

Developing a New Frontier for Cervical Cancer Treatment in Botswana

TogetHER Webinar Series

4th February 2021



Background – Botswana and Cervical Cancer

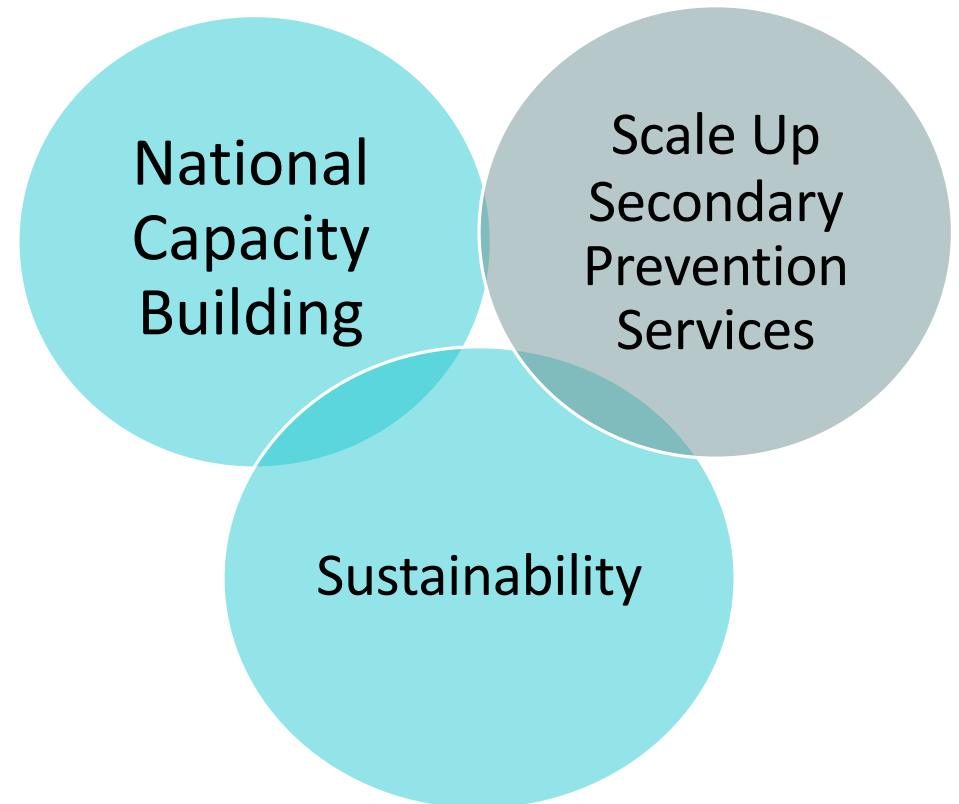
- Population of around 2.2M
- Adult female HIV prevalence 27.4%
- Cervical Cancer leading cause of cancer-related deaths among women
- National HPV vaccination roll out
- Current screening and Treatment Options Available
 - › PAP smear
 - › Scaled up VIA
 - › Introduced HPV Testing
 - › Cryotherapy
 - › LEEP
 - › Introduced Thermal Ablation

HIV/HPV Co-infection among adult (30-49yrs) women in Kweneng East, 2017 - 2018

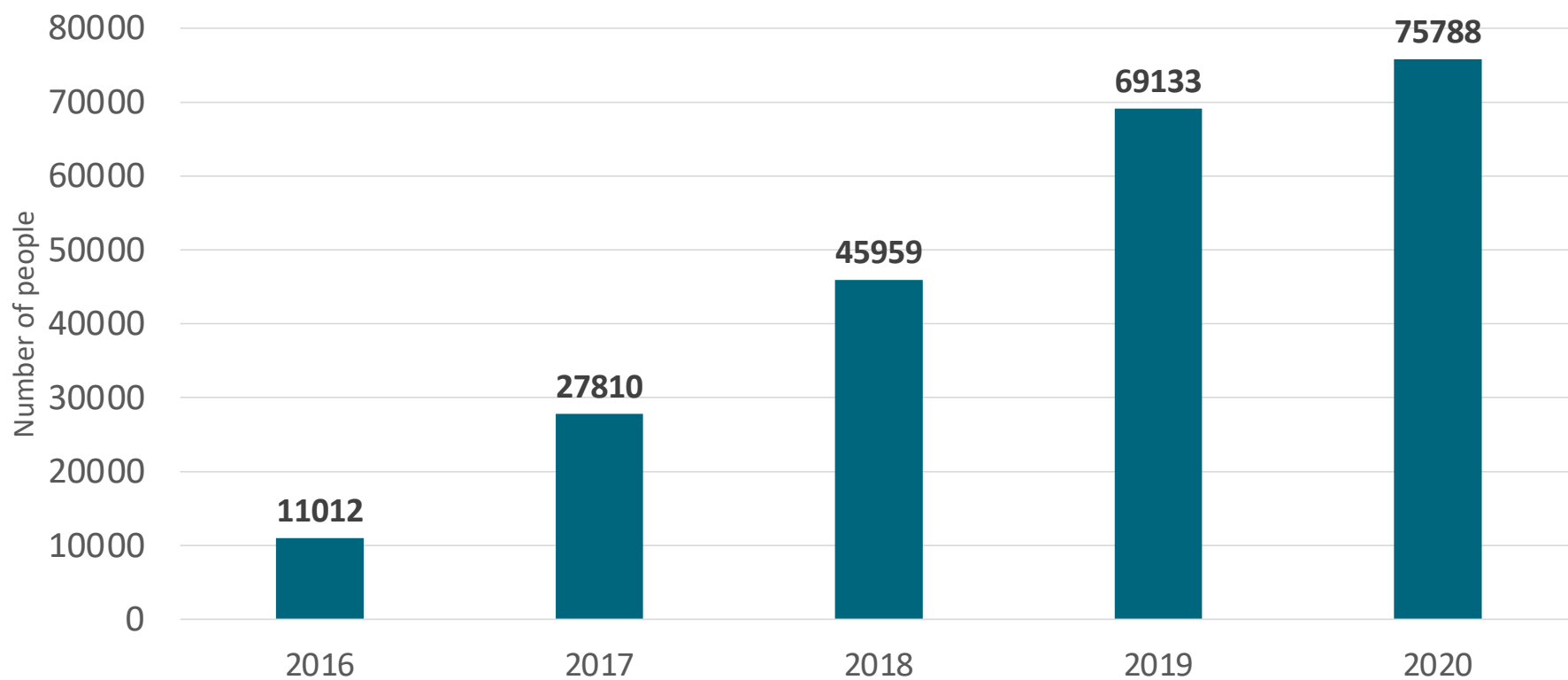
	HPV +		HPV -		Total
HIV +	230	40.4%	340	59.6%	570
HIV -	113	25.2%	336	74.8%	449
Total	343	33.7%	676	66.3%	1019

Program Overview

- **2015-2020:** Scale up of Secondary Prevention Services (screening with VIA, and treatment with Cryotherapy & LEEP)
- **2015-2020:** Training of service providers and training of trainers (TOTs)
- **2015-2020:** Development of M & E framework, data collection and reporting tools.
- **2017-2018:** HPV testing acceptability and feasibility study.
- **2018-2019:** Introduction and scale up of HPV testing
- **2019-2020:** Introduction of Thermal Ablation



Number of women screened for cervical cancer for the first time in Botswana, 2016 – 2020



Service interruptions

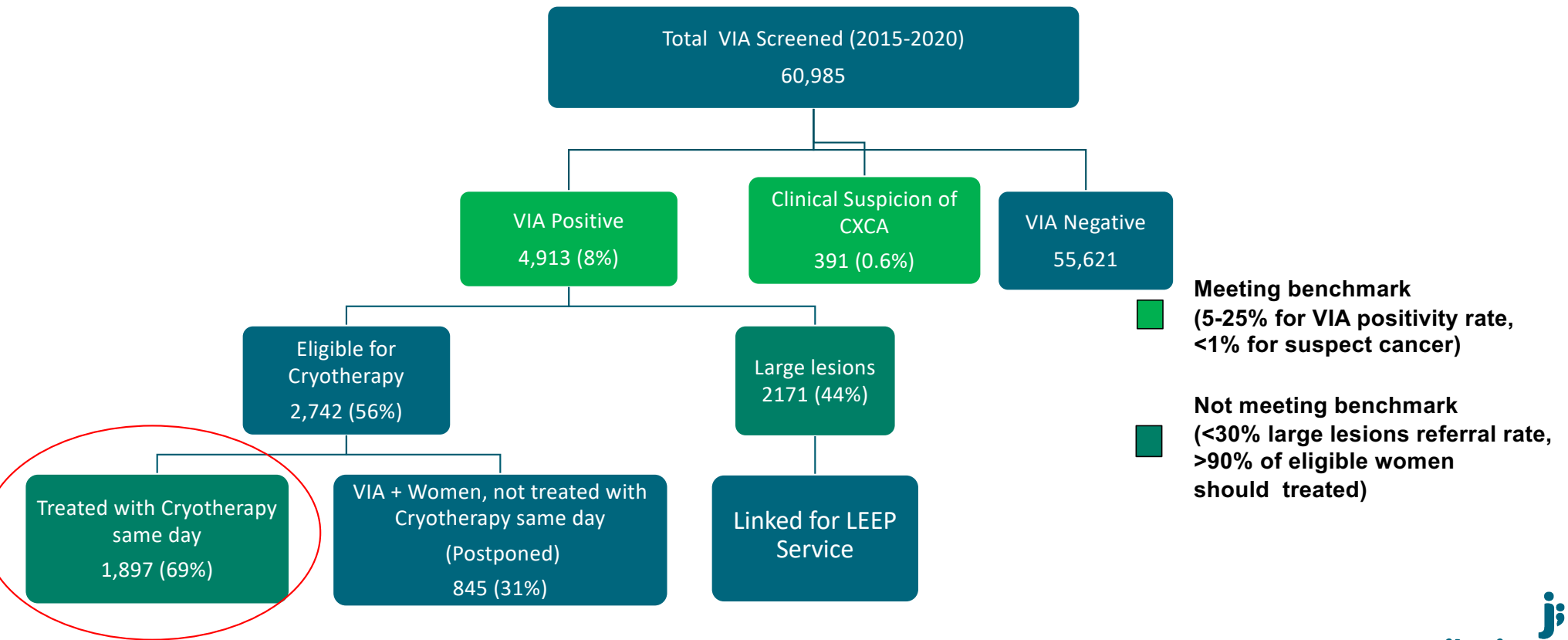
Challenges Cryotherapy treatment

- › Frequent breakdown of cryo machines
- › Bulky nitrous gas cylinder -unable to carry it to mobile services
- › Low treatment rate

Challenges with single visit approach (same day treatment)

Solution: Introduce thermal ablation to improve access to screening and treatment

Program recorded low same-day treatment rate, 2015-2020



ABLATIVE TREATMENT

Cryotherapy

- Freezing process that destroys cervical precancerous tissue



Thermal Ablation

- Heating process that destroys cervical precancerous tissue



Introducing Thermal Ablation in the Botswana National Cervical Cancer Prevention program



Journey to Adoption and Use in Botswana



Including the use of thermal ablation in NCCPP Strategy

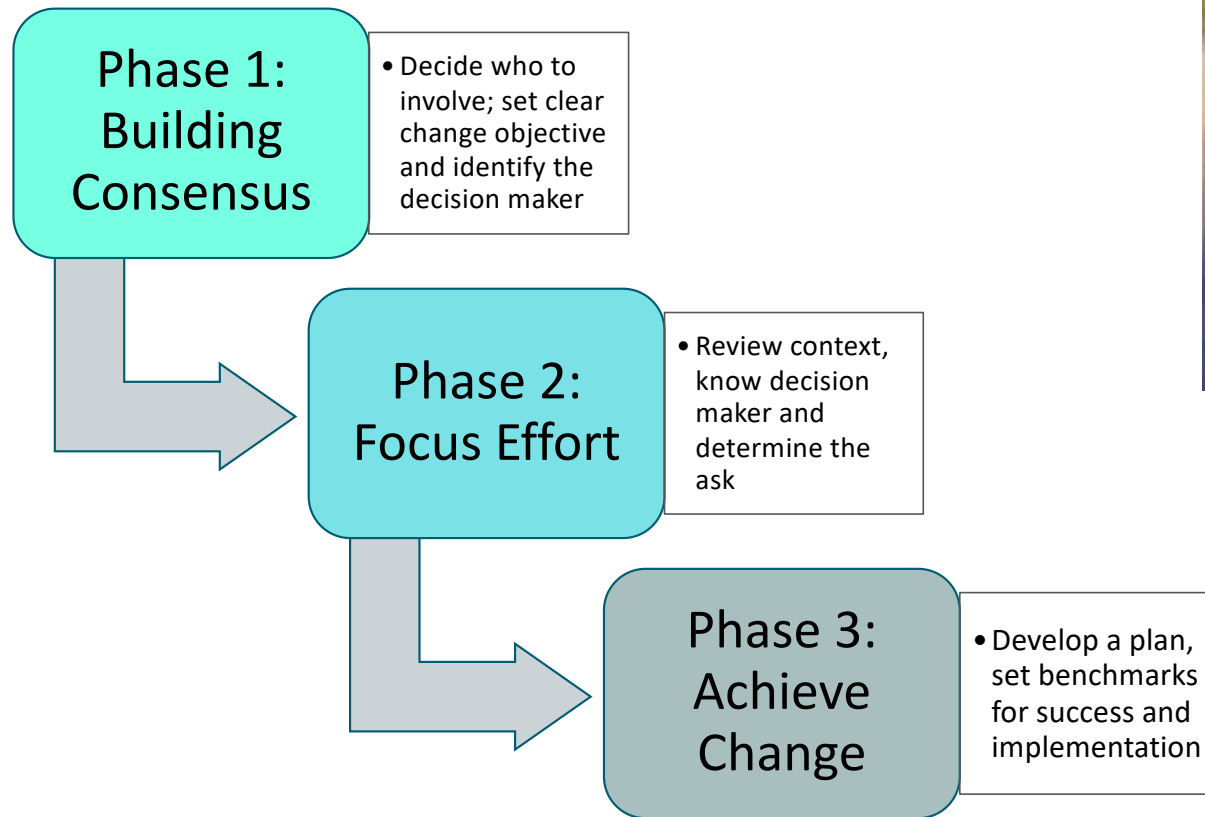
Engagement from TogetHER for Health for thermal ablation introduction funding

Reconsideration and re-engagement with key stakeholders referencing the new WHO Guidelines

Introducing and training of providers to perform the thermal ablation procedure

Facility level mentorship

SMART Advocacy Approach



Engaged, Focused & Trusted

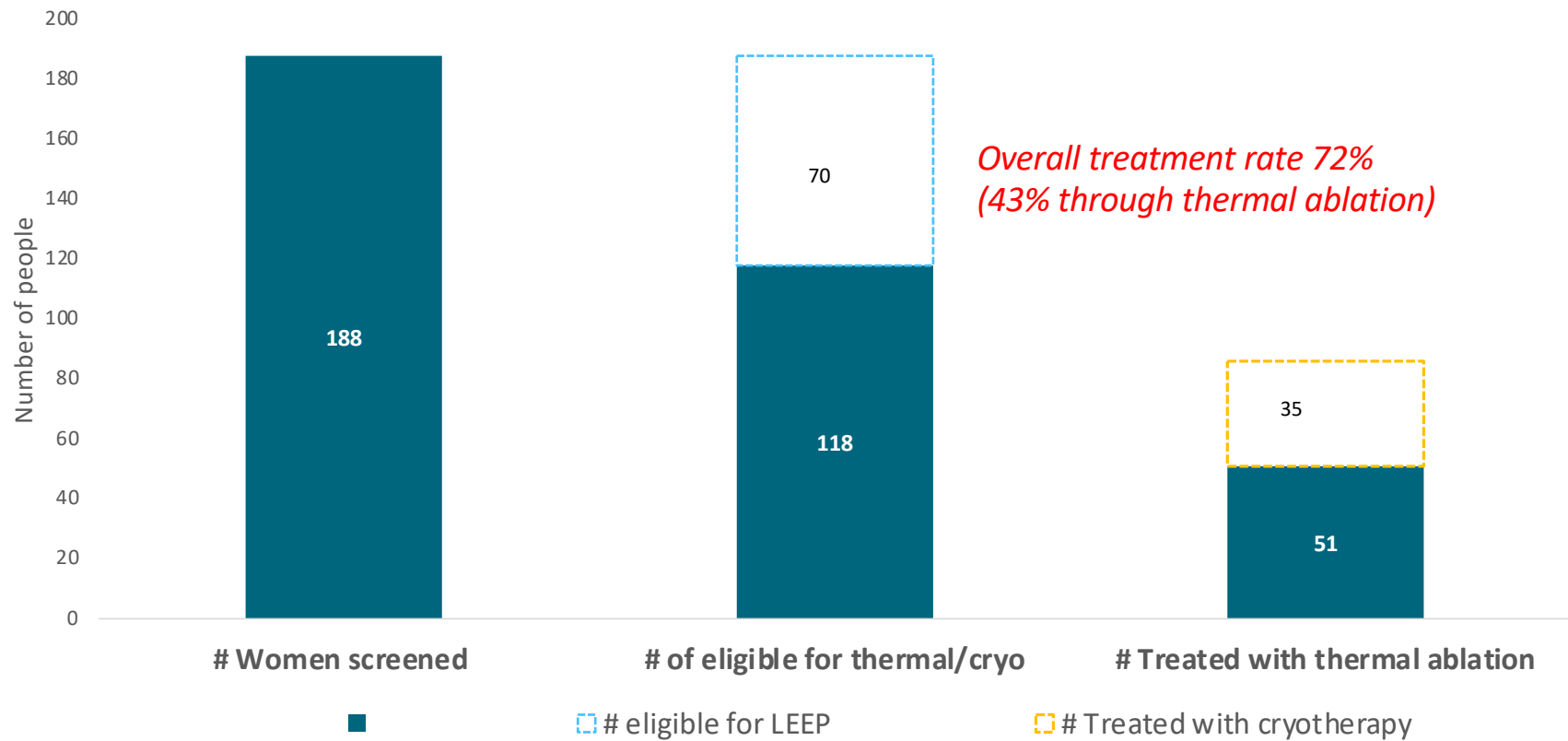
Key Outcomes of Advocacy



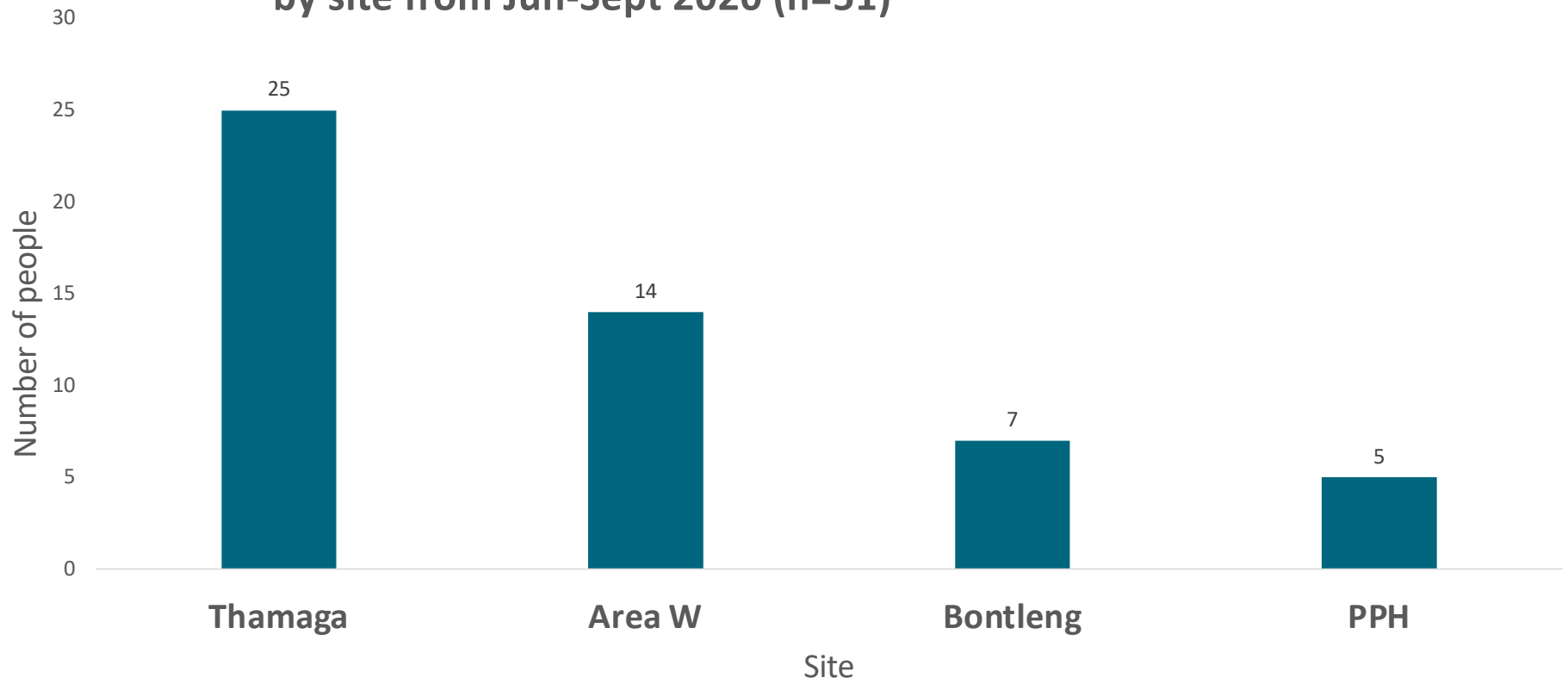
- › NCCPP has adopted thermal ablation
- › Updated national guidelines, data collection and reporting tools to include thermal ablation
- › Service provision at the 4 roll out sites
- › CDC Buy-in: Procurement of 39 machines
- › Distributed machines to additional sites

Screening and Treatment in the four selected facilities

Number of Women screened positive for cervical precancer lesions and treated with thermal ablation, Jun- Sept 2020



**Number of people treated with thermal ablation
by site from Jun-Sept 2020 (n=51)**



Takeaways

Successes

- Leadership by an influential person, NCCPP Program Coordinator, as messenger and champion
- On-site training
 - › 2-day training
 - › At most 4 people at site; in line with COVID-19 guidelines
- Positive feedback from providers & clients
 - › Need for continued equipment performance monitoring beyond project
- Small grant played a catalytic role
 - › Host meetings
 - › Procured four additional thermal ablation machines
 - › Support training and mentoring providers

Challenges

- Delays in procurement of thermal ablation machines
- COVID-19 pandemic
 - › Fewer clients
 - › Modified activities to complete the deliverables

Thank You



REPUBLIC OF BOTSWANA

MINISTRY OF HEALTH AND WELLNESS



PEPFAR

15

U.S. President's Emergency Plan for AIDS Relief

