical cancer and 229 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Tunisia, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Tunisia. However, in Northern Africa, the region Tunisia belongs to, about 21.5% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 72.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 6 | 4.8 |
| Age-standardized rate | 6.8 | 5.5 |
| Cumulative risk 0-64 years (%) | 0.5 | 0.4 |
| SIR/SMR | 41 | 62 |
| Annual number of new cases/deaths | 284 | 229 |
| Ranking of cervical cancer (all ages) † | 2nd | 3rd |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

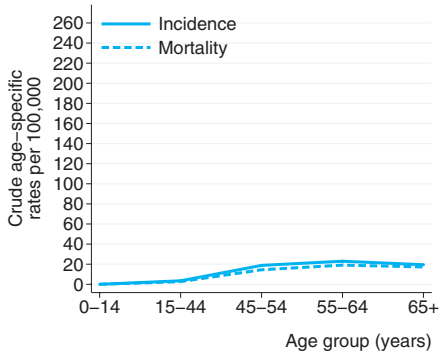



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.1 |
| Smoking prevalence in women (%) | 2.4 |
| Fertility rate (live births per women) | 2.1 |
| Oral Contraceptive Use (%) | 11.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 172 | 21.5 (15.6-28.4) |
| Low-grade lesions‡ | 301 | 59.1 (53.3-64.7) |
| High-grade lesions‡ | 296 | 85.1 (80.6-89.0) |
| Cervical cancer: any type† | 335 | 95.5* (92.7-97.5) |
| Cervical cancer: HPV 16/18† | 335 | 72.5 (67.4-77.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Northern Africa regional estimate
‡Africa Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

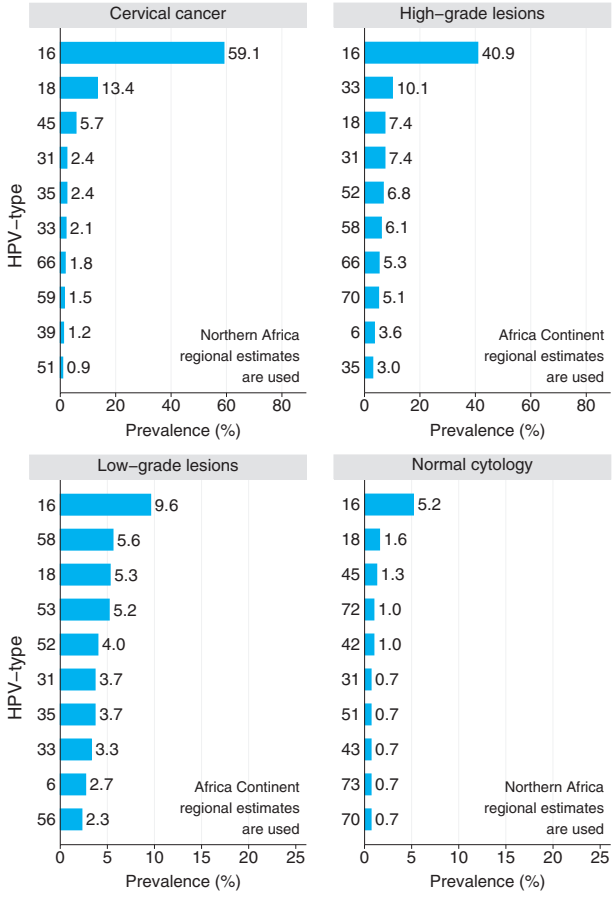



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 99 |
| Percentage of districts with >=80% DTP3 coverage | 97 |

DTP: Diphtheria, Tetanus and Pertussis

# TURKEY

has a population of 25.83 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1364 women are diagnosed with cervical cancer and 726 die from the disease. Cervical cancer ranks as the 8th most frequent cancer in women in Turkey, and the 7th most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Turkey. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 4 | 2.1 |
| Age-standardized rate | 4.5 | 2.4 |
| Cumulative risk 0-64 years (%) | 0.3 | 0.2 |
| SIR/SMR | 27 | 27 |
| Annual number of new cases/deaths | 1364 | 726 |
| Ranking of cervical cancer (all ages) † | 8th | 8th |
| Ranking of cervical cancer (15-44 years) † | 7th | 9th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

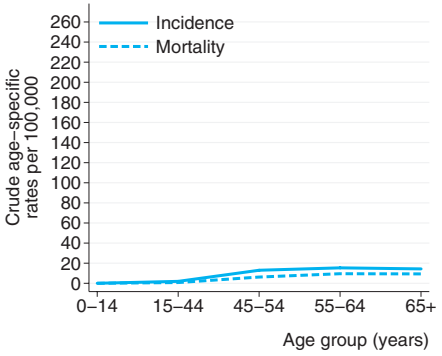



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 17.6 |
| Fertility rate (live births per women) | 2.5 |
| Oral Contraceptive Use (%) | 4.4 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

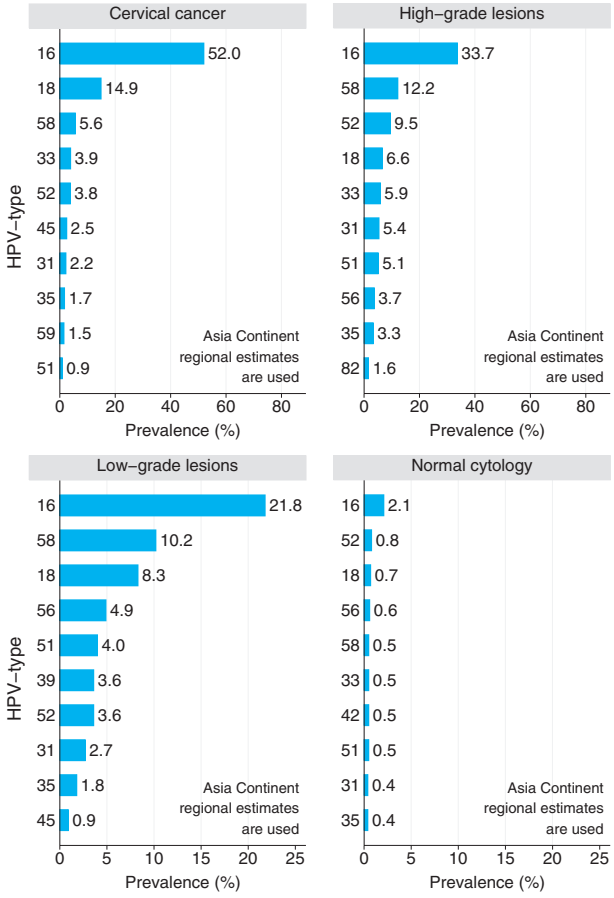



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 90 |
| Percentage of districts with >=80% DTP3 coverage | 89 |

DTP: Diphtheria, Tetanus and Pertussis

# TURKMENISTAN

has a population of 1.69 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 274 women are diagnosed with cervical cancer and 96 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Turkmenistan, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Turkmenistan. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 11.1 | 3.8 |
| Age-standardized rate | 13.5 | 5.2 |
| Cumulative risk 0-64 years (%) | 1 | 0.3 |
| SIR/SMR | 89 | 58 |
| Annual number of new cases/deaths | 274 | 96 |
| Ranking of cervical cancer (all ages) † | 2nd | 4th |
| Ranking of cervical cancer (15-44 years) † | 1st | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

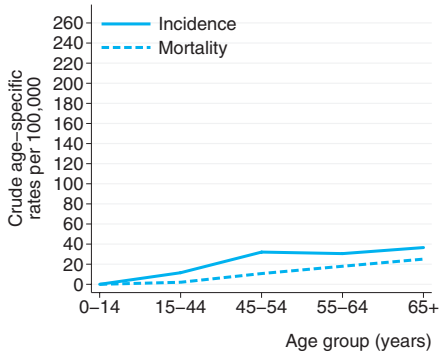



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | <0.1 |
| Smoking prevalence in women (%) | 1 |
| Fertility rate (live births per women) | 3.0 |
| Oral Contraceptive Use (%) | 1.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

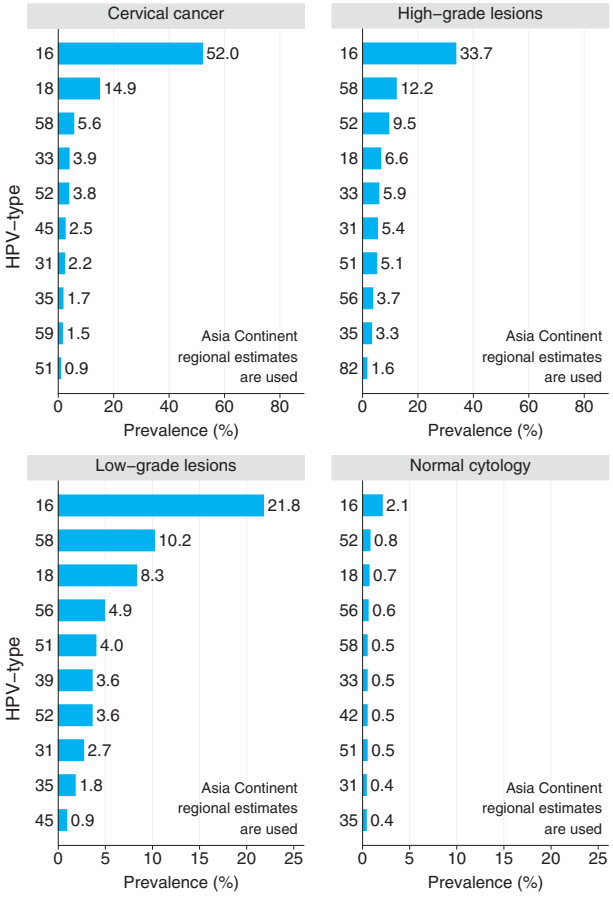



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# TUVALU

Data is not yet available on the burden of cervical cancer in Tuvalu. However, in Polynesia, the region Tuvalu belongs to, current estimates indicate that every year 72 women are diagnosed with cervical cancer and 38 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Polynesia, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Tuvalu , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Oceania Continent about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | - | - |
| Age-standardized rate | - | - |
| Cumulative risk 0-64 years (%) | - | - |
| SIR/SMR | - | - |
| Annual number of new cases/deaths | - | - |
| Ranking of cervical cancer (all ages) † | - | - |
| Ranking of cervical cancer (15-44 years) † | - | - |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

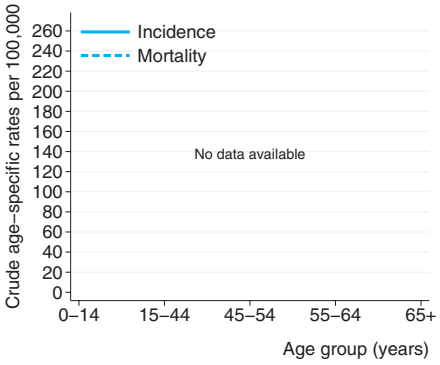



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

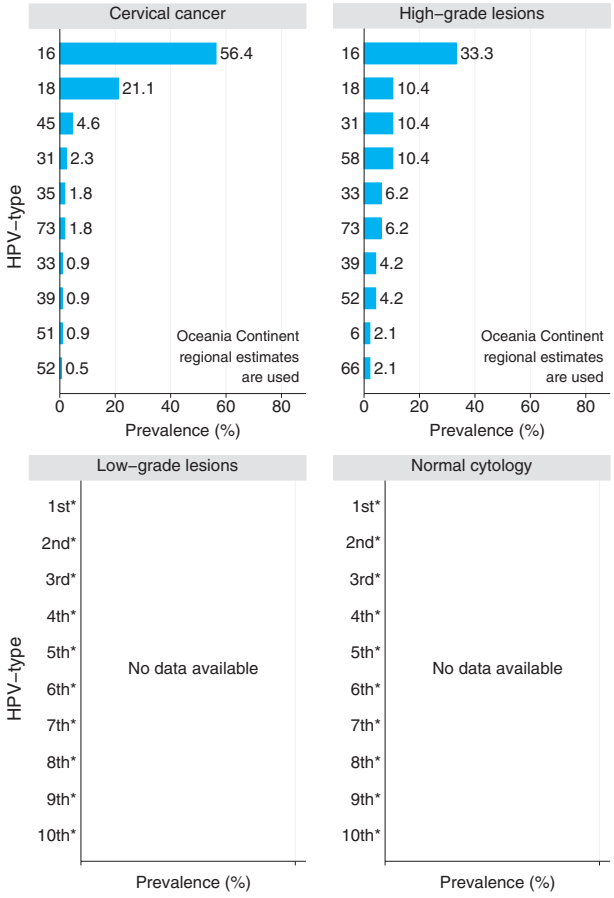
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | - |
| Fertility rate (live births per women) | - |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions‡ | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type‡ | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18‡ | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



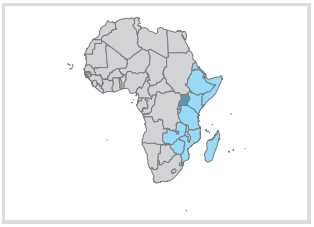

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 97 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# UGANDA



has a population of 7.19 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 2429 women are diagnosed with cervical cancer and 1932 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Uganda, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Uganda. However, in Eastern Africa, the region Uganda belongs to, about 35.4% of women in the general population are estimated to harbour cervical HPV infection at a given time. And in Uganda 76.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 19.5 | 15.5 |
| Age-standardized rate | 36.3 | 29.2 |
| Cumulative risk 0-64 years (%) | 2.8 | 2.2 |
| SIR/SMR | 215 | 338 |
| Annual number of new cases/deaths | 2429 | 1932 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

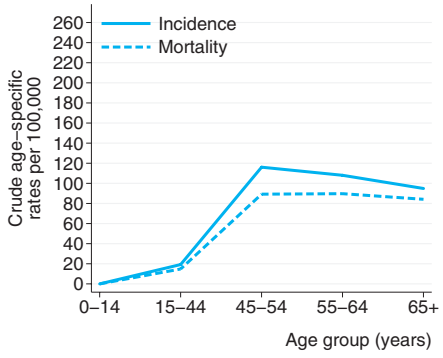



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

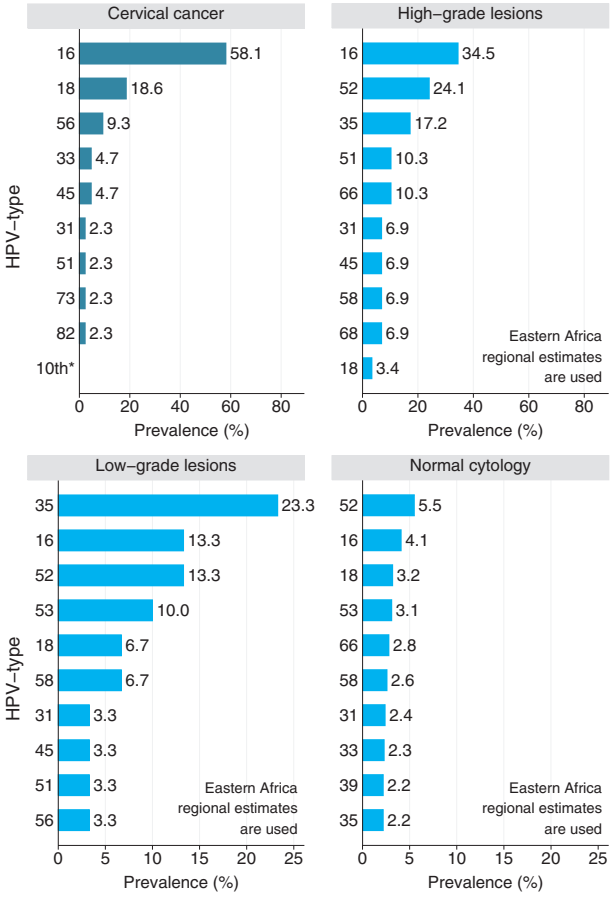
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 6.7 |
| Smoking prevalence in women (%) | 3.3 |
| Fertility rate (live births per women) | 7.0 |
| Oral Contraceptive Use (%) | 3.2 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2144 | 35.4 (33.4-37.5) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type | 43 | 97.7* (87.7-99.9) |
| Cervical cancer: HPV 16/18 | 43 | 76.7 (61.4-88.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



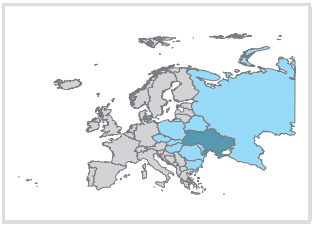

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 80 |
| Percentage of districts with >=80% DTP3 coverage | 51 |

DTP: Diphtheria, Tetanus and Pertussis

# UKRAINE



has a population of 21.81 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 4885 women are diagnosed with cervical cancer and 2578 die from the disease. Cervical cancer ranks as the 5th most frequent cancer in women in Ukraine, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Ukraine. However, in Eastern Europe, the region Ukraine belongs to, about 29.1% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 70.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 18.8 | 9.9 |
| Age-standardized rate | 14.1 | 6.4 |
| Cumulative risk 0-64 years (%) | 1.1 | 0.4 |
| SIR/SMR | 80 | 70 |
| Annual number of new cases/deaths | 4885 | 2578 |
| Ranking of cervical cancer (all ages) † | 5th | 6th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

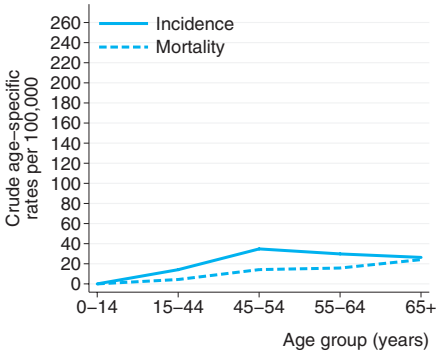



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 1.4 |
| Smoking prevalence in women (%) | 11.1 |
| Fertility rate (live births per women) | 1.2 |
| Oral Contraceptive Use (%) | 3.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 309 | 29.1 (24.1-34.5) |
| Low-grade lesions† | 87 | 52.9 (41.9-63.7) |
| High-grade lesions† | 163 | 75.5 (68.1-81.9) |
| Cervical cancer: any type† | 459 | 84.5* (80.9-87.7) |
| Cervical cancer: HPV 16/18† | 459 | 70.8 (66.4-74.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Europe regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

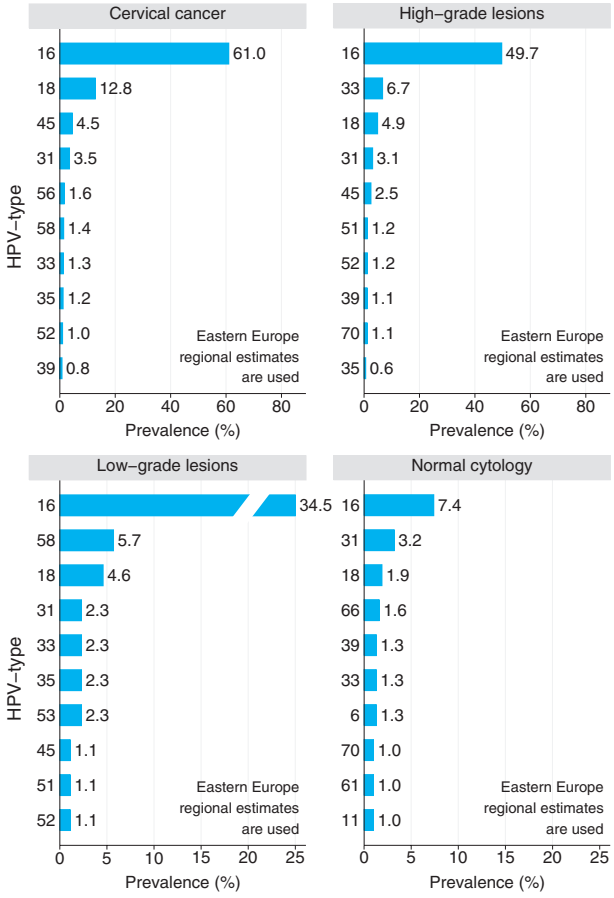



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 98 |
| Percentage of districts with >=80% DTP3 coverage | 5 |

DTP: Diphtheria, Tetanus and Pertussis

# UNITED ARAB EMIRATES

has a population of 947645 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 73 women are diagnosed with cervical cancer and 36 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in United Arab Emirates, and the 3rd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of United Arab Emirates. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 7.9 | 3.9 |
| Age-standardized rate | 9.9 | 5.2 |
| Cumulative risk 0-64 years (%) | 0.7 | 0.4 |
| SIR/SMR | 60 | 59 |
| Annual number of new cases/deaths | 73 | 36 |
| Ranking of cervical cancer (all ages) † | 2nd | 5th |
| Ranking of cervical cancer (15-44 years) † | 3rd | 3rd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

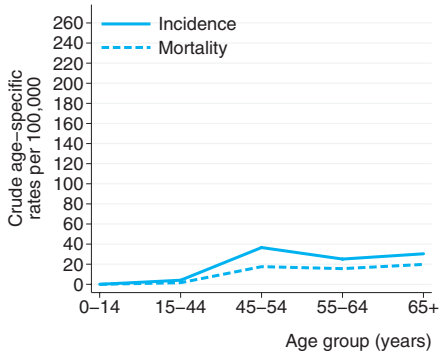



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 1.3 |
| Fertility rate (live births per women) | 5.0 |
| Oral Contraceptive Use (%) | 11.9 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

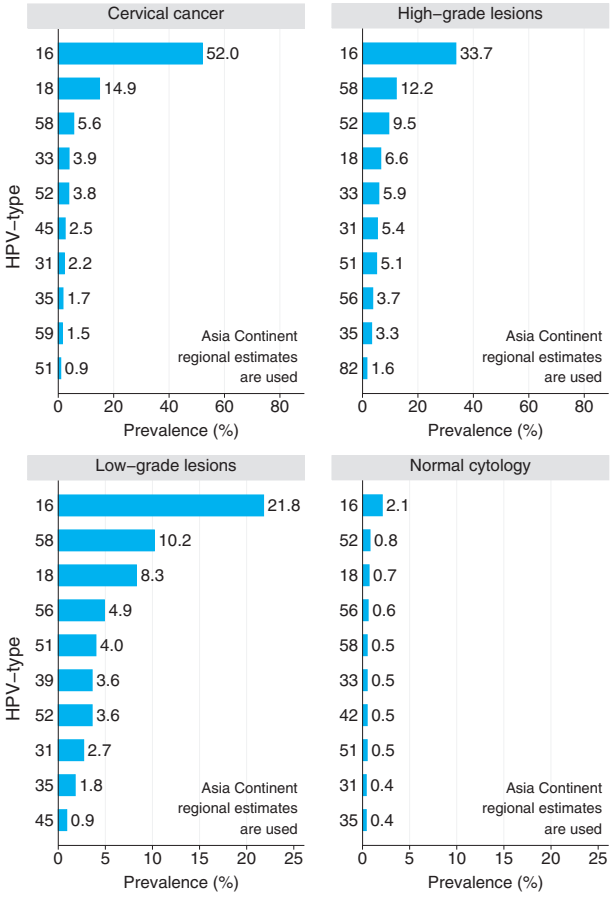
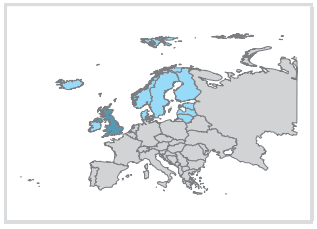



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 94 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# UNITED KINGDOM



has a population of 25.30 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 3181 women are diagnosed with cervical cancer and 1529 die from the disease. Cervical cancer ranks as the 11th most frequent cancer in women in United Kingdom, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 7.1% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 82.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 10.5 | 5.1 |
| Age-standardized rate | 8.3 | 3.1 |
| Cumulative risk 0-64 years (%) | 0.6 | 0.2 |
| SIR/SMR | 46 | 37 |
| Annual number of new cases/deaths | 3181 | 1529 |
| Ranking of cervical cancer (all ages) † | 11th | 11th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

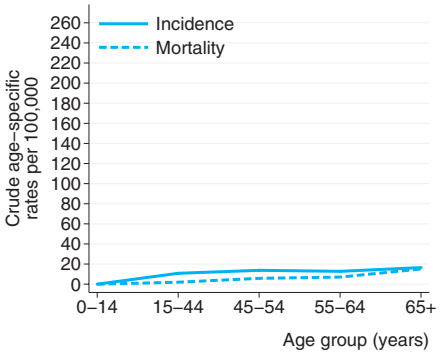



**Table 2. Cervical screening coverage**

| |
|---|
| 81% in the last 5 years and 71% in the last 3 years among women in the target population (2003) |

**Table 3. Factors contributing to cervical cancer**

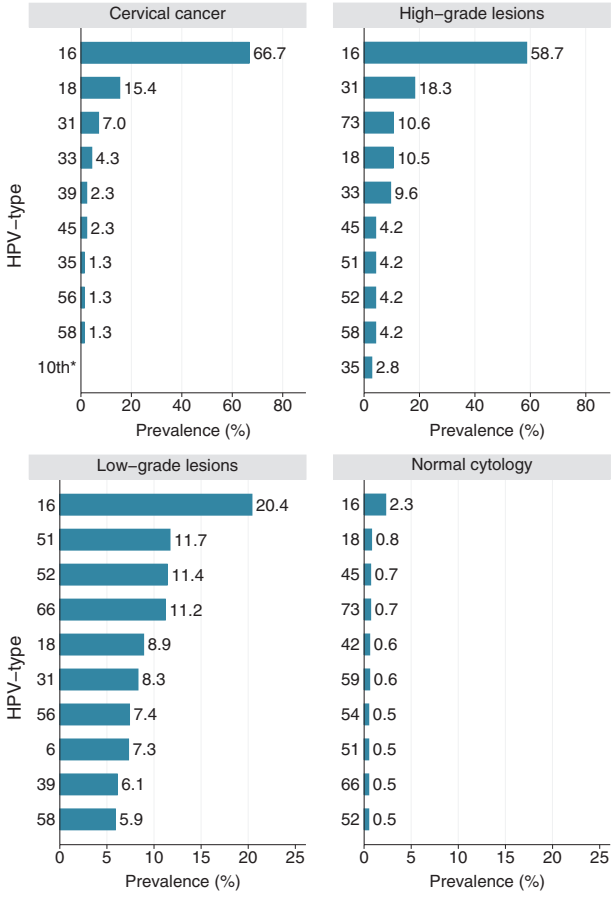
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | 25 |
| Fertility rate (live births per women) | 1.6 |
| Oral Contraceptive Use (%) | 22.0 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 13890 | 7.1 (6.7-7.6) |
| Low-grade lesions | 460 | 88.9 (85.7-91.6) |
| High-grade lesions | 363 | 91.5 (88.1-94.1) |
| Cervical cancer: any type | 234 | 91.5* (87.1-94.7) |
| Cervical cancer: HPV 16/18 | 234 | 82.1 (76.5-86.7) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**



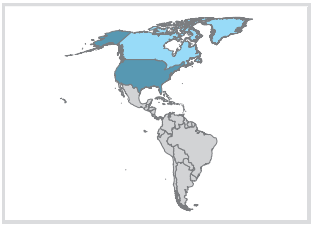

*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 92 |
| Percentage of districts with >=80% DTP3 coverage | 96 |

DTP: Diphtheria, Tetanus and Pertussis

# UNITED STATES OF AMERICA



has a population of 121.32 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 13162 women are diagnosed with cervical cancer and 5214 die from the disease. Cervical cancer ranks as the 13th most frequent cancer in women in United States of America, and the 4th most frequent cancer among women between 15 and 44 years of age. About 13.1% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 77.1% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 9 | 3.6 |
| Age-standardized rate | 7.7 | 2.3 |
| Cumulative risk 0-64 years (%) | 0.6 | 0.1 |
| SIR/SMR | 43 | 29 |
| Annual number of new cases/deaths | 13162 | 5214 |
| Ranking of cervical cancer (all ages) † | 13th | 12th |
| Ranking of cervical cancer (15-44 years) † | 4th | 9th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

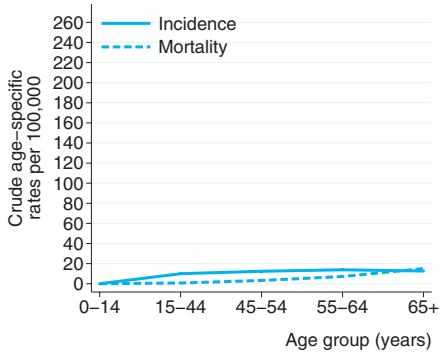



**Table 2. Cervical screening coverage**

>85% ever screened and approximately 80% had a smear in the last 2 years (1999); >82% aged 25 years and above had a smear in last 3 years (2000).

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.6 |
| Smoking prevalence in women (%) | 19.2 |
| Fertility rate (live births per women) | 2.1 |
| Oral Contraceptive Use (%) | 15.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 23685 | 13.1 (12.6-13.5) |
| Low-grade lesions | 2295 | 79.3 (77.6-81.0) |
| High-grade lesions | 1001 | 84.9 (82.5-87.1) |
| Cervical cancer: any type | 1182 | 87.3* (85.3-89.2) |
| Cervical cancer: HPV 16/18 | 1182 | 77.1 (74.6-79.4) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

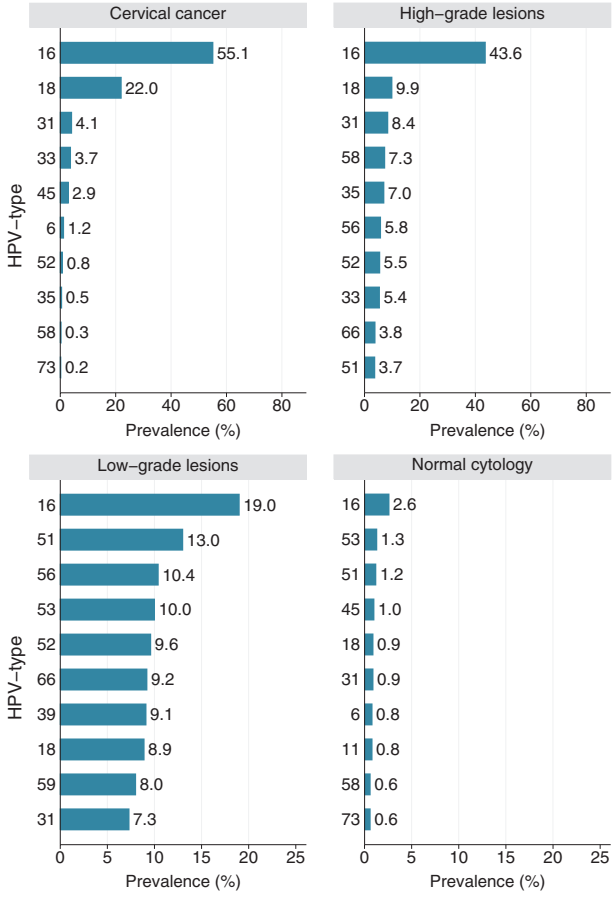



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 96 |
| Percentage of districts with >=80% DTP3 coverage | - |

DTP: Diphtheria, Tetanus and Pertussis

# URUGUAY

has a population of 1.37 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 392 women are diagnosed with cervical cancer and 162 die from the disease. Cervical cancer ranks as the 3rd most frequent cancer in women in Uruguay, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Uruguay. However, in South America, the region Uruguay belongs to, about 14.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 67.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 22.6 | 9.3 |
| Age-standardized rate | 18.8 | 7 |
| Cumulative risk 0-64 years (%) | 1.4 | 0.5 |
| SIR/SMR | 114 | 79 |
| Annual number of new cases/deaths | 392 | 162 |
| Ranking of cervical cancer (all ages) † | 3rd | 5th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

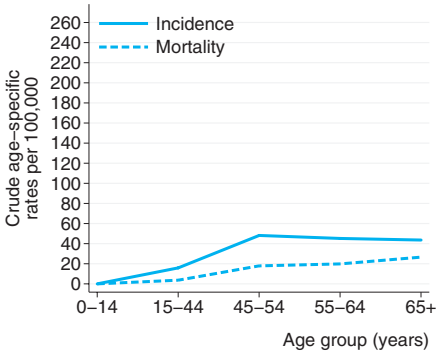



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.5 |
| Smoking prevalence in women (%) | 23.8 |
| Fertility rate (live births per women) | 2.2 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4354 | 14.3 (13.3-15.4) |
| Low-grade lesions† | 548 | 79 (75.4-82.4) |
| High-grade lesions† | 487 | 80.1 (76.3-83.5) |
| Cervical cancer: any type† | 1041 | 91.1* (89.2-92.7) |
| Cervical cancer: HPV 16/18† | 1041 | 67.3 (64.4-70.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South America regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

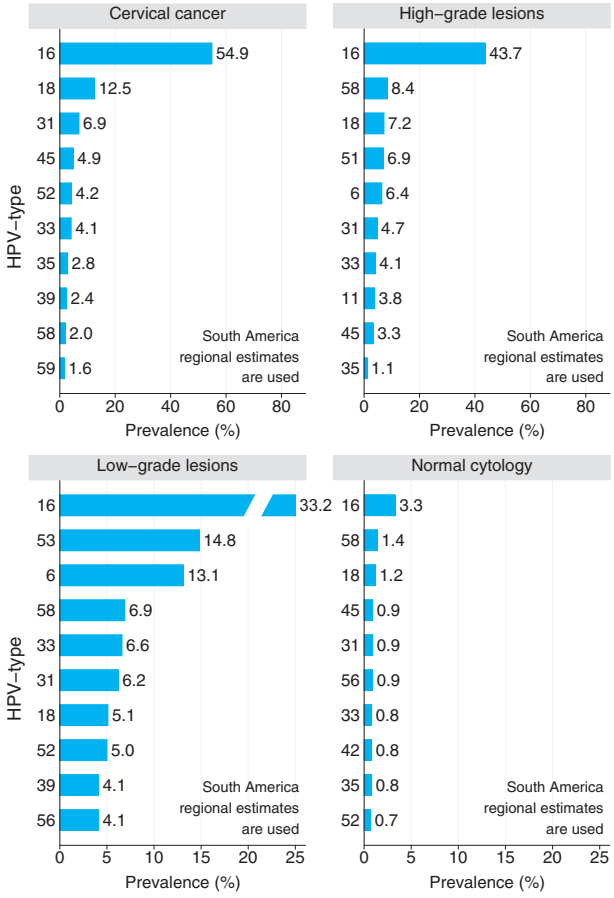



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# UZBEKISTAN

has a population of 9.03 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1149 women are diagnosed with cervical cancer and 379 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Uzbekistan, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Uzbekistan. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 9 | 2.9 |
| Age-standardized rate | 10.7 | 3.9 |
| Cumulative risk 0-64 years (%) | 0.8 | 0.3 |
| SIR/SMR | 70 | 43 |
| Annual number of new cases/deaths | 1149 | 379 |
| Ranking of cervical cancer (all ages) † | 2nd | 6th |
| Ranking of cervical cancer (15-44 years) † | 2nd | 5th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

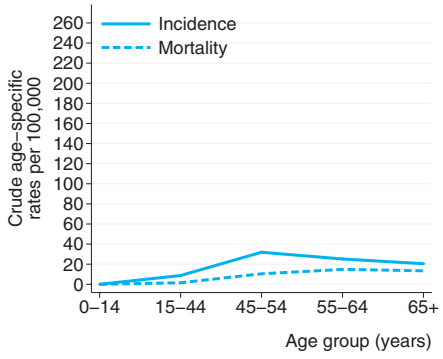



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.2 |
| Smoking prevalence in women (%) | 0.9 |
| Fertility rate (live births per women) | 2.6 |
| Oral Contraceptive Use (%) | 1.6 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

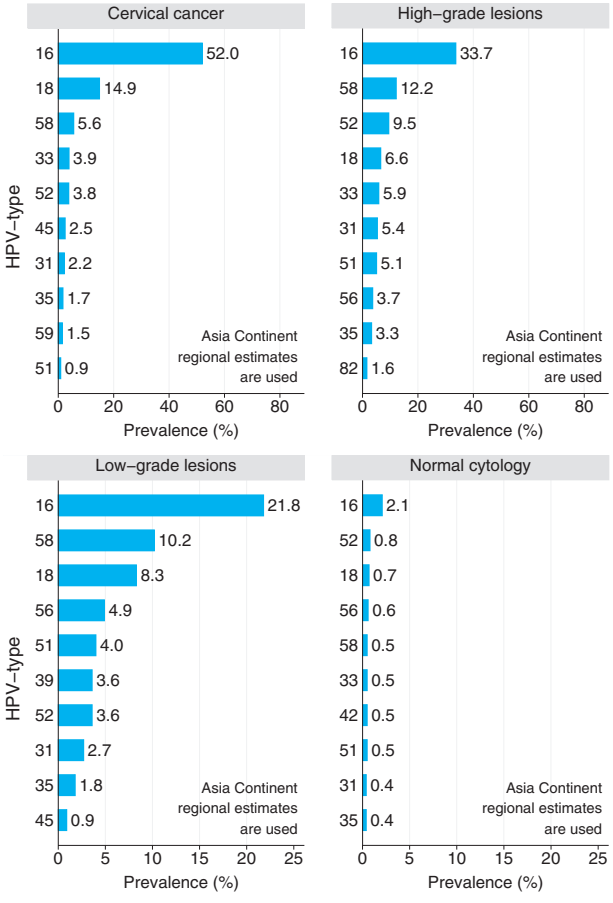
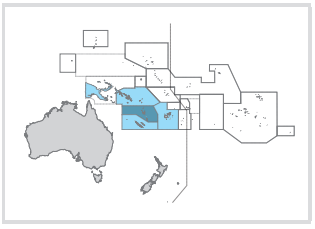



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 95 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# VANUATU



has a population of 62489 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 14 women are diagnosed with cervical cancer and 8 die from the disease. Cervical cancer ranks as the 2nd most frequent cancer in women in Vanuatu, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Vanuatu , but worldwide about 10.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and in Oceania Continent about 77.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 14.6 | 7.8 |
| Age-standardized rate | 21.7 | 12.1 |
| Cumulative risk 0-64 years (%) | 1.8 | 1 |
| SIR/SMR | 133 | 139 |
| Annual number of new cases/deaths | 14 | 8 |
| Ranking of cervical cancer (all ages) † | 2nd | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

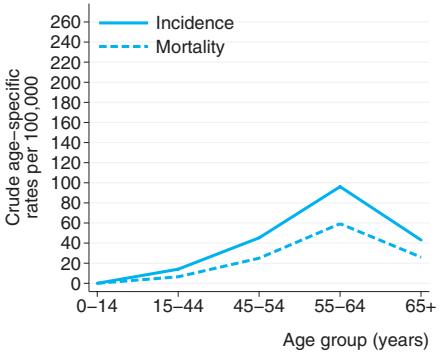



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

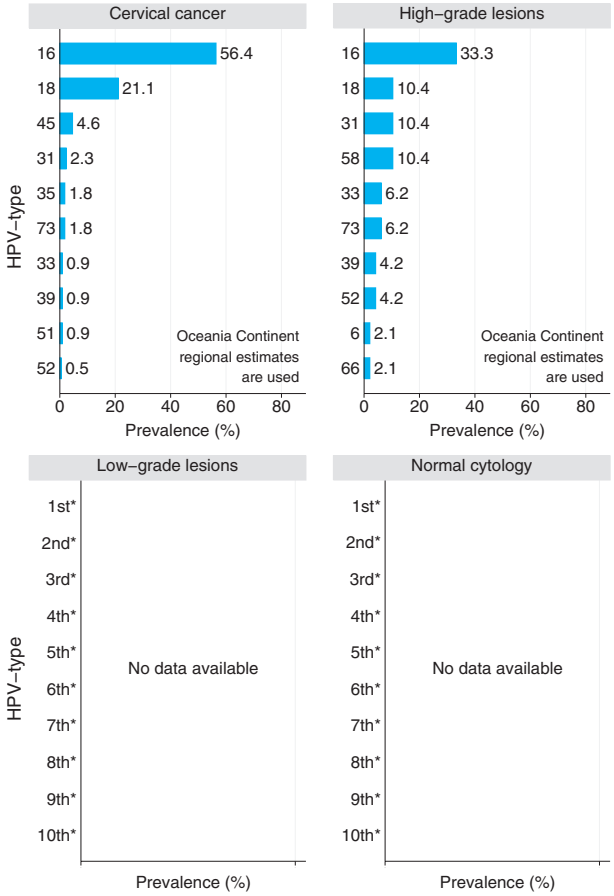
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 5 |
| Fertility rate (live births per women) | 4.9 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | - | - - |
| Low-grade lesions‡ | - | - - |
| High-grade lesions‡ | 48 | 95.8 (85.7-99.5) |
| Cervical cancer: any type‡ | 450 | 88.4* (85.1-91.2) |
| Cervical cancer: HPV 16/18‡ | 450 | 77.6 (73.4-81.3) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Oceania Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 85 |
| Percentage of districts with >=80% DTP3 coverage | 100 |

DTP: Diphtheria, Tetanus and Pertussis

# VENEZUELA

has a population of 9.22 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 3845 women are diagnosed with cervical cancer and 1705 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Venezuela, and the 1st most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Venezuela. However, in South America, the region Venezuela belongs to, about 14.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 67.3% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 30.9 | 13.7 |
| Age-standardized rate | 36 | 16.8 |
| Cumulative risk 0-64 years (%) | 2.6 | 1.1 |
| SIR/SMR | 223 | 187 |
| Annual number of new cases/deaths | 3845 | 1705 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 1st | 1st |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

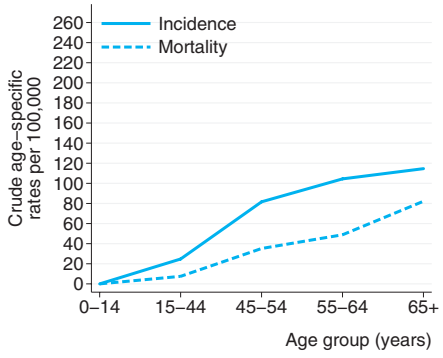



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.7 |
| Smoking prevalence in women (%) | 23.8 |
| Fertility rate (live births per women) | 2.7 |
| Oral Contraceptive Use (%) | - |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 4354 | 14.3 (13.3-15.4) |
| Low-grade lesions† | 548 | 79 (75.4-82.4) |
| High-grade lesions† | 487 | 80.1 (76.3-83.5) |
| Cervical cancer: any type† | 1041 | 91.1* (89.2-92.7) |
| Cervical cancer: HPV 16/18† | 1041 | 67.3 (64.4-70.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South America regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

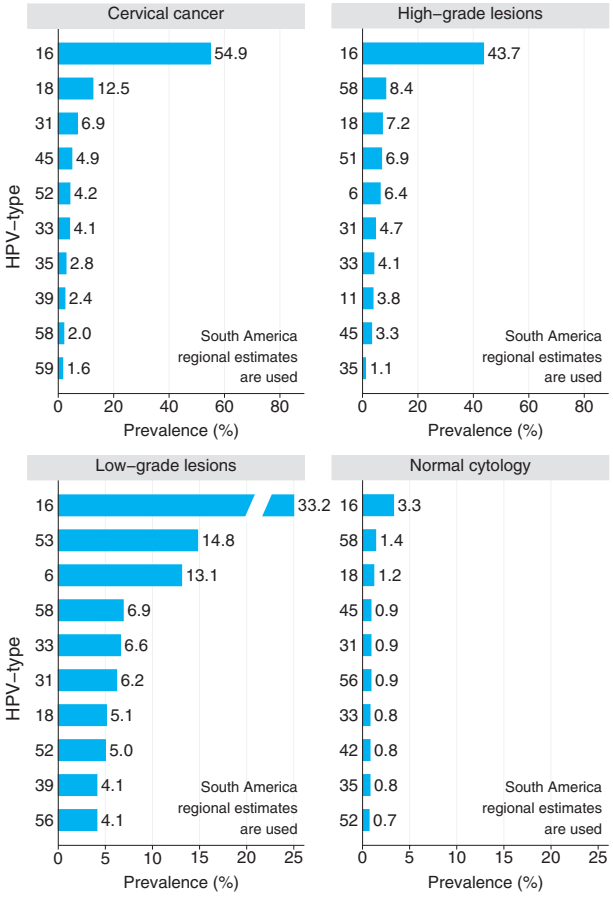



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 71 |
| Percentage of districts with >=80% DTP3 coverage | 32 |

DTP: Diphtheria, Tetanus and Pertussis

# VIET NAM

has a population of 29.95 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 6224 women are diagnosed with cervical cancer and 3334 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Viet Nam, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 5.4% of women in the general population are estimated to harbour cervical HPV infection at a given time. Data on specific HPV-16 and 18 prevalence for Viet Nam among women with invasive cervical cancer is not yet available, but in South-Eastern Asia 71.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 15.5 | 8.3 |
| Age-standardized rate | 20.2 | 11.2 |
| Cumulative risk 0-64 years (%) | 1.6 | 0.9 |
| SIR/SMR | 115 | 117 |
| Annual number of new cases/deaths | 6224 | 3334 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

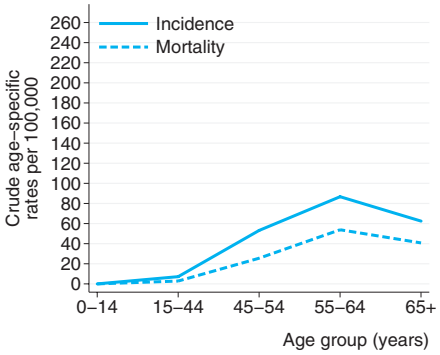



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

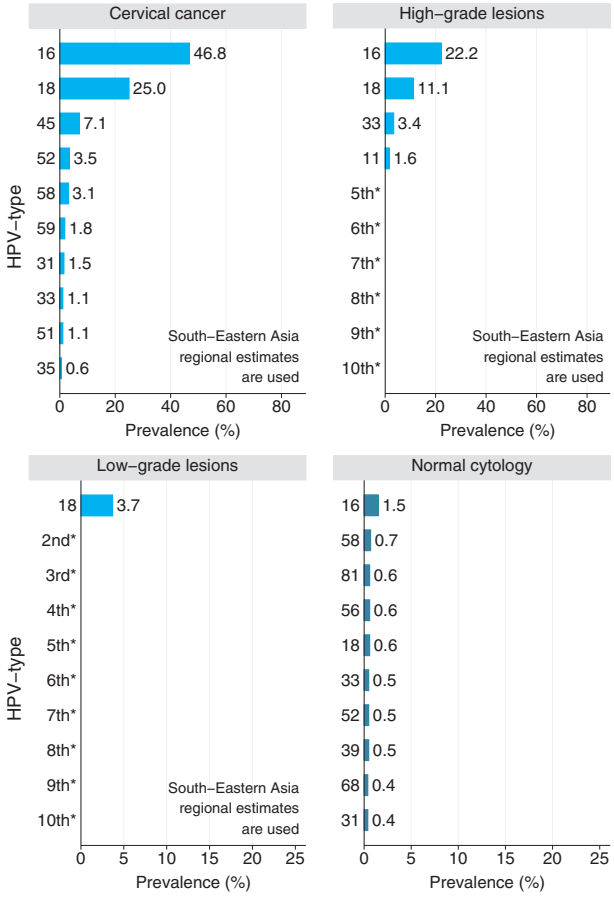
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 0.5 |
| Smoking prevalence in women (%) | 1.7 |
| Fertility rate (live births per women) | 2.7 |
| Oral Contraceptive Use (%) | 6.3 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 1897 | 5.4 (4.5-6.5) |
| Low-grade lesions† | 27 | 33.3 (16.5-54.0) |
| High-grade lesions† | 207 | 61.8 (54.8-68.5) |
| Cervical cancer: any type† | 1090 | 92.1* (90.3-93.6) |
| Cervical cancer: HPV 16/18† | 1090 | 71.8 (69.1-74.5) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†South-Eastern Asia regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 94 |
| Percentage of districts with >=80% DTP3 coverage | 98 |

DTP: Diphtheria, Tetanus and Pertussis

# YEMEN

has a population of 5.58 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 370 women are diagnosed with cervical cancer and 206 die from the disease. Cervical cancer ranks as the 3rd most frequent cancer in women in Yemen, and the 10th most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Yemen. However, in Asia Continent about 8.3% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 66.7% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 3.7 | 2.1 |
| Age-standardized rate | 8 | 4.6 |
| Cumulative risk 0-64 years (%) | 0.7 | 0.4 |
| SIR/SMR | 40 | 44 |
| Annual number of new cases/deaths | 370 | 206 |
| Ranking of cervical cancer (all ages) † | 3rd | 6th |
| Ranking of cervical cancer (15-44 years) † | 10th | 11th |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

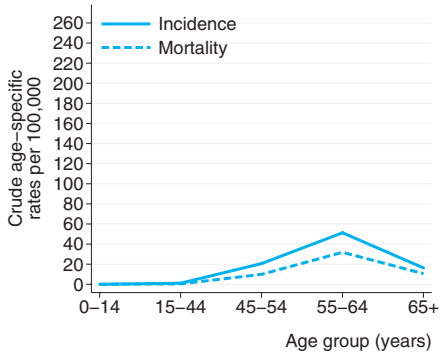



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | - |
| Smoking prevalence in women (%) | 29 |
| Fertility rate (live births per women) | 6.7 |
| Oral Contraceptive Use (%) | 3.8 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology‡ | 41125 | 8.3 (8.0-8.5) |
| Low-grade lesions‡ | 252 | 67.1 (60.9-72.8) |
| High-grade lesions‡ | 1364 | 78 (75.7-80.2) |
| Cervical cancer: any type‡ | 5652 | 85.8* (84.9-86.7) |
| Cervical cancer: HPV 16/18‡ | 5652 | 66.7 (65.4-67.9) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
‡Asia Continent regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

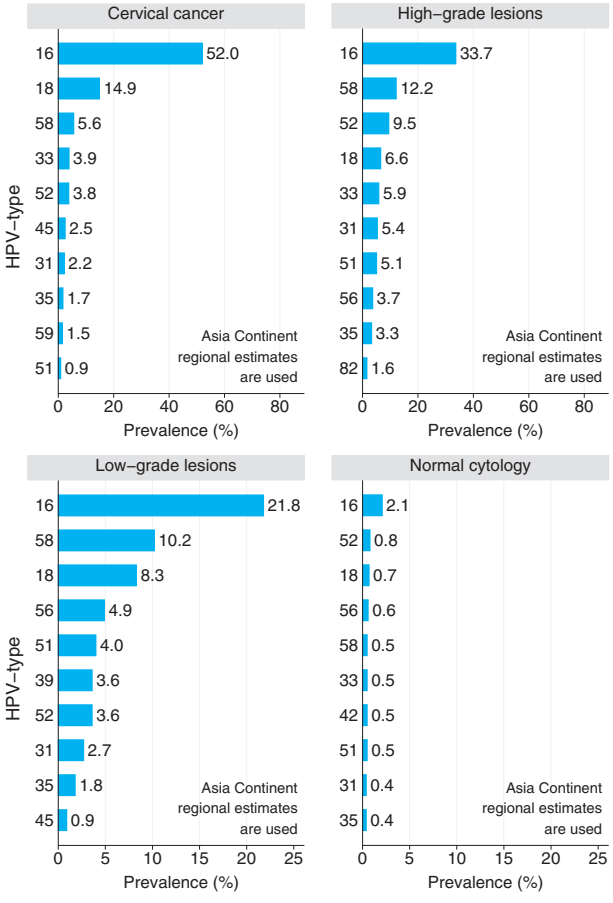
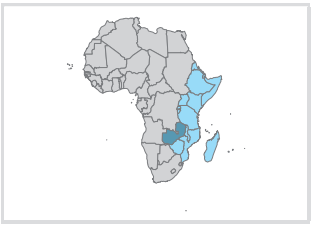



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 85 |
| Percentage of districts with >=80% DTP3 coverage | 59 |

DTP: Diphtheria, Tetanus and Pertussis

# ZAMBIA



has a population of 3.17 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1650 women are diagnosed with cervical cancer and 1340 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Zambia, and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Zambia. However, in Eastern Africa, the region Zambia belongs to, about 35.4% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 81.8% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 30.6 | 24.8 |
| Age-standardized rate | 53.7 | 44 |
| Cumulative risk 0-64 years (%) | 3.6 | 2.8 |
| SIR/SMR | 311 | 489 |
| Annual number of new cases/deaths | 1650 | 1340 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

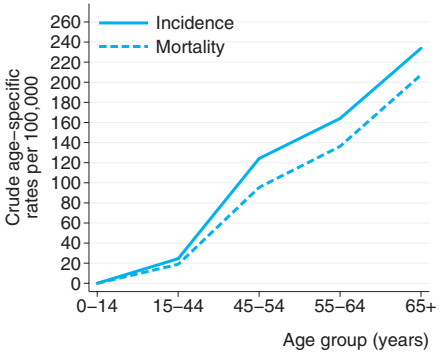



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 17.0 |
| Smoking prevalence in women (%) | 1 |
| Fertility rate (live births per women) | 5.9 |
| Oral Contraceptive Use (%) | 11.9 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology† | 2144 | 35.4 (33.4-37.5) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type† | 478 | 96.4* (94.4-97.9) |
| Cervical cancer: HPV 16/18† | 478 | 81.8 (78.0-85.2) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**

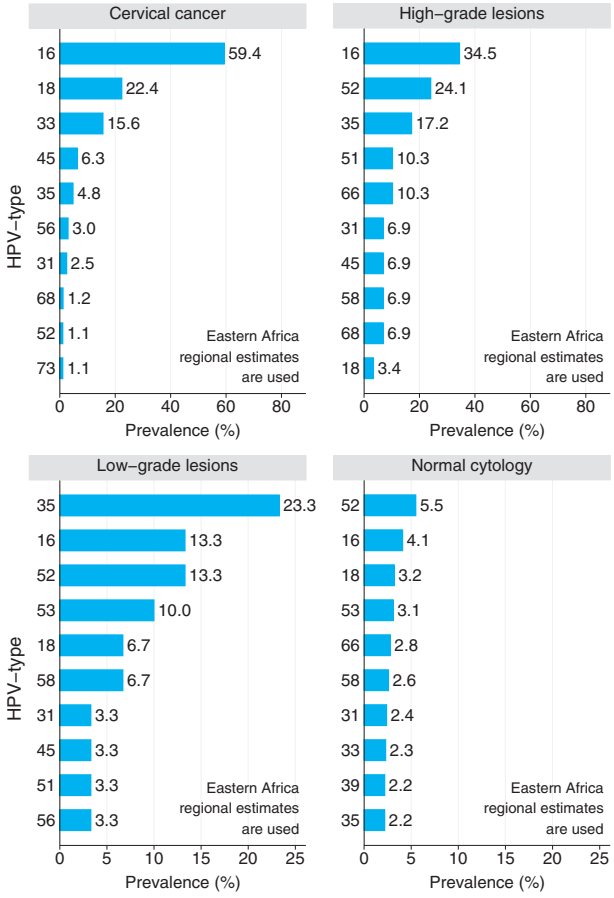
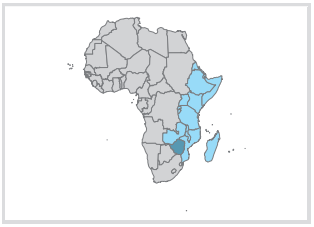



**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 80 |
| Percentage of districts with >=80% DTP3 coverage | 83 |

DTP: Diphtheria, Tetanus and Pertussis

# ZIMBABWE



has a population of 3.96 million women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 1817 women are diagnosed with cervical cancer and 1492 die from the disease. Cervical cancer ranks as the 1st most frequent cancer in women in Zimbabwe, and the 2nd most frequent cancer among women between 15 and 44 years of age. About 35.0% of women in the general population are estimated to harbour cervical HPV infection at a given time, and 79.6% of invasive cervical cancers are attributed to HPVs 16 or 18.

**Table 1. Burden of cervical cancer**

| | Incidence | Mortality |
|---|---|---|
| Crude rate | 27.9 | 22.9 |
| Age-standardized rate | 52.1 | 43.1 |
| Cumulative risk 0-64 years (%) | 3.5 | 2.8 |
| SIR/SMR | 281 | 449 |
| Annual number of new cases/deaths | 1817 | 1492 |
| Ranking of cervical cancer (all ages) † | 1st | 1st |
| Ranking of cervical cancer (15-44 years) † | 2nd | 2nd |

Rates are per 100,000 women.
SIR/SMR: Standardized Incidence/Mortality Ratio.
†Ranking among all cancers.

**Fig. 1. Age-specific incidence and mortality of cervical cancer**

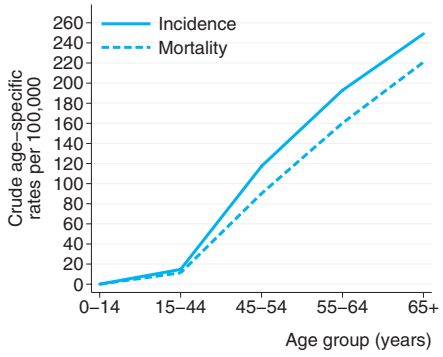



**Table 2. Cervical screening coverage**

No data available

**Table 3. Factors contributing to cervical cancer**

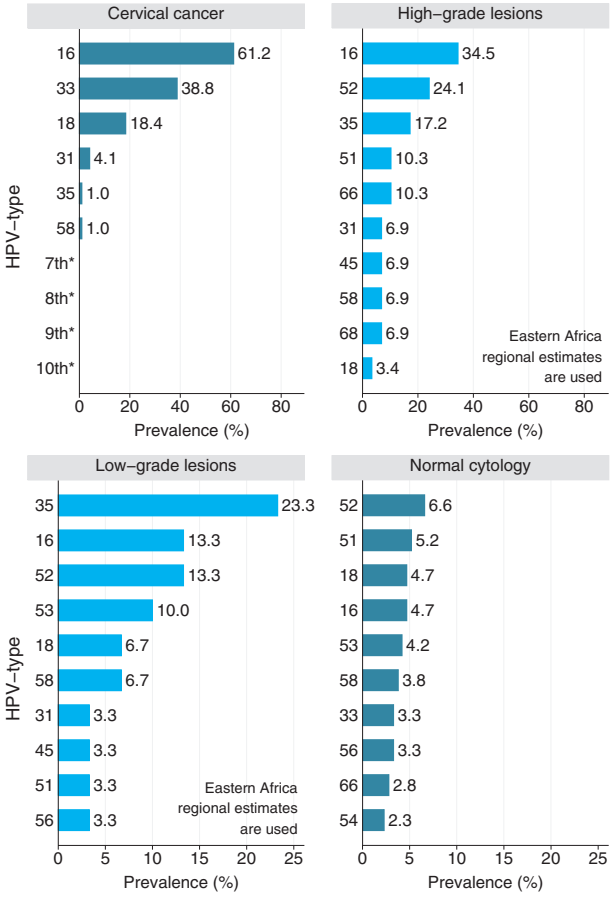
| | |
|---|---|
| HIV rate (%) in adults (15-49 years) | 20.1 |
| Smoking prevalence in women (%) | 2.2 |
| Fertility rate (live births per women) | 4.1 |
| Oral Contraceptive Use (%) | 35.5 |

**Table 4. Burden of HPV in women with and without cervical disease**

| | No. tested | HPV prevalence % (95% CI) |
|---|---|---|
| Normal cytology | 1579 | 35.0 (32.7-37.4) |
| Low-grade lesions† | 30 | 60 (40.6-77.3) |
| High-grade lesions† | 29 | 96.6 (82.2-99.9) |
| Cervical cancer: any type | 98 | 96.9* (91.3-99.4) |
| Cervical cancer: HPV 16/18 | 98 | 79.6 (70.3-87.1) |

*HPV causes virtually 100% of cases of cervical cancer. Underestimation of HPV prevalence in cervical cancer is due to the limitations of study methodologies.
†Eastern Africa regional estimate

**Fig. 2. Ten most frequent HPV types in women with and without cervical disease**




*No data available. No more types than shown were tested or were positive

**Table 5. Relevant factors for HPV vaccine introduction**

| | |
|---|---|
| Vaccination coverage (%) in 2006 of DTP (3rd dose) | 90 |
| Percentage of districts with >=80% DTP3 coverage | 74 |

DTP: Diphtheria, Tetanus and Pertussis

# SECTION III. METHODS

# Definitions and Sources

| TERMS | |
|---|---|
| **Age-standardized rate** | Definition: A summary measure of a rate that a population would have if it had a standard age structure. Standardization is necessary when comparing several populations that differ with respect to age because age has such a powerful influence on the risk of cancer. The most frequently used standard population is the World standard population. The calculated incidence or mortality rates are then called the World Standardized incidence and mortality rate. It is also expressed per 100,000.<br><br>Source: J. Ferlay, F. Bray, P. Pisani and D.M. Parkin. GLOBOCAN 2002: Cancer Incidence, Mortality and Prevalence Worldwide IARC CancerBase No. 5. version 2.0, IARCPress, Lyon, 2004 |
| **Cervical Cancer** | Definition: If the high-grade precancerous cells invade deeper tissues of the cervix or to other tissues or organs, then the disease is called invasive cervical cancer or cervical cancer.<br><br>Source: J. Ferlay, F. Bray, P. Pisani and D.M. Parkin. GLOBOCAN 2002: Cancer Incidence, Mortality and Prevalence Worldwide IARC CancerBase No. 5. version 2.0, IARCPress, Lyon, 2004 |
| **Cervical screening coverage** | Definition: The number of women who have a screening test within the recommended interval as a proportion of all women who are eligible to attend for screening.<br><br>Source: IARC Handbooks of Cancer Prevention Vol. 10: Cervix Cancer Screening. IARC Press. Lyon, 2005. |
| **Crude rate** | Definition: Crude rate is calculated simply by dividing the number of new cancers or number of new cancer deaths observed during a given time period by the corresponding number of people in the population at risk. The result is usually expressed as an annual rate per 100,000 persons at risk.<br><br>Source: J. Ferlay, F. Bray, P. Pisani and D.M. Parkin. GLOBOCAN 2002: Cancer Incidence, Mortality and Prevalence Worldwide IARC CancerBase No. 5. version 2.0, IARCPress, Lyon, 2004 |
| **Cumulative risk (%)** | Definition: The probability or risk of individuals getting the disease during a specified period. For cancer, it is expressed as the number of new born children (out of 100, or 1000) who would be expected to develop a particular cancer before the age of 65 (or 70, or 75) if they had the rates of cancer currently observed. Like the age standardized rate, it permits comparisons between populations of different age structures.<br><br>Source: J. Ferlay, F. Bray, P. Pisani and D.M. Parkin. GLOBOCAN 2002: Cancer Incidence, Mortality and Prevalence Worldwide IARC CancerBase No. 5. version 2.0, IARCPress, Lyon, 2004 |
| **DTP3 Vaccination coverage** | Definition: The estimate of the number of people who have received the diphtheria, tetanus, and pertusssis (DTP 3rd dose) vaccine.<br><br>Source: WHO Immunization surveillance, assessment and monitoring.<br>www.who.int/immunization_monitoring/routine/immunization_coverage/en/index4.html |

| TERMS | |
|---|---|
| **Fertility rate** | Definition: The number of children that would be born per woman, assuming no female mortality at childbearing ages and the age-specific fertility rates of a specified country and reference period.<br><br>Source: World Fertility Patterns, 2004; World Population Prospects: The 2004 Revision. Population database. Population Division, Department of Economic and Social Affairs, United Nations Secretariat. http://esa.un.org/unpp |
| **High-grade lesions** | Definition: High-grade cervical lesions are defined by a large number of precancerous cells on the surface of the cervix that are distinctly different from normal cells. They have the potential to become cancerous cells and invade deeper tissues of the cervix. These lesions may be referred to as moderate or severe dysplasia, high-grade squamous intraepithelial lesions (HSIL), cervical intraepithelial neoplasia grade 2 or 3 (CIN-2 or CIN-3), or cervical carcinoma in situ (CIS). |
| **HIV rate (%) in adults (15-49 years)** | Definition: The percentage of adults aged 15-49 years living with HIV in 2005.<br><br>Source: 2006 Report on the global AIDS epidemic, UNAIDS/WHO, May 2006. |
| **HPV 16/18 prevalence in cervical cancer** | Definition: The proportion of subjects that tested positive for HPV 16 and/or 18 among women who were tested for HPV DNA in cervical cancer cases. This describes the proportion of cervical cancer cases that could potentially be prevented by current HPV vaccines.<br><br>Source: See Section III.Methods for estimating HPV prevalence. |
| **HPV prevalence** | Definition: The proportion of subjects who tested HPV-positive according to an HPV DNA test. HPV prevalence is computed among different pre-defined groups such as women with normal cytology, women with low-grade lesions, women with high-grade lesions, or women with invasive cervical cancer.<br><br>Source: See Section III.Methods for estimating HPV prevalence. |
| **HPV-type prevalence** | Definition: The proportion of subjects that tested positive for a specific HPV genotype among women who were tested for HPV DNA. HPV-type prevalence is computed among different pre-defined groups such as women with normal cytology, women with low-grade lesions, women with high-grade lesions, or women with invasive cervical cancer.<br><br>Source: See Section III.Methods for estimating HPV prevalence. |
| **Incidence** | Definition: Incidence is the number of new cases arising in a given period in a specified population. This information is collected routinely by cancer registries. It can be expressed as an absolute number of cases per year or as a rate per 100,000 persons per year. The latter provides an approximation to the average risk of developing a cancer.<br><br>Source: J. Ferlay, F. Bray, P. Pisani and D.M. Parkin. GLOBOCAN 2002: Cancer Incidence, Mortality and Prevalence Worldwide IARC CancerBase No. 5. version 2.0, IARCPress, Lyon, 2004 |
| **Low-grade lesions** | Definition: Low-grade cervical lesions are defined by early changes in size, shape, and number of abnormal cells formed on the surface of the cervix and may be referred to as mild dysplasia, low-grade squamous intraepithelial lesions (LSIL), or cervical intraepithelial neoplasia grade 1 (CIN-1). |
| **Mortality** | Definition: Mortality is the number of deaths occurring in a given period in a specified population. It can be expressed as an absolute number of deaths per year or as a rate per 100,000 persons per year.<br><br>Source: J. Ferlay, F. Bray, P. Pisani and D.M. Parkin. GLOBOCAN 2002: Cancer Incidence, Mortality and Prevalence Worldwide IARC CancerBase No. 5. version 2.0, IARCPress, Lyon, 2004 |

| TERMS | |
|---|---|
| **Normal cytology** | Definition: No abnormal cells are observed on the surface of their cervix upon cytology.<br><br>Source: IARC Handbooks of Cancer Prevention Vol. 10: Cervix Cancer Screening. IARC Press. Lyon, 2005. |
| **Oral Contraceptive Use** | Definition: Proportion of women using oral contraceptives, also known as the pill, among those of reproductive age (15-49 years) who are married or in union.<br><br>Source: United Nations, Department of Economic and Social Affairs, Population Division. World Contraceptive Use 2005.<br>http://www.un.org/esa/population/publications/contraceptive2005/WCU2005.htm |
| **Percentage of districts >=80% DTP3 coverage** | Definition: The estimate of the number of districts in a country who have achieved 80% coverage of diphtheria, tetanus, and pertusssis (DTP 3rd dose) vaccine.<br><br>Source: WHO Immunization surveillance, assessment and monitoring.<br>www.who.int/immunization_monitoring/routine/immunization_coverage/en/index4.html |
| **Population** | Definition: The collection of people living in a given geographic area.<br><br>Source: UnitedNations, Population Division. World Population Prospects - the 2004 revision. NewYork,2005. |
| **Ranking of cervical cancer** | Definition: Cervical cancer is ranked in comparison to other cancers in women in each country according to the highest crude rates of incidence and mortality (ie. 1st ranking the highest) |
| **Smoking prevalence in women (%)** | Definition: The percentage of women who smoke cigarettes. The age range varies among countries, but in most is 18 and above or 15 and above.<br><br>Source: The most recent data available are presented. World Bank's Health, Nutrition and Population data. http://devdata.worldbank.org/hnpstats |
| **Standardized Incidence Ratio** | Definition: The ratio of the observed to the expected new cases of cancer; the expected number is based on the age-specific rates for the country.<br><br>Source: J. Ferlay, F. Bray, P. Pisani and D.M. Parkin. GLOBOCAN 2002: Cancer Incidence, Mortality and Prevalence Worldwide IARC CancerBase No. 5. version 2.0, IARCPress, Lyon, 2004 |

For full details of all indicator methodologies, refer to:
http://www.who.int/hpvcentre/statistics/dynamic/ico/methodologies.pdf

# Methods for estimating HPV prevalence

Data were gathered from specific databases created at the Institut Català d´Oncologia (for cytologically normal women) and the International Agency for Research on Cancer (for women with LSIL, HSIL and cervical cancer).

Systematic collection of published literature from peer-reviewed journals is stored in these databases. Data correspond to results from the following five reference papers as well as updated results from continuous monitoring of the literature by the HPV Information Centre:

**Cytologically normal women**

De Sanjosé S, Diaz M, Castellsagué X, Clifford G, Bruni L, Muñoz N, Bosch FX. Worldwide prevalence and genotype distribution of cervical human papillomavirus DNA in women with normal cytology: a meta-analysis. Lancet Infect Dis. 2007 July;7:453-59.

**Women with low-grade cervical lesions**

Clifford GM, Rana RK, Franceschi S, Smith JS, Gough G, Pimenta JM. Human papillomavirus genotype distribution in low-grade cervical lesions: comparison by geographic region and with cervical cancer. Cancer Epidemiol Biomarkers Prev. 2005 May;14(5):1157-64.

**Women with high-grade cervical lesions and Invasive Cervical Cancer**

Clifford GM, Smith JS, Plummer M, Munoz N, Franceschi S. Human papillomavirus types in invasive cervical cancer worldwide: a meta-analysis. Br J Cancer. 2003 Jan 13;88(1):63-73.

Clifford GM, Smith JS, Aguado T, Franceschi S. Comparison of HPV type distribution in high-grade cervical lesions and cervical cancer: a meta-analysis. Br J Cancer. 2003 Jul 7;89(1):101-5.

Smith JS, Lindsay L, Hoots B, Keys J, Franceschi S, Winer R, Clifford GM. Human papillomavirus type distribution in invasive cervical cancer and high- grade cervical lesions: A meta-analysis update. Int J Cancer. 2007 Aug 1;121(3):621-32.

**Methods of estimation**

HPV prevalence estimates were calculated according to meta-analysis methods as described in the above papers.

For cytologically normal women, only crude prevalence is presented in the HPV Information Centre, which differs from the estimates presented in the publication.
Estimates were calculated by means of the ratio between HPV positives and the population tested.

**Disaggregation**

Data are presented by diagnostic groups: women with invasive cervical cancer, women with high-grade cervical lesions, women with low-grade cervical lesions, and cytologically normal women.

**Comments**

According to the population studied, the sample method for HPV detection varies for normal cytology, cervical lesions, and cervical cancer. Specimens came from fresh or fixed biopsies or exfoliated cells.

The relative frequency of HPV-16/18 increases with the severity of the lesion. Worldwide, HPV 16 and 18 contribute to over 70% of all cervical cancer cases, between 41 and 67% of high-grade cervical lesions and 16-32% of low-grade cervical lesions. After HPV-16/18, the six most common HPV types are the same in all world regions, namely 31, 33, 35, 45, 52 and 58; these account for an additional 20% of cervical cancers worldwide (Clifford G et al. Vaccine 2006;24(S3):26).
In the field of benign medical conditions, HPV is also responsible for genital warts, mainly produced by infection with HPV 6 and/or 11.

Because of the limitations of the HPV DNA detection techniques and study designs used, these data should be interpreted cautiously and used only as a guidance to assess the burden of HPV infection in the population.

In the figures ranking the ten most frequent HPV types, there may be more than one HPV type with the same prevalence ranking as the 10th. However, only one HPV type is shown. For full HPV type-distribution, refer to country-specific summary reports at: http://www.who.int/hpvcentre/statistics/dynamic/ico/SummaryReportsSelect.cfm.

The combined prevalence of HPV 16 or 18 in women with cervical cancer is estimated adding the individual estimates. This may represent an overestimation due to co-infections with HPV 16 and 18.

## References of studies included in the meta-analyses

| Region/Country | | Reference | ❶ | ❷ | ❸ | ❹ |
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| Africa Continent | | | | | | |
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| | Kenya | De Vuyst H, Sex Transm Dis 2003; 30: 137 | ❶ | ❷ | ❸ | |
| | Mozambique | Castellsague X, Lancet 2001; 358: 1429 | ❶ | | | |
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| | Tanzania | Bosch FX, J Natl Cancer Inst 1995; 87: 796 | | | | ❹ |
| | | ter Meulen J, Int J Cancer 1992; 51: 515 | | | | ❹ |
| | Uganda | Bosch FX, J Natl Cancer Inst 1995; 87: 796 | | | | ❹ |
| | Zimbabwe | Gravitt PE, Int J Cancer 2002; 100: 729 | ❶ | | | |
| | | Stanczuk GA, Acta Obstet Gynecol Scand 2003; 82: 762 | | | | ❹ |
| | | Womack SD, BJOG 2000; 107: 33 | ❶ | | | |
| Northern Africa | Algeria | Bosch FX, J Natl Cancer Inst 1995; 87: 796 | | | | ❹ |
| | | Hammouda D, Int J Cancer 2005; 113: 483 | ❶ | | | ❹ |
| | Morocco | Chaouki N, Int J Cancer 1998; 75: 546 | ❶ | | | ❹ |
| Southern Africa | South Africa | Kay P, J Med Virol 2003; 71: 265 | | | ❸ | ❹ |
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| Western Africa | Benin | Bosch FX, J Natl Cancer Inst 1995; 87: 796 | | | | ❹ |
| | Côte d'Ivoire | La Ruche G, Int J Cancer 1998; 76: 480 | | ❷ | ❸ | |
| | Guinea | Bosch FX, J Natl Cancer Inst 1995; 87: 796 | | | | ❹ |
| | Mali | Bayo S, Int J Epidemiol 2002; 31: 202 | | | | ❹ |
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| | Senegal | Astori G, Intervirology 1999; 42: 221 | ❶ | | | |
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| | | Xi LF, Int J Cancer 2003; 103: 803 | ❶ | ❷ | ❸ | ❹ |

❶Normal cytology ❷Low-grade lesions ❸High-grade lesions ❹Cervical cancer

## References of studies included in the meta-analyses (continued)

| Region/Country | | Reference | ❶ | ❷ | ❸ | ❹ |
|---|---|---|---|---|---|---|
| Americas Continent | | | | | | |
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| | Jamaica | Rattray C, J Infect Dis 1996; 173: 718 | | ❷ | ❸ | |
| | | Strickler HD, J Med Virol 1999; 59: 60 | | ❷ | | |
| Central America | Costa Rica | Herrero R, J Infect Dis 2005; 191: 1796 | | | ❸ | ❹ |
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| | Honduras | Ferrera A, Int J Cancer 1999; 82: 799 | ❶ | ❷ | ❸ | ❹ |
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❶Normal cytology ❷Low-grade lesions ❸High-grade lesions ❹Cervical cancer

## References of studies included in the meta-analyses (continued)

| Region/Country | | Reference | ❶ | ❷ | ❸ | ❹ |
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[1] Kalina WV, Woolums AR, Berghaus RD, Gershwin LJ. Formalin-inactivated bovine RSV vaccine enhances a Th2 mediated immune response in infected cattle. Vaccine 2004; 22 (11-12); 1465-74.

[2] Rosner B. Fundamentals of biostatistics. 5th ed. Pacific Grove: Duxbury Press; 2000.

[3] Katz JM, Lu X, Galphin JC, Clements, JD. Heat-labile enterotoxin from Escherichia coli as an adjuvant for oral influenza vaccination. In: Brown LE, Hampson AW Webster RG, editors. Options for the control of influenza III. New York: Elsevier; 1996. p. 292-97.

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