RISCC

risk-based screening for cervical cancer

RISCC is a multidisciplinary consortium of key researchers in Human Papillomavirus (HPV) and cervical cancer prevention.

HPV

CERVICAL CANCER

SCREENING

risk-based screening for cervical cancer

BACKGROUND and RATIONALE

Cervical cancer can be prevented by restraining acquisition of HPV infections (prophylactic vaccination) or by detecting cervical precancerous lesions (screening).

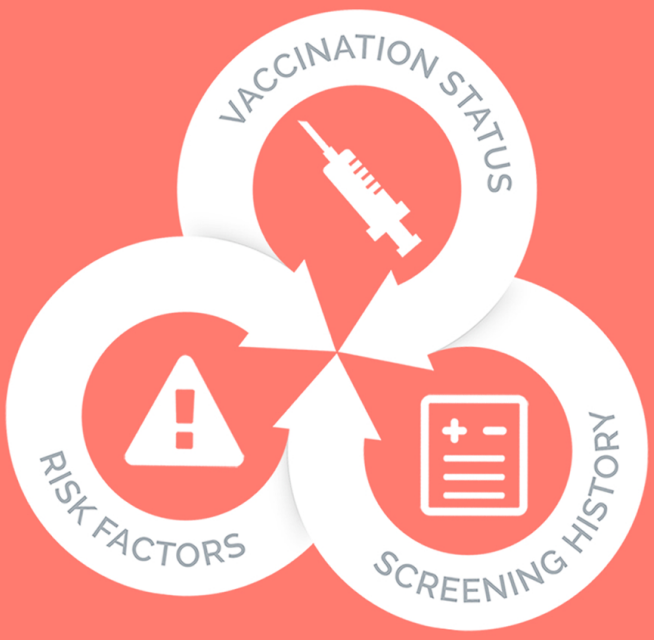
Screening has substantially reduced cervical cancer incidence and mortality rates in the past but rates have currently reached a plateau or are even increasing in nordic European countries.

Risk-based screening for cervical cancer can thoroughly improve current cervical cancer screening programs applying personalised follow-up based on each woman individual risk:

PROJECT OBJECTIVES

To develop and evaluate the first risk-based screening program for cervical cancer in Europe.

To provide open-source tools to facilitate its implementation.



Prioritizing an expedite diagnosis and treatment of women at higher risk (reduced burden by means of a more effective screening).

Avoiding unnecessary tests for women at lower risk (reduced distress in women with positive results and reduced costs by improving the program efficiency).

This project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 847845.

ORGANIZATION and METHODOLOGY

We are organised in 7 workpackages:

WP1 comprises the overall daily coordination of the project.

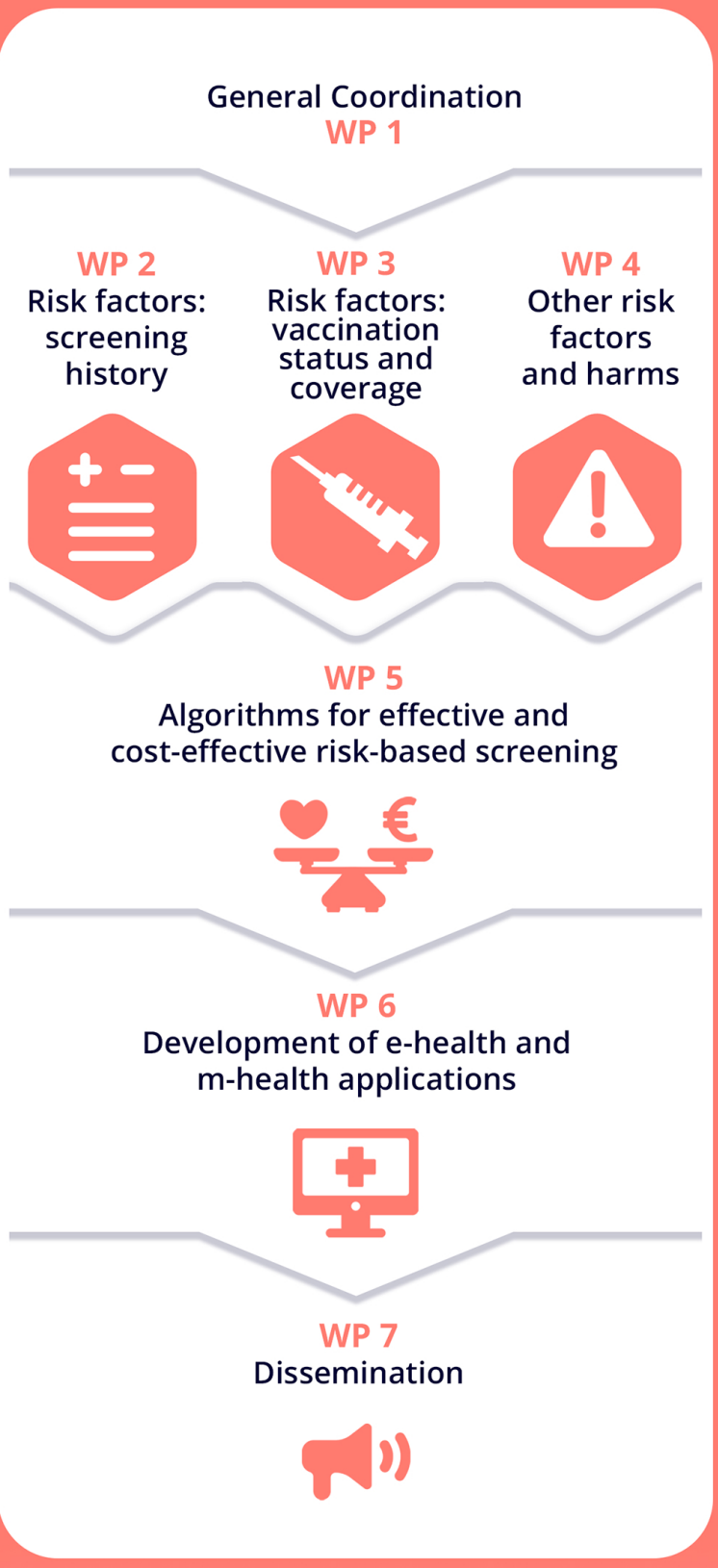
WP2 focuses on the impact of previous screening results and molecular markers in screening of unvaccinated women. Using prospective data from trials on HPV screening and self-collected samples as well as data from screening registries the risk of cervical neoplasia will be estimated.

WP3 focuses on the impact of HPV vaccination in screening. It will use a large randomised trial in Finland to estimate the impact of the screening frequency in the risk of cervical neoplasia in vaccinated women as well as the herd effects of vaccination in unvaccinated women.

As part of WP4 meta-analyses to estimate the risk associated to risk factors of HPV infection progression, such as smoking and use of oral contraceptive, are conducted.

WP5 will provide personalised screening recommendations by conducting cost-effectiveness analyses on health gains, screening-related harms and costs.

WP6 generates a free electronic/mobile platform to automatically estimate the individual risk and deliver invitations based on the recommended screening strategy to be used. The platform will be tested in a pilot demonstration project.



WP7 comprises the dissemination and communication of the project. It will also develop a free online training course for healthcare professional and technicians to facilitate implementation of risk-based screening in Europe.

For more information about the project,visit our website:

www.riscc-h2020.eu