

Presentation

Cervical cancer is the second most frequent tumor in the Brazilian female population and also the fourth cause of death for women due to cancer in Brazil. It makes approximately 5,000 victims each year and presents 17,540 new cases, according to cancer incidence estimates of the José de Alencar Gomes da Silva National Cancer Institute (INCA), valid for the years 2012 and 2013.

Although pioneer initiatives for the control of this relevant health problem date back from the first half of the 20th century, soon after the release of the Papanicolaou findings on exfoliative colpocytology for the early detection of cervical cancer, it was in 1986 that these control actions were listed as a priority in the national health policies, in the moment of the debate and publication, by the Ministry of Health (MH), of the Program for Integral Attention to Women's Health (PAISM in Portuguese)

In the decade of 1990, with the Live Women Program, the expansion and interiorization of the offering of the cytopathological test for the screening was initiated, culminating in the end of the decade with the implementation of a national registry and report emission system, the Siscolo, which allowed, besides the standardization of the report, following and evaluating the production of these tests. Currently, at Siscolo more than 11 million cytopathological tests are registered each year.

Around the year 2000, the consolidation of the relevance of cervical cancer control is manifested both in the National Program for Oncological Assistance (2005) and in the inclusion of the prevention of this cancer among the 11 priorities of basic attention for the country with the agreeing on goals defined in the Pact for Health for each city and state of the federation.

However, besides the advances obtained, the effectiveness of the action, evaluated by the decrease in incidence and mortality due to this cancer, was below that obtained in countries that implanted the screening in an organized and universal way, reflecting the inequalities for the access of the Brazilian women to the screening and treatment of precursor lesions identified and the existence of problems in the quality of services offered, according to the Multi-Institutional Work Group Report, defined by a Ministry Decree (Decree number GM 310/2010) to evaluate the National Program for Cervical Cancer Control and elaborate proposals for its technical and operational improvement.

The proposals formulated by the group and widely debated were consolidated in the Plan for the Strengthening of Prevention, Diagnosis and Treatment of Cervical and Breast Cancers, launched by President Dilma in March 2011, in Manaus, as one of the priorities of the Federal Government in the health area. Regarding cervical cancer control, the objectives to be achieved are the guarantee of access to women, from 25 to 64 years old, to the screening and the qualification of the diagnosis and treatment of precursor cervical lesions. To this end, initiatives will be applied for the strengthening of the management, monitoring and evaluation of the Program; qualification of the screening basic attention team; quality management of the cytopathology tests; the guarantee of the diagnostic confirmation and the treatment of the precursor lesions.

Among the different initiatives of the Plan, we highlight as finalized or in development, the publication of the review based on the best scientific evidences of the Brazilian Guidelines for the Screening of Cervical Cancer, done by the Task Force composed by the MH/INCA in partnership with the Brazilian Association of Pathology of the Lower Genital Tract and Colposcopy (ABPTGIC), the Brazilian Federation of Gynecology and Obstetrics Societies (FEBRASGO), the Federal University of Rio de Janeiro/Gynecology Institute and Oswaldo Cruz Foundation/Fernandes Figueiras Reference Institute for Women's and Children's Health; the construction of a new information system for the Program, the Cancer Information System (SISCAN), via web, which will replace Siscolo, allowing the follow up and evaluation of tests and the individualized follow up of the women under screening; the strengthening of the actions in the North and Northeast region, where we find the most significant inequalities in the access to screening; the formulation and implementation of a National Program for the Quality of Cytopathology and the implementation of Qualifying Centers for Gynecologists for the diagnosis and treatment of precursor lesions.

This thematic edition of the Brazilian Journal of Cancerology, dedicated to promoting and disseminating the production of knowledge on cervical cancer, represents one more contribution of the several authors and INCA for the success of this Plan.

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