



FIJI NATIONAL  
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# FNUNIKUA

## COMBATING CERVICAL CANCER



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**#WecanIcan**

WHO CALLS FOR ACCELERATED PROGRESS  
TO ERADICATE CERVICAL CANCER

GREATER AWARENESS IS VITAL IN FIGHT  
AGAINST CERVICAL CANCER

## WHO calls for accelerated progress to eradicate Cervical Cancer



The World Health Organisation (WHO) has made a global call for Cervical Cancer to be eradicated. The new WHO Regional Director for the Western Pacific Dr Takeshi Kasai, who addressed students and faculty at the Fiji National University (FNU) last month, highlighted the impact that noncommunicable diseases (NCDs) are having in the Pacific.

“Cancer is treatable if detected earlier,” he reiterated while speaking as special guest lecture at FNU’s Pasifika Campus.

“Noncommunicable diseases, including all forms of cancer, are now the leading cause of death in the Western Pacific region including Fiji.”

“I am calling for renewed momentum to beat NCD’s,” Dr Kasai told close to one hundred guests including students at the public lecture.

### **Cervical Cancer: It’s preventable, it’s treatable and it’s time to eliminate it**

Each year, more than 300,000 women die of Cervical Cancer around the world. More than half a million women are diagnosed. Every minute, one woman is diagnosed. Each death is a tragedy, and can often be prevented. Most of these women have not been vaccinated against human papillomavirus (HPV), the main cause of cervical cancer, are not diagnosed early enough, and lack access to life-saving treatment. Studies have shown that prevention and early treatment of cervical cancer are also highly cost-effective.

Nine in 10 women who die from cervical cancer are in lower income countries. This means some of the most vulnerable women in our world are dying unnecessarily. This is not fair or just. Rising cervical cancer deaths is undermining health gains for women made in maternal health and HIV care. Current disparity in survival from cervical cancer, which varies between 33-77%, is unacceptable and can be minimized.

### **It doesn’t have to be this way**

Cervical cancer is one of the most preventable and curable forms of cancer, as long as it is detected early and managed effectively.

Cervical cancer can be prevented through vaccination against HPV, the main cause of cervical cancer, as well as through screening and treatment of cervical pre-cancerous lesions.

HPV vaccination does not replace cervical cancer screening, but can be very effective in preventing infection with the strains of HPV which are known to cause more than 70% of cervical cancers.

Cervical cancer screening is testing for pre-cancer and cancer among women who have no symptoms and may feel perfectly healthy. When screening detects pre-cancerous lesions, these can easily be treated and cervical cancer can be avoided.

Currently, most women diagnosed with cervical cancer are diagnosed with advanced cancers, where the chance of a cure is unlikely. This is compounded by lack of access to life-saving treatment in many settings where the burden and need is highest.

### **WHO’s challenge**

WHO is accelerating progress towards this goal. WHO is working to ensure that all girls globally are vaccinated against HPV and that every woman over 30 is screened and treated for pre-cancerous lesions. To achieve that, innovative technologies and strategies are needed. WHO is working to improve access to diagnosis and treatment of invasive cancers at their earliest stages and to ensure that availability of palliative care for women who need it. All of these services must be embedded in strong health systems aimed at delivering universal health coverage. High-income countries have shown the way. Now is the time for global elimination.

### **What is WHO doing?**

In May 2018, WHO Director-General, Dr Tedros Adhanom Ghebreyesus made a global call for action towards the elimination of cervical cancer.

This is in line with the targets of WHO’s General Programme of Work:

- 1 billion more people benefiting from universal health coverage;
- 1 billion more people better protected from health emergencies;
- and 1 billion more people enjoying better health and well-being.

We have the tools to achieve global elimination of cervical cancer. We also have the political commitment. Several countries and UN agencies have already joined forces under the UN Joint Global Programme on Cervical Cancer Prevention and Control.

The world is doing something, but to succeed, we need everyone on board. From governments and UN agencies to researchers, healthcare professionals and individuals, we all have a role to play. As the manufacturers of life-saving vaccines, diagnostics and treatments, the private sector is also a key partner in this mission.



We can eliminate **cervical cancer** as a public health problem through intensified vaccination against HPV, screening and treatment.



## Greater awareness is vital in fight against Cervical Cancer – Dr Naidu

The World Health Organisation data published in 2017 states that Cervical Cancer Deaths in Fiji reached 87 or 1.52% of total deaths. The age adjusted Death Rate is 21.48 per 100,000 of population and ranks Fiji number 28 in the world.

According to Fiji National University's Adjunct Associate Professor Dr Swaran Naidu, Fiji has had relatively high levels of cervical cancer rates for some decades and trends show that the rates and the deaths related to late presentations are not decreasing.

FNUNIKUA speaks with Dr Naidu, who specialises in women's health, to find out more about Cervical Cancer and how this 'silent killer' can be effectively combatted.

### What is Cervical Cancer?

Cervical cancer is a cancer arising from the cervix or neck of the womb. It is due to the abnormal growth of cells that have the ability to invade or spread to other parts of the body.

### How is it caused?

Majority (almost 99%) of the cervical cancer is caused by Human Papilloma Virus (HPV) infection which is generally prevalent after onset of sexual intercourse.

### What are the signs and symptoms?

Early on, typically no symptoms or signs are seen. Later symptoms may include abnormal vaginal bleeding, pelvic pain, or bleeding during or after sexual intercourse.

### How can it be prevented?

Prevention strategies include:

- HPV vaccination for class 8 girls (age around 12-13years) in Fiji
- Conducting screening tests which picks up early changes in the cells of the cervix, which if necessary, can be treated to prevent the development of cervical cancer.

### Severity of Cervical Cancer:

Even though cervical cancer is one of the preventable cancers, unfortunately the rate of screening amongst women is low. In the Pacific region, there is a great disparity in preventive and screening efforts for cervical cancer, with most areas having no, or suboptimal programs, resulting in high morbidity and mortality rates. At this stage, there is no national cervical cancer screening program in Fiji and screening is performed opportunistically. Less than 10 per cent of women in the target population are being screened.

### What are some ways in which those suffering from cervical cancer be treated?

They need to have access to all modalities of treatment including surgery, radiotherapy and chemotherapy. Radiotherapy is not available in Fiji however; some patients are assisted through the Ministry of Health.

### How can we all contribute towards fighting cervical cancer as individuals?

We need to encourage young girls to have the HPV vaccinations, raise awareness in women for the need to undergo screening tests particularly those between 30 to 50 years. Unfortunately, many women in Fiji diagnosed with some cellular changes (not yet cancer) requiring simple treatment to ablate the abnormality thus preventing the formation of cervical cancer, choose not to go in for this preventative management.

### Why and how will cancer awareness programs be beneficial?

All individuals need to be made aware of the dangers posed by cancer. We also need to raise awareness amongst antenatal mothers and at a public health level. We hope that more (awareness) will result in people taking vaccinations and they will in future, once sexually active, have screening tests.



*“Cervical Cancer is a real threat in our society today. If not detected and treated on time, the consequences are mostly fatal. This loss causes enormous stress on the family system as well as the economy”.*

### What tests are available?

Screening tests available in Fiji include Pap smears and Visual Inspection of cervix using acetic acid (VIA).

### What are some of the challenges cervical cancer patients face?

The lack of availability of all modalities of treatment in Fiji. Their own anxieties and fears prevent them from accessing treatment in a timely manner. When in later stages of the disease - often access to adequate Palliative care services - adequate analgesia and people to care for them may be difficult.

### Are there any recent emerging trends on cervical cancer?

Fiji has had relatively high levels of cervical cancer rates for some decades. Countries with a national screening programs have reduced their rates of cervical cancers by 70 percent. The good news is that there has been relatively good uptake of the vaccination but this will not translate to reducing trends in incidence for another 20 years or so. 80% of the global cervical cancer is diagnosed in low and low middle income countries.

## Lack of knowledge, the greatest barrier to accessing pap smear screening

A research study conducted in rural areas of Ba, Lautoka and Nadi reveals that most rural women do not know about Cervical Cancer, its risk factors and about Pap smear screening and its role in preventing the second most common women's cancer in Fiji.

More education is required to acquaint women in rural Fiji about cervical cancer, its associated risk factors as well as the benefits of cervical cancer screening programs and other prevention strategies.

The study “Knowledge, Attitude, Practice and Barriers regarding cervical cancer and its screening using Pap smear, in rural women of Ba, Lautoka and Nadi, Fiji” was published in the Pacific Journal of Reproductive Health in 2015.

The study stated that less than 10 percent of women are screened for cervical cancer in Fiji.

“Fiji's cervical cancer incidence is ranked amongst the top 20 countries in the world. Between 2000 and 2010 it was noted that iTaukei women account for 68 percent of the cervical cancer patients; Fiji Indians 29 percent and others three percent.”

The observations of the research were consistent with a 2011 World Bank report on poverty trends in Fiji, which reports that larger households in Fiji tend to have a higher incidence of poverty and the presence of children and elderly have an impact on household welfare.

“The above sociodemographic findings in this study may offer an explanation for the poor access to information, hence, lack of knowledge of cervical cancer and Pap smear and poor uptake of cervical cancer screening with Pap smear in the study population.”

“Not surprising that the greatest barrier to accessing a Pap smear test was again lack of knowledge rather than the fact that they live in rural communities or access to a Pap provider,” the report stated.

“What is even of greater concern is that 72 percent of the respondents reported no knowledge of cervical cancer and 80 percent had no knowledge of risk factors.”

The study highlighted that lack of knowledge about cervical cancer and its risk factors would suggest that the current public health education in this regard needed considerable strengthening.

“It has been stated earlier that cervical cancer is the second most common cause of cancer is the second most common cause of cancer deaths in Fiji. This disease is preventable but requires the population of Fiji to be empowered with information through education and community advocacy programs.”

### Recommendations

The study identified target populations where intervention may provide best yield. Hence, the study made the following recommendations:

1. An active public health promotion initiative is required to inform the community about the damaging consequences of cervical cancer which can be prevented by accessing screening services as well as HPV vaccination for young girls.
2. The education programs in schools needs to be strengthened to make school children, especially teenage girls, aware about cervical cancer, its risk factors, screening and preventative options.
3. Education and counselling services should be strengthened for women accessing Pap smears.
4. Health Centres must be mandated to provide screening services to their target populations, especially those living within walking distance.
5. Outreach services are urgently needed for those rural women who cannot access health centre without transport.
6. Any universal screening for cervical cancer program that Fiji institutes will require a lot of awareness raising and

education for success.

7. International development partners are urged to provide more resources for cervical cancer prevention strategies.

A total of 1494 women participated in this study which was conducted by Dr Swaran Naidu, Sheetal Naidu and Rajat Gyaneshwar at the Department of Obstetrics and Gynecology of Fiji National University (FNU), Gillian Heller at the Department of Statistics, Faculty Science and Engineering, Macquarie University, Australia and George Qalomaiwasa at the Australia-Pacific Technical College, in Nadi, Fiji.

The research was initiated by Viseisei Sai Health Centre's Reproductive Health team as part of a rural women's empowerment outreach project titled “Strengthening rights of rural women by providing them with knowledge, access and control of their reproductive health.”

### Results:

Seventy-two percent of rural women had no knowledge of cervical cancer and 80% had no knowledge of the risk factors of cervical cancer. Lack of knowledge was significantly different for age groups ( $p=0.006$ ), education levels and employment status ( $p<0.001$ ) and ethnicity ( $p=0.022$ ). Those groups with lowest knowledge were teenagers (18 to 19 years); those with less education; and iTaukei respondents. Of the respondents who had at least some knowledge of the Pap smear, 75% had had a Pap test. Of those who had no knowledge of the Pap smear, only 45% had had the test ( $p<0.001$ ). Of those who did not have a Pap smear the commonest barrier was lack of knowledge at 46.3% and fear of procedure was 29.4%.

## Brave Narayan becomes Cancer advocate



It has been almost five years since Vinita Narayan was diagnosed with life threatening Cervical Cancer. Fortunately, however she was able to fight-off her medical condition with timely treatment and strong support from family members and friends. The road to her recovery was not an easy journey and Narayan admits that many times she thought that she would not be able to make it. “You really have to be ready to fight and it’s not easy. There will be lots of ups and downs, you have to have lots of self-belief, determination and support

from your loved ones,” said Narayan.

“It was in February of 2014 and I had been unwell for a few days then I decided to go to Tavua Hospital hoping for some regular diagnosis.”

“The doctor did his tests and said I had cancer after which they referred me to Lautoka Hospital,” Narayan said.

She said she was shocked and started crying, and it felt like she could not breathe properly after hearing the diagnosis.

She then went to Lautoka Hospital where she was admitted and further tests were done and after two days, results came positive for Stage 3 Cervical Cancer.

“A group of doctors while comforting me told us that the treatment wasn’t possible in Fiji and that I had to go to India immediately.”

“It was a big challenge because finances were an issue however the Ministry of Health approved to pay for my hospitalisation cost there (India) while my family sorted loans amounting to about \$17,000.”

Narayan’s family organised all the logistics for her medical evacuation and she went to Sahyadri Hospital in Pune, about 150 Kilometers from Mumbai.

“We were in India for three months and two weeks where they did multiple re-tests and treated me with chemotherapy, and radiotherapy.”

“I had lost a lot of weight and all my hair due to the treatment but I tried to watch my diet when I returned to Fiji.”

According to soft spoken mother of two, her family offered a lot of support and motivation.

Narayan said that her family continuously helped her get over the mental trauma that she was going through.

“This was a very big diagnosis and one that gave me a lot of mental stress. I could not stop thinking about it but my family helped me get over it.”

Slowly she recovered from the side effects of the treatment and started to live a normal life with her family in the suburb of Vatukoula in Tavua.

Learning so much in the process of her treatment, Narayan is now a brave survivor of Cervical Cancer and has timely advice for women.

“I would like to encourage every woman to have regular medical tests done. It is very important to have your Pap smears done. This is the only way to detect cervical cancer early. Doctors told me that I had had the cancer cells for five years before I went to the hospital.”

“Also, you should not rely on herbal medicine and do not be scared from going to the hospital because that is the only place you can get proper treatment.”

Narayan said, she has been spreading the message of cancer in informal sessions whenever she has a chance to.

“Whenever I go to visit my family or when I go out to community gatherings, I always share my experiences and urge women to have a healthy diet.”

“Usually women are very responsive and I try to inspire them to seek urgent medical care whenever they face any irregularities in their health,” she said.

Narayan also thanked the Ministry of Health and Medical Services for their helpful assistance.

## Student Views



**Makereta Nuve Tikoicicia**  
Bachelor of Education (English/ I-Taukei)

**Is enough being done to raise awareness on cervical cancer?**

No, a lot of women are unaware of the symptoms of cervical cancer due to lack of awareness.

**What more can be done?**

Ministry of Health should do more campaign to create awareness on cervical cancer. Students at schools should be taught about different cancers.



**Mohammed Sakim**  
Bachelor of Education (Primary)

**Is enough being done to raise awareness on cervical cancer?**

Yes, because awareness are being done on cervical cancer.

**What more can be done?**

Women should know about the importance of Pap smear tests and screening at an early stage is very important. There should be no obstacles in seeking cervical cancer screening. There should be programs emphasising the benefits of screening.



**Joni Nabong**  
Foundation Science

**Is enough being done to raise awareness on cervical cancer?**

No, cervical smear test can be a bit uncomfortable for a patient to talk about. For women with cervical cancer, it’s a sense of shame is more because it’s related to reproductive health therefore regular screening should be done where the patients can have open space and can talk openly to the doctors.

**What more can be done?**

- Take time to promote cervical cancer awareness and prevention tips to staffs in your organizations.
- Help raise awareness of cervical cancer by supporting the smear for smear campaigns.
- Visit schools and communities to educate public on the effects of cervical cancer by handling out pamphlets.



**Lyn Manimania**  
Bachelor of Education (Primary)

**Is enough being done to raise awareness on cervical cancer?**

No, more awareness should be done in especially in schools.

**What more can be done?**

Females from an early age should be made aware of cervical cancer and presentations should be done at schools, which should discuss cervical cancer causes, symptoms, risk and protective factors.



## Support services for cervical cancer patients



Belinda Chan

**B**attling and overcoming cancer is a journey no person should ever go through alone. It is this simple but important mantra that drives the work and people of the Fiji Cancer Society (FCS).

FCS Chief Executive Officer Belinda Chan said this was evident in the organisation's primary role

of providing patient support services alongside its advocacy work.

Founded almost three decades ago, FCS is the country's national cancer centre that provides services for all forms of cancer in men and women.

Chan highlighted that one of the most common types of cancer in women that FCS provided support services for was cervical cancer.

"Cancer is the third leading cause of deaths in Fiji and cervical cancer is one of the most common type of cancer that affects women in our country," Chan said.

"Part of our function at the Society is to raise as much awareness as we can on cervical cancer and we do this by conducting community outreach programmes where we organise information sessions with groups of women out in the settlements, villages and even those in the corporate environment."

"We go out into these places and talk to these women, and even men who join in to show support, and basically explain to them in ways they understand what cervical cancer is, its symptoms, how it can be detected and treated."

### Cervical Cancer screening

Chan said screening services were provided at FCS community outreach programs by a team through the Society's partnership with the Reproductive Family Health Association Fiji (RFHAF).

"The team conducts cervical screening using ThinPrep (a liquid-based test) and visual inspection with acetic acid (VIA)."

"With VIA it is see-and-treat so when the team screens a woman and feels it is within their capability, they freeze the HPV precancerous cells and if required, we refer women to the clinic for further checkup."

"Pap smears are also conducted at the clinic and we encourage women to get screened regularly."

### Support Services

"When we conduct screenings for women and inform them that they have the virus, it takes a while for them to process all this and this is when they need all the support they can get," Chan said.

"We then counsel them and refer them to the gynecology clinic. Sometimes we counsel them with their partners present."

FCS regularly follows up with women who were referred to the clinic to ensure they undergo the required tests.

"We contact them and enquire about the progress of their tests to show them that they do not have to go through this alone," Chan commented.

"Once the test is done we then wait for the results and call them once it is ready from the clinic and if they wish, we are also present with them once the results are relayed."

"We want to be there for our patients from the time of diagnosis so we can support and guide them through this phase."

She said for newly-diagnosed cervical cancer patients, FCS contacts its survivor network so that a survivor can speak to the patient and provide first-hand experiences and support.

"We also provide transportation for our patients in Suva, the West and in the North to help them with getting to and from hospitals for treatments and this is through taxi and ambulance services and boat transfers through our partners Patterson and Goundar Shipping."

FCS provides support service by purchasing drugs medication that are not on the free drug list or not available at the hospital pharmacies.

The Society also facilitates requests for chemotherapy drugs upon request.

### Survivor network

Whilst providing assistance to cervical cancer patients during the treatment phase, Chan said FCS maintains a network of survivors who participate in advocacy and community outreach programmes and meet for counselling sessions.

"Our survivor network consists of men and women who have battled all types of cancer and they play an important role in the awareness work we do because they are the only ones who can share the experience of their cancer and help empower others," she said.

"We have survivors advocating for early detection and survivors going out with us into the communities and speaking to women (and men) one-on-one and answering their questions."

"Our survivor network also conduct home visitations to other patients and they also meet for sessions where they share their experiences and support each other."

### Challenges

According to Chan, an issue of concern is the high number of women in Fiji who are yet to be screened for cervical cancer or did not continue with regular tests.

"We realise that a lot of women do not get tested and our message is that women shouldn't be ashamed to get checked, sometimes they feel ashamed of baring themselves to others."

"Sometimes, some women may have had a painful or negative experience the first time they had a pap smear done and maybe this is why they do not wish to return and have regular checkups done," said Chan.

"In some cases we handled, physiological factors or past relationships hinder women from getting screened and we try and identify and address these issues so that they can overcome it."

"I think it is because of the stigma – I used this word stigma in 2015 and I'm still using this word now so I think it shows how we as a society have so much to do in terms of moving forward and changing mindsets."

Chan believes issues such as cervical cancer should be discussed openly in our society in order to increase awareness.

"We need to have more open dialogues about this because we need to keep up with technology and advancements in society. Children nowadays have their own electronic gadgets and get their information from the internet and sometimes this information is too complicated and graphical for them so we need to talk with our young ones and explain to them."

"Misinformation on a serious issue such as cervical cancer is something that we would not want our men, women and children to be influenced by."

### Moving forward

FCS aims to conduct more awareness programmes and screening sessions this year.

"In May, each Saturday we plan to have little health camps and this is done in partnership with other organisations and screenings for cervical cancer will also be conducted. We will be making further announcements on this in due course," Chan said.

"Our basic underlying message we wish to impress upon the general public is to get early and regular check-ups as early detection is crucial."



Jainesh Nand, Medical Intern, CWM Hospital

## FNU Medical students *share* experiences assisting patients



Akshita Gupta, Medical Intern, CWM Hospital

**B**attling Cervical Cancer is physically challenging and emotionally draining. Patients are on a ‘roller coaster state’ and need a strong support system to help them overcome the overwhelming situation they unfortunately find themselves in.

Akshita Gupta, a medical student intern at the Colonial War Memorial Hospital (CWMH) in Suva said a lot of women have huge emotional fallout after being diagnosed with Cervical Cancer.

“Cervical cancer diagnosis can put a great deal of stress, worry and anxiety on a patient. During this time, it is very important that the patient’s family pay attention to the emotional health of their loved one,” said Gupta.

Gupta, a final year Bachelor of Medicine and Bachelor of Surgery (MBBS) student at the Fiji National University’s (FNU) College of Medicine, Nursing and Health Sciences (CMNHS) is based at CWM Hospital’s Gynecology Ward.

“I have dealt with one patient who was in her late 50s. I was in the Emergency Department then. After some usual history and examinations, her abdomen was drained of the extra fluid that was causing her pain and other symptoms,” said Gupta.

“She was too weak to look after herself and was losing weight too fast. She had never had a pap smear done until she had some abnormal bleeding,” said the student intern.

Gupta said unfortunately Cervical Cancer has the potential to take away from a woman her whole dignity.

“The patient will have smelly discharge, the husband won’t want to come near her, the family won’t be supportive enough,” she added.

“Once women who have symptoms come to us and we tell them that they have cervical cancer, it changes their whole life around. There are many young children who have lost their

mother due to cervical cancer, the family lost their loved one so cervical cancer does not only impact the patient’s health and emotions but it also puts the family members in distress,” said Gupta.

According to Gupta, Cancer is often a reminder that life is fragile and sadly in some cases family and friends may behave in ways which is difficult and hurtful.

“Some may stay away or stop contacting you because they don’t know how to respond or are afraid of losing you. Others may block out or ignore things that are too painful to contemplate,” she said.

The final year medical student said depression and other mixed emotions such as sadness and hopelessness creeps into patients’ lives if they do not have a strong support system.

She said it’s important for patients to attend counseling sessions and support group meetings.

Another MMBS final year student, Jainesh Nand believes cervical cancer screening should be a compulsory component of every woman’s health checkup.

The medical intern at the Colonial War Memorial Hospital (CWMH) said there are cases where women who are presented with symptoms of cervical cancer are hesitant to go through the screening process.

“We need to understand that Cervical Cancer is preventable. If detected on time and with timely treatment, we can save lives. Unfortunately, we have come across cases where women who are carrying symptoms of cervical cancer hesitate to undertake screening mainly due to stigma. We need to break this cycle because everyone’s life is precious,” said Nand.

“In most cases women have never had any cervical cancer screening before they come to the hospital with symptoms of this form of cancer.”

“Therefore, there is still the need to do more in terms of awareness about cervical cancer and to empower women to be more confident about their body and go for regular health checkups.”

Nand said women need to understand that cancer screening is looking for cancer before you have any symptoms because if detected early it may be easier to treat.

“Determining the status of your bodily functions can help to identify any abnormalities before they can worsen, display symptoms, and pose a significant risk.”

He said identification of issues allow for prompt treatment, which can reduce complications that may lead to loss of life and also help you save on medical costs.

“This type of cancer occurs when cervical cells become abnormal and overtime, grow out of control. The cancer cells invade deeper into the cervical tissue.”

“I urge the ladies to discuss their risk for cervical cancer with their doctors, the pros and cons of the screening tests, at what age to start being screened and how often to be screened,” said the young intern.

Nand said he recently came across a patient who was presented with symptoms of cervical cancer and had never undertaken cancer screening before until she noticed a mucopurulent discharge from her vagina.

“The patient, a mother of three only visited the Oxfam Clinic after seeing an unusual discharge. She complained about post coital bleeding and dyspareunia,” Nand said.

“It’s important to understand that despite having no family history of such health issues does not necessarily mean that women are safe from being diagnosed with Cervical Cancer. So regular screenings and health checkups are essential to living a longer, healthier and happier life,” Nand added.

## MY SAY

“In terms of awareness about cervical cancer, I personally feel that not enough is being done. This is because this is a condition we come across quite often in the hospitals and most of the time, these women are not aware of what cervical cancer is and how they ended up acquiring it.

More outreach programs need to be conducted especially to those who live in interior places and outer islands in Fiji. Pap smear screening should also be offered to these women since they are usually not able to travel to specific clinics to get it done. Cervical Cancer awareness needs to target the younger population, especially high school students. This allows them to be aware of the various risk factors that may predispose them to it and they can take the necessary precautions. Pap smears and HPV testing needs to be strongly encouraged and advocated among the female population.

Increased awareness can lead to early symptom detection which in turn leads to more effective treatment options. For those who have not had the opportunity to get tested, they can visit the Oxfam Clinic (Brown Street) in Suva or various reproductive health centres around the country. This service is offered free of charge. For the month of February, Oxfam Clinic opens on Saturdays from 8.30am to 12.30pm. So do make the most of it and take care of your health.”





# Breaking the Barriers: Understanding Cancer Services, Screening & Treatment Available for Women in Fiji

Picture Supplied: FWRM

In 2017, the Fiji Women's Rights Movement conducted a scoping study on women and ageing, where key findings revealed that the progression of age had a direct impact on health and that there were significant gaps in accessing adequate healthcare services for ageing women. Additionally, FWRM has been involved with various stakeholders in drafting a Pacific SRHR manual in efforts to contextualise the articles of the International Conference on Population and Development Programme of Action (ICPD PoA) so it makes sense to Pacific contexts.

On that note, this year will mark the 25th anniversary of the ICPD PoA; a historic consensus document where 179 countries in Cairo Egypt stood together in solidarity recognising that advancing women's sexual and reproductive health and rights (SRHRs); gender equality; the potential of young people; adolescent pregnancies and women's empowerment is the heart of development programmes.

In our bid to ensure that the Fijian Government remains committed towards the promises pledged in Cairo, FWRM in partnership with the Asian-Pacific Resource and Research Centre for Women (ARROW), decided to carry out a research that assessed the prevalence rate of reproductive cancers amongst women in Fiji and the state of cancer services available. Linking our work to international commitments is FWRM's approach in keeping government accountable to promises made at the global stage.

## Key findings of the research

**1. The prevalence rate of reproductive cancers for women is significantly high:** the breast and the cervix are the two common registered cancers in the Fiji Cancer Registry making up 30 per cent of cancers listed – age of diagnosis between 30-50 age category.

**2. The health-seeking behaviour of women is significantly poor:** many women present themselves late with stage 3 cervical and breast cancer when first diagnosed. Our research found that 50 percent of women will not seek further medical assistance, treatment or follow-ups after testing positive - iTaukei women have the worst health-seeking behaviour and are not enthusiastic about seeking services, care and treatment, and have higher chances of dying than a Fijian women of Indian descent.

**3. The continued use of alternative medicine:** many women still resort to traditional herbal medicine when diagnosed with cancer and will only return to the hospital when the families

themselves cannot handle the physical deteriorating state of patient; or if the pain threshold has intensified to an extent that morphine is needed for relief.

**4. Overseas Referral Treatment:** The Ministry of Health and Medical Services also provides funding assistance to cancer patients seeking overseas treatment in India. One of the challenges that the MOH faces is finding women who have had their applications for treatment successfully approved. At times the contact details provided are unavailable and the ministry has had to wait for months to get responses from women who have requested financial assistance. Another issue identified by the Committee is that despite applications being approved, some women refuse treatment and prefer the chemo-palliative care provided by the public healthcare system.

**5. Inaccessibility of cancer services:** there is still unequal cancer services across Fiji and sometimes this inconsistently include unavailability of medical personnel. Some women still find it difficult to access the nearest health center/nursing station. The nurses at the nursing stations lack the technical skills and capacity around SRH to provide medical help to women who visit them. Furthermore, there are attitudinal barriers from the service providers that do hinder women's access to health centers

**6. Lack of awareness:** there is still a lack of awareness on cancer and reproductive services available for women in Fiji and very rarely will women visit a health facility and demand a HPV test or other preferred screening methods.

In the research, we also interviewed women who had voluntarily agreed to share their story with us with the hopes of encouraging more women to get screened early, regularly and to be vigilant and consistent with treatment. 6 of the 10 women had cervical cancer between stages 2-3B when diagnosed and were aged between 30-50 years.

Below are quotes from some of the women sharing their challenges in their battle with cancer:

**7. Emotional challenges** - "I felt disheartened, sad, depressed to be leaving my husband and 4 children behind who at the time were still young (Class 8, 5, 3 and 2 years old) and with a newborn baby" (Quotes taken from one of the participant)

**8. Financial challenges** - "I was told by the doctors that I have to go to India for operation but I couldn't go because none of my children want to help me pay for the trip... I feel very disheartened. I need help like social welfare support to help support myself because I don't like to live like this. Since my husband died, I took out all my FPNF funds to support my

children...and now they don't support me" (Quotes taken from one of the participant)

**9. Family support** - "I've discovered for myself what builds me up, and I focus on that. It is also very therapeutically for me to find time for myself and stay away from city life. And I believe that it is good to forgive and it's a way I've been able to heal. My husband thought that he could leave me and the family, and find another woman with beautiful breasts and be satisfied? He never found it. No satisfaction so he came back to us" (Quotes taken from one of the participants – translated from iTaukei to English language)

**10. Satisfaction with the cancer services provided by MOH** - "I was aware of the inaccessibility of mammograms, mastectomies and chemotherapy due to the cost factor but I was also surprised to learn about the link between early detection and radiation treatment and how it's just not available! Why talk about detection if we are not giving the information about the lumpectomy options? We need to talk about the access and affordability to good surgical options if needed but also treatment via radiation following a lumpectomy or any other early cancer detection" (Quotes taken from the participants)

**11. Satisfaction with the cancer support services** - Some women expressed dissatisfaction with the support services available for women because of the lack of follow-up with women-cancer survivors, the inadequate counselling services, the lack of proper health and nutrition advice, and the poor data collection of women post treatment and recovery. Attitudinal barriers of nurses at health centres was also raised by one of the two participants. Majority of the women interviewed expressed their appreciation for the support services they received such as taxi reimbursement, patient support before and after treatment, mobilising to help fundraise for overseas treatment, counselling services before and after treatment, and making their journey with cancer less daunting.

## Outcome of the research

Towards the end of October 2018, FWRM had co-organised with the Fiji Cancer Society the launching of the research fitting as we commemorated the significance of 'Pinktober'. Engagement with key stakeholders during the launch of the research saw collective commitments made and the recognition by all stakeholders that more work was needed to be done to address the increasing rate of reproductive cancers in the country and the uneven, unaware, unequal, inaccessible cancer services existing across the country.

**About FWRM:** The Fiji Women's Rights Movement (FWRM), established in 1986, is a multi-ethnic and multicultural non-governmental organisation committed to removing all forms of discrimination against women through institutional reform and attitudinal change. Being a feminist organisation, FWRM uses feminist analysis in the work we do to address gender inequality. Some of the early advocacy work that FWRM carried out under sexual and reproductive health and rights (SRHR) centered on women's health; the knowledge and use of contraceptives and female condoms; and empowering women to take control of their own sexuality.

## One Step at a Time

**C**ervical cancer can be prevented and can be cured if it is detected early. This is the message, Dr Amanda Hill, an alumnus of the Fiji School of Medicine (FSM) and the current Acting Head of Department-Surgery, Anaesthesia and Women's Health would like the women of Fiji and the Pacific to know.

Getting women to be tested for cervical cancer has been a long-standing challenge despite the best way to prevent this 'silent killer' is through detecting it early by testing.

An Obstetrics and Medical Gynecology (O&G) Specialist, Dr Hill is closely involved with cervical cancer projects. She believes strongly in promoting and education of women's health.

Dr Hill completed her Bachelor of Medicine, Bachelor of Surgery (MBBS) at FSM in 1997, a Diploma in Obstetrics and Medical Gynecology (Dip O&G) from the University of Auckland in 2003, and her Masters in Medicine Obstetrics and Gynecology (MMed O&G) and later Graduate Certificate in Medical Education (GCME) at FSM in 2005 and 2014 respectively.

"It is interesting and special coming back and working in the halls I lived in as a medical student. I also did my Postgraduate in the same Unit I was born in.

### Becoming a medical specialist

A one-time FSM student, Dr Hill is now a regular feature at FSM's Postgraduate

Orientations in her capacity as the Postgraduate O&G Programme Coordinator. She encourages students to look after each other and make friends.

"There are many challenges in medical school and these can be bearable if you make friends. So one of the things I look back now and value is the importance of my classmates, some of whom are my colleagues now," Dr Hill said.

Medicine was her first love and Dr Hill came to FSM from the Cook Islands as a result of scoring a scholarship. It was a homecoming of sorts as her mum is from Fiji and she had family here.

Her first job after graduation was an internship at Colonial War Memorial Hospital (CWMH) in 1998 where she was attached to the Internal Medicine section.

"It is a hard year. In the first week of my internship, I certified seven deaths in one shift. It was quite damaging and demoralizing as a young doctor but it also made me stronger."

She has since worked in New Zealand, Fiji and Rarotonga.

One of the major highlights of her life was not working for two years. "I decided to stop and have a family". She has lovely seven-year-old twins.

Being a medical staff and an academic, she enjoys the challenge of combining academic life with clinical life.

### Pacific Island Cervical Cancer Screening Initiative (PICCSI)

Dr Hill is one of the founders of Pacific Island Cervical Cancer Screening Initiative (PICCSI) with Dr Nicola Fitzgerald. It is an NGO that was founded to provide accessible testing and a quick turnaround time for cancer screening. PICCSI takes cervical cancer screening out into the communities and allows women to take a swab themselves. This means it is a private procedure and the women do not have to feel embarrassed.

"Two years ago Dr Fitzgerald came over and said she had an idea and asked if I was interested. It was an opportunity. She had done the same project in PNG so why couldn't women in Fiji have self-swabs?"

"The attitude may be that it's a first world thing but it's not. Self-swab is the way to go", says Dr Hill. So, they embarked on the first pilot of self-swab for the first time last year.

"It went well. We received feedback that women liked it that they could do it themselves. One of the reasons women do not come for Pap Smear is because it's an intimate process so if they could take a swab and give it to a professional, it would be much better."

In the process, the women take a swab and return it to the volunteer. The swab is then put in the gene-expert machine which looks for different genes that cause cervical cancer. If a woman tests negative, then the chances of her getting cervical cancer is very little. If they test positive, then they do a colposcopy and then a biopsy so it gets treated right away.



### Preparing for the future

It's been an interesting journey for Dr Hill.

In regards to cervical cancer, Dr Hill points out that, there is still a lot of work to be done but the outlook is positive.

"Cervical cancer impacts not just the women but her family too. We can't treat cancer beyond a certain stage in Fiji so it's a lot more economically sensible to try and prevent it.

The future involves ensuring women receive the information they need on cervical cancer.

"There's a lot of information but taking the information to the community is a challenge. We are working on improving this".

Dr Hill credits her success to her upbringing and parents. "The mindset was that there's no shortcut to success."

I wanted to be a specialist but things were not in my favour at the time. She decided to resign and went to New Zealand to complete her Postgraduate studies. She is not shy to admit it that she failed it twice before succeeding. After that she came to Fiji to do her Masters.

"People can tell you that you can't do something but know what you want and keep going for it."

The Fiji National University's Nikua is a monthly newsletter which aims to promote the University's activities to the wider community.

This newsletter is produced by the University Marketing and Communications team.

For views or comments please email [mprc@fnu.ac.fj](mailto:mprc@fnu.ac.fj) or contact 3394000.

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