

Cervical cancer screening and treatment are neglected in low- and middle-income countries

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While there have been substantial improvements in mortality rates and an increase in access to reproductive health interventions in low- and middle-income countries (LMICs), the global health community is neglecting prevention, screening, and treatment for cervical cancer in LMICs. These are the conclusions of a new article in *PLOS Medicine* this week by Ruby Singhrao and colleagues from the University of California San Francisco, San Francisco.

Using a framework including equity and socio-economic, gender, public health, and health services dimensions, the authors propose four arguments for why [cervical cancer](#) screening and treatment should be included as part of the "post-2015 development agenda," for improving reproductive and maternal health outcomes. They argue that the burden of cervical cancer falls on women of reproductive age and that cervical cancer is associated with reduced reproductive capacity. Furthermore, cervical cancer screening and treatment can be integrated into other health services and recent evidence demonstrates that HPV vaccination can protect girls from pre-[cancerous lesions](#).

"For cervical cancer, we fortunately now have a wide range of feasible, affordable, and effective prevention options, which make dramatic global reductions in cervical cancer incidence a realistic goal in our lifetime", conclude the authors.

More information: Singhrao R, Huchko M, Yamey G (2013) Reproductive and Maternal Health in the Post 2015 Era: Cervical Cancer Must Be a Priority. PLoS Med 10(8): e1001499. [DOI: 10.1371/journal.pmed.1001499](https://doi.org/10.1371/journal.pmed.1001499)

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