



**24<sup>th</sup> European Congress  
on Gynaecological Oncology**  
Sep 28 – Oct 1, 2023 | Istanbul, Türkiye

# HPV PREVENTION POLICY ATLAS

Joint project by EPF and ECO

September  
2023

[congress.esgo.org](https://congress.esgo.org)

## Declaration of interests

MSD supported independent research conducted by EPF with a group of Experts.

## About EPF



*Bringing together Parliamentarians committed to protecting the sexual and reproductive health and rights of the world's most vulnerable.*

EPF is a network of members of parliaments from across Europe who are committed to protecting the sexual and reproductive health of the world's most vulnerable people, both at home and overseas.



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# EPF Membership And Leadership



## 30 All Party Parliamentary Groups throughout Europe



## Executive Committee

- Hon. Petra Bayr, MP (Austria), EPF President
- Hon. Bojan Glavasevic, MP (Croatia), Vice President
- Hon. Lina Lopes, MP (Portugal), Treasurer
- Hon. Morgana Daniele, MP (Lithuania)
- Sen Alice Mary Higgins (Ireland)
- Hon. Saara Hyrkko, MP (Finland)
- Hon. Goedele Liekens, MP (Belgium)
- Hon. Predrag Fred Matic (MEP)
- Hon. Lia Quartapelle, MP (Italy)
- Hon. Joanna Scheuring Wielgus, MP (Poland)

# The Role Of Parliamentarians



**Parliamentarians are uniquely positioned to influence the shape & content of their countries' public health agendas:**

- Make the voice of affected citizens heard
- Lead the development of legislation & policies
- Monitor implementation
- Define the fiscal and budgetary regimes

## Health Statistics



Each year in the WHO European Region  
**more than 66.000 women**  
are newly diagnosed with cervical cancer and  
**more than 30.000 women** die  
when we have the technical, medical and policy tools  
to eliminate cervical cancer.

## What Is The Policy Atlas? (1)



- The HPV Prevention Policy Atlas is a **comparative map that scores** 47 countries across geographical Europe on prevention policies of cervical cancer.
- The Atlas focuses on:
  1. **Primary prevention** of HPV related cancers through HPV vaccination;
  2. **Secondary prevention** of HPV related cancer through screening programs;
  3. **Online information** on HPV, cervical cancer and accessing vaccination.

## What Is The Policy Atlas? (2)



- The Atlas does **not reflect the prevalence rate** of HPV related cancers such as cervical cancer in the countries.
- With 10 criteria and 19 sub-criteria established by a respected multi-stakeholder group of experts in cervical cancer and oncology, it ultimately aims to provide **a living document** which introduces a common baseline on prevention policies for HPV related cancer in Europe.
- 2023 Atlas adds **7 new criteria** to the Atlas and includes scoring the VCR rates for boys and girls.

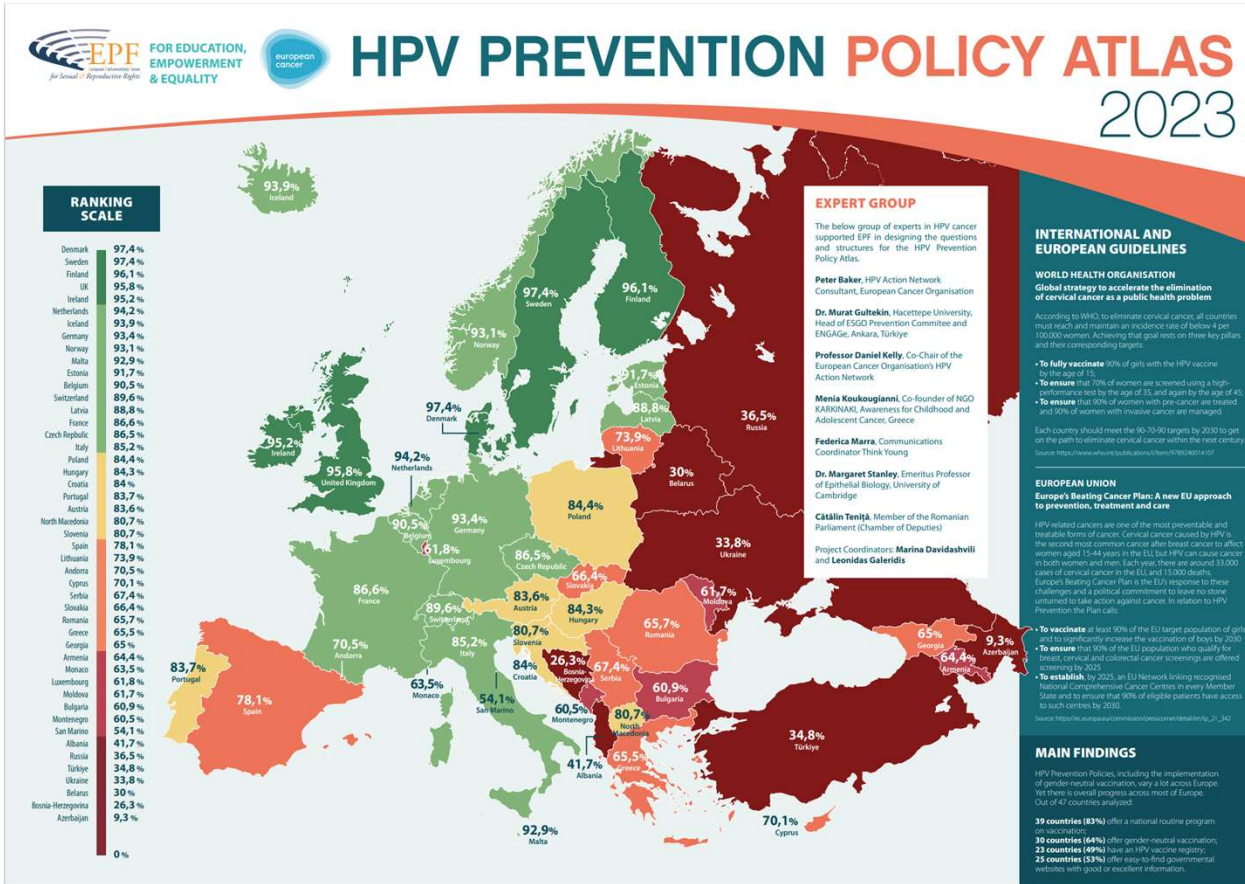


## The Atlas Experts Group



- **Dr. Margaret Stanley**, Emeritus Professor of Epithelial Biology, University of Cambridge
- **Dr. Murat Gultekin**, Hacettepe University, Head of ESGO Prevention Committee and ENGAGE, Ankara, Türkiye
- **Cătălin Teniță**, Member of the Romanian Parliament (Chamber of Deputies)
- **Professor Daniel Kelly**, Co-Chair of the European Cancer Organisation's HPV Action Network
- **Peter Baker**, HPV Action Network Consultant, European Cancer Organisation
- **Menia Koukougiani**, Co-founder of NGO KARKINAKI, Awareness for Childhood and Adolescent Cancer, Greece
- **Federica Marra**, Communications Coordinator Think Young

# General Trends



## General Trends



- The division between the West and East of Europe regarding HPV prevention policies is evident, with the West generally displaying more comprehensive and effective policies compared to the East.
- Good trends for Eastern European countries: policies have improved such as in North Macedonia, Moldova, Georgia, Slovakia, Poland.

## General Trends



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## Key Findings (2023) Countries' Ranking

Excellent (>95%)	Very good (85-95%)	Medium (75-84%)	Poor (65-74%)	Very poor (50-64%)	Exceptionally Poor (<50)
5 champion countries	12 countries	7 countries	9 countries	7 countries	7 countries
Denmark 97,4 Sweden 97,4 Finland 96,1 UK 95,8 Ireland 95,2	Netherlands 94,2 Iceland 93,9 Germany 93,4 Norway 93,1 Malta 92,9 Switzerland 92,3 Estonia 91,7 Belgium 90,5 Latvia 88,8 France 86,6 Czech Republic 86,5 Italy 85,2	Poland 84,4 Hungary 84,3 Croatia 84,0 Portugal, 83,7 Austria 83,6 North Macedonia 80,7 Slovenia 80,7	Spain 78,1 Lithuania 73,9 Serbia 72,1 Andorra 70,5 Cyprus 70,1 Slovakia 66,4 Romania 65,7 Greece 65,5 Georgia 65	Armenia 64,4 Monaco, 63,5 Luxembourg 61,8 Moldova 61,7 Bulgaria 60,9 Montenegro 60,5 San Marino 54,1	Albania 39,5 Russia 37,4 Ukraine 33,8 Türkiye 31,6 Belarus 30,0 Bosnia- Herzegovina 21,5 Azerbaijan 6,4



# Key Findings

## Primary Prevention

Excellent (>95%)	Very good (85-95%)	Medium (75-84%)	Poor (65-74%)	Very poor (50-64%)	Exceptionally Poor (<50)
<ul style="list-style-type: none"> <li>✓ National policies on HPV vaccination that are funded</li> <li>✓ National routine programme on vaccination, free</li> <li>✓ Gender Neutral Vaccination</li> <li>✓ Hight VCR for both girls and boys</li> </ul>	<ul style="list-style-type: none"> <li>✓ National policies on HPV vaccination that are funded</li> <li>✓ National routine programme on vaccination, free</li> <li>✓ Gender Neutral Vaccination (exception Iceland and Estonia)</li> <li>✓ Hight VCR for girls, low VCR for boys or N/A</li> </ul>	<ul style="list-style-type: none"> <li>✓ National policies on HPV vaccination that are funded</li> <li>✓ National routine programme on vaccination, free</li> <li>✓ Gender Neutral Vaccination (exception North Macedonia)</li> <li>✓ Average VCR for girls, low VCR for boys or N/A</li> </ul>	<ul style="list-style-type: none"> <li>✓ National policies on HPV vaccination that are funded</li> <li>✓ National routine programme on vaccination, free or mostly reimbursed</li> <li>✓ Mostly Gender Neutral Vaccination</li> <li>✓ Average VCR for girls, low VCR for boys or N/A</li> </ul>	<ul style="list-style-type: none"> <li>✓ National policies on HPV vaccination that are funded</li> <li>✓ National routine programme on vaccination, free or out of pocket</li> <li>✓ Only girls vaccination (exception Monaco and Luxembourg)</li> <li>✓ Low VCR for girls, low VCR for boys or N/A</li> </ul>	<ul style="list-style-type: none"> <li>✓ Recommendation only in some countries (no funding)</li> <li>✓ No vaccination available (with the exception of Albania)</li> </ul>



## Key Findings Secondary Prevention

Excellent (>95%)	Very good (85-95%)	Medium (75-84%)	Poor (65-74%)	Very poor (50-64%)	Exceptionally Poor (<50)
<ul style="list-style-type: none"> <li>✓ Mature organized screening program</li> <li>✓ Free</li> <li>✓ Availability of self-sampling</li> <li>✓ Both PAP and HPV test available</li> </ul>	<ul style="list-style-type: none"> <li>✓ Mature organized screening program</li> <li>✓ Free (except for Belgium and Norway)</li> <li>✓ Generally, no availability of self-sampling (Except for Netherlands, Germany and France)</li> </ul>	<ul style="list-style-type: none"> <li>✓ Opportunistic or Nascent organised screening program, free and co-payment</li> <li>✓ No availability of self-sampling (Except for Portugal)</li> </ul>	<ul style="list-style-type: none"> <li>✓ Opportunistic or Nascent organised screening program, free and co-payment</li> <li>✓ No availability of self-sampling</li> </ul>	<ul style="list-style-type: none"> <li>✓ Opportunistic screening program, co-payment or none available</li> <li>✓ No availability of self-sampling</li> </ul>	<ul style="list-style-type: none"> <li>✓ Opportunistic Screening</li> <li>✓ No availability of self-sampling (Except for Albania)</li> </ul>

# Key Findings Online Information



<b>Excellent</b> (>95%)	<b>Very good</b> (85-95%)	<b>Medium</b> (75-84%)	<b>Poor</b> (65-74%)	<b>Very poor</b> (50-64%)	<b>Exceptionally Poor</b> (<50)
<ul style="list-style-type: none"> <li>✓ Excellent information on HPV, cervical cancer and accessing vaccination</li> <li>✓ Website provided by the government</li> </ul>	<ul style="list-style-type: none"> <li>✓ Good or excellent information on HPV, cervical cancer and accessing vaccination</li> <li>✓ Website provided by the government or CSO</li> </ul>	<ul style="list-style-type: none"> <li>✓ Good or unsatisfactory quality of information on HPV, cervical cancer and accessing vaccination</li> <li>✓ Website provided by the government or CSO</li> </ul>	<ul style="list-style-type: none"> <li>✓ Good or unsatisfactory quality of information on HPV, cervical cancer and accessing vaccination</li> <li>✓ Website provided by non state actor, blogs, magazines, clinics</li> </ul>	<ul style="list-style-type: none"> <li>✓ Good or unsatisfactory quality of information on HPV, cervical cancer and accessing vaccination</li> <li>✓ Website provided by non state actor, blogs, magazines, clinics</li> </ul>	<ul style="list-style-type: none"> <li>✓ Unsatisfactory quality of information on HPV, cervical cancer and accessing vaccination</li> <li>✓ Website provided by non state actor, blogs, magazines, clinics</li> </ul>



## General Trends

*Denmark, Sweden and Finland are the policy champions*



### Primary prevention:

- ✓ Recommendation and funding on HPV Vaccination
- ✓ Free gender-neutral vaccination
- ✓ HPV vaccine registry
- ✓ High VCR for both girls and boys

### Secondary prevention:

- ✓ Free population-based screening programme
- ✓ Availability of self-sampling
- ✓ PAP and HPV test provided

### Online information:

- ✓ Governmental websites with excellent information on HPV, screening and accessing the vaccine.

## General Trends (2)

*Azerbaijan and Bosnia-Herzegovina  
are the worst-performing countries*



### Primary prevention:

- No recommendation no funding
- No access to vaccine

### Secondary prevention:

- No screening / Opportunistic screening
- No self - sampling

### Online information:

- Absence of reliable online information on the issue

## Progress Since 2020

*From 48 Countries Analysed*



**39 countries** offer a national routine programme on vaccination: **↑ 4 countries**

**30 countries** offer gender-neutral vaccination: **↑ 13 countries**

**All countries except Azerbaijan** offer screening programmes

**24 countries** offer mature population-based screening programmes:  
**↑ 6 countries**

**24 countries** offer both PAP and HPV test or HPV alone: **new criteria**

**23 countries** have an HPV vaccine registry: **new criteria**

**25 countries** offer easy-to-find governmental websites with good or excellent information: **↑ 3 countries**



## International Mechanisms

EU – European Beating Cancer Plan (03.02.2021)

Vaccinate  
90% of girls  
(2030)

90%  
population  
to have  
access to  
screening  
(2025)

90% to have  
access to  
recognised  
National  
Comprehensive  
Cancer Centres  
(2030)

WHO : Global strategy to accelerate the elimination of  
cervical cancer as a public health problem (2020)

90% of girls  
vaccinated  
by age 15  
years  
(2030)

70% of  
women are  
screened  
(35+45  
years of  
age)

90% of  
women  
receive  
treatment

## Key Conclusions



**Cervical cancer is preventable**

**No woman should die  
when we have the technical, medical  
& policy tools to eliminate  
HPV-related cervical cancer**

## Key Conclusions



**There is a high inequality in access  
to vaccines and screening across Europe  
with worse indicators  
for Southern and Eastern Europe**

**Nevertheless, overwhelming majority  
of countries need to do more  
to put an end to preventable deaths**

## Key Conclusions



**More reliable data is needed  
including vaccine  
and screening coverage**

## 9 Key recommendations



### States should:

1. Include **HPV vaccination into routine state vaccination schedules**
2. Establish **gender neutral vaccination** by including **boys** into HPV vaccination coverage (which also serves protection of the girls)
3. Offer the HPV vaccine **free of charge**
4. Provide mature **population-based screening** programmes which are the **only way** to reach the entire population and achieve results in saving women's lives
5. Ensure that screening is offered **free of charge**
6. Increase considerably the **VCR and screening levels** and make them **publicly available**
7. Offer screening by **HPV testing** and **self-sampling options**
8. Provide their citizens with **reliable evidence-based information** about HPV screening and vaccine and where to reach them
9. Ensure **better data collection** for HPV screening and coverage rate



**Thank you!**



- **Expert Group**
- **European Public Health Authorities and Civil society for responding to our questionnaires**
- **MSD for supporting the independent research**

