



# Gynecologic Cancers among AI/AN in the Pacific Northwest

Special Focus on Cervical Cancer: Where are we at and what's next?

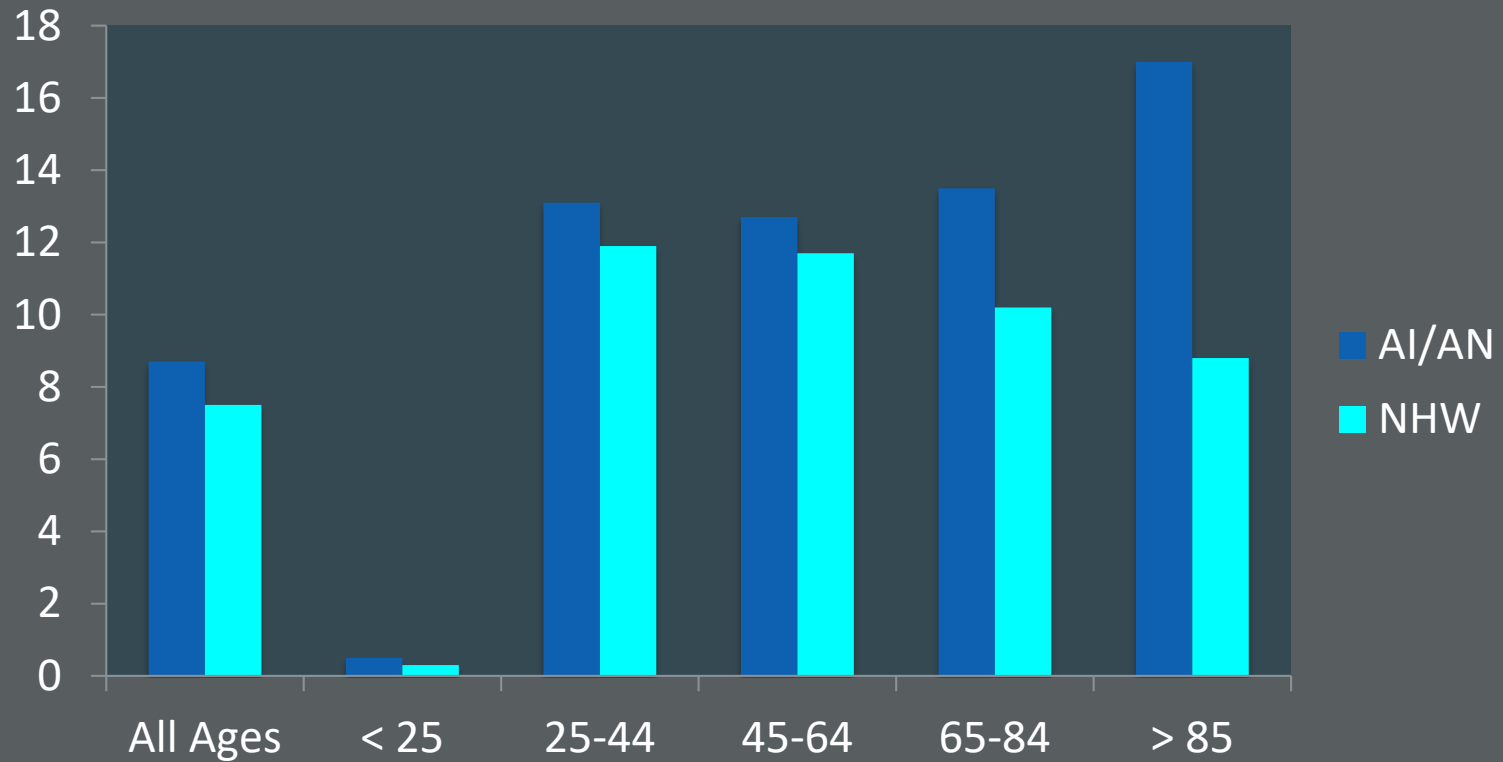
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DATE: August 2020 PRESENTED BY: Amanda S. Bruegl, MD MS

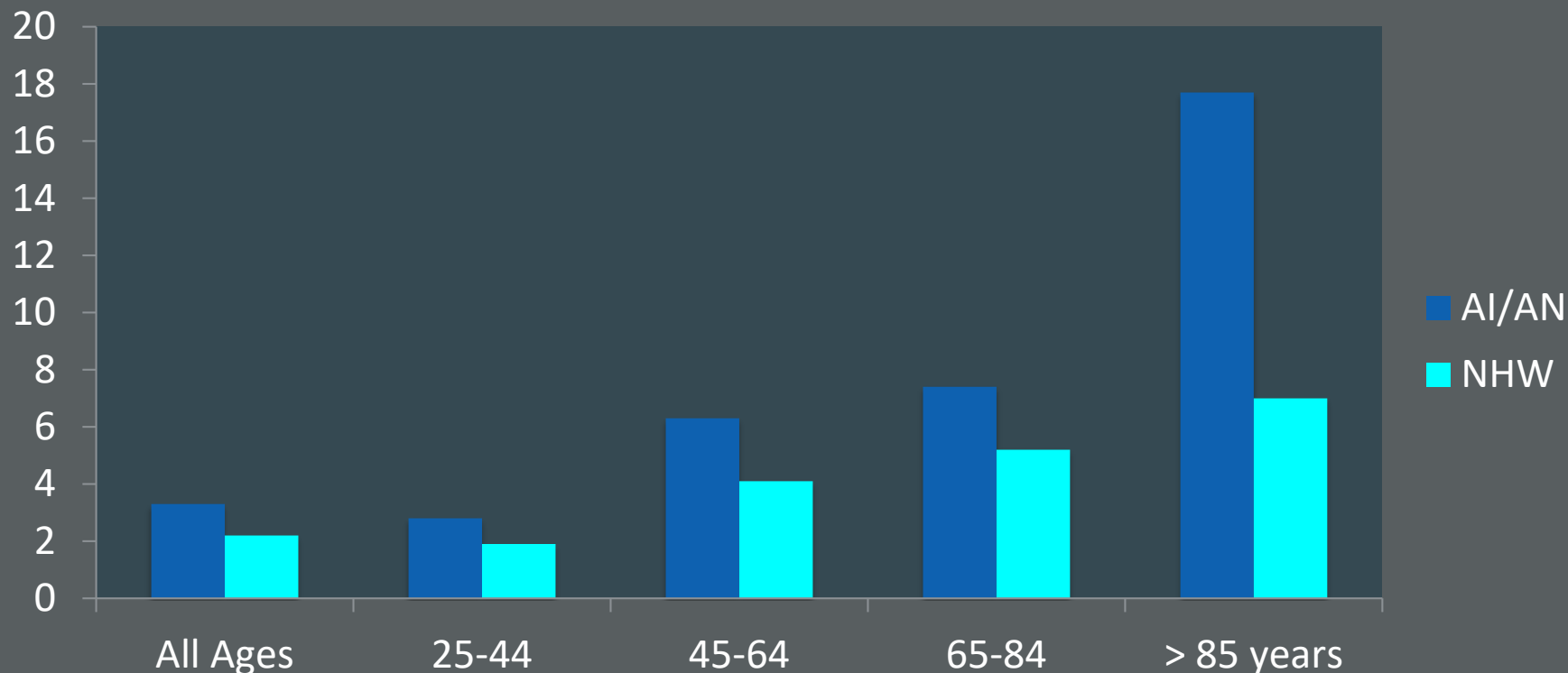
# Disclosures

- None

# National Cervical Cancer Incidence Among AI/AN Women



# National Cervical Cancer Mortality Among AI/AN Women

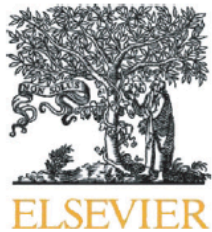


**But how do things look in the  
Pacific Northwest?**





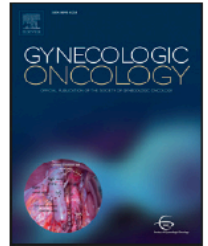
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## Gynecologic Oncology

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# Gynecologic cancer incidence and mortality among American Indian/ Alaska Native women in the Pacific Northwest, 1996–2016



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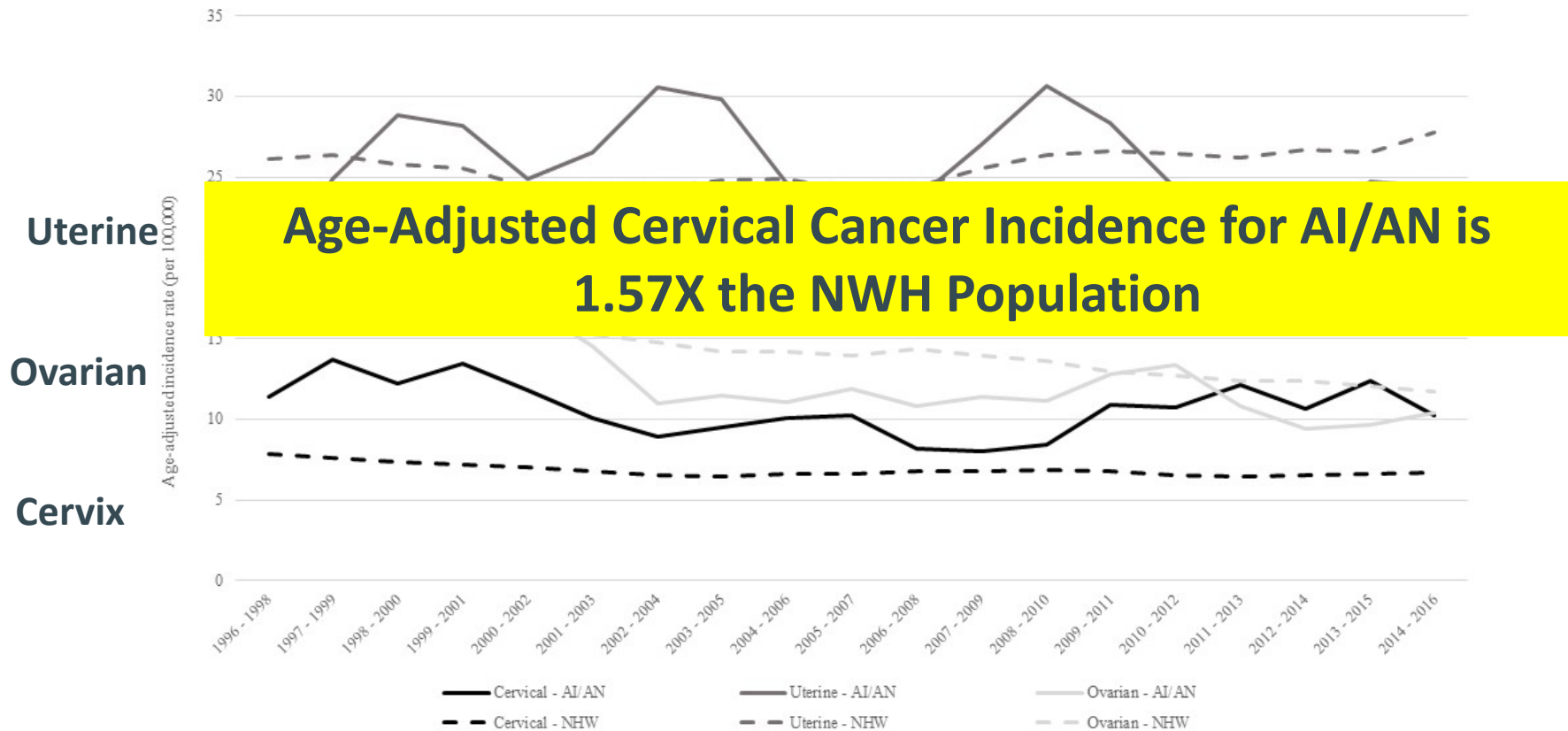
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## HIGHLIGHTS

- AI/AN women have a higher incidence of cervical cancer and a higher mortality from this disease than their NHW counterparts.
- Incidence and mortality for ovarian cancer were similar between AI/AN women and NHW women.
- AI/AN women have a higher rate of mortality from uterine cancer than NHW women, despite similar incidence rates.

# Incidence of Gynecologic Cancers in PNW

Figure 1. Trends in age-adjusted cervical, uterine, and ovarian cancer incidence rates among AI/AN and NHW, Northwest Region, 1996-2016.



Abbreviations: AI/AN = American Indian/Alaska Native; NHW = Non-Hispanic White

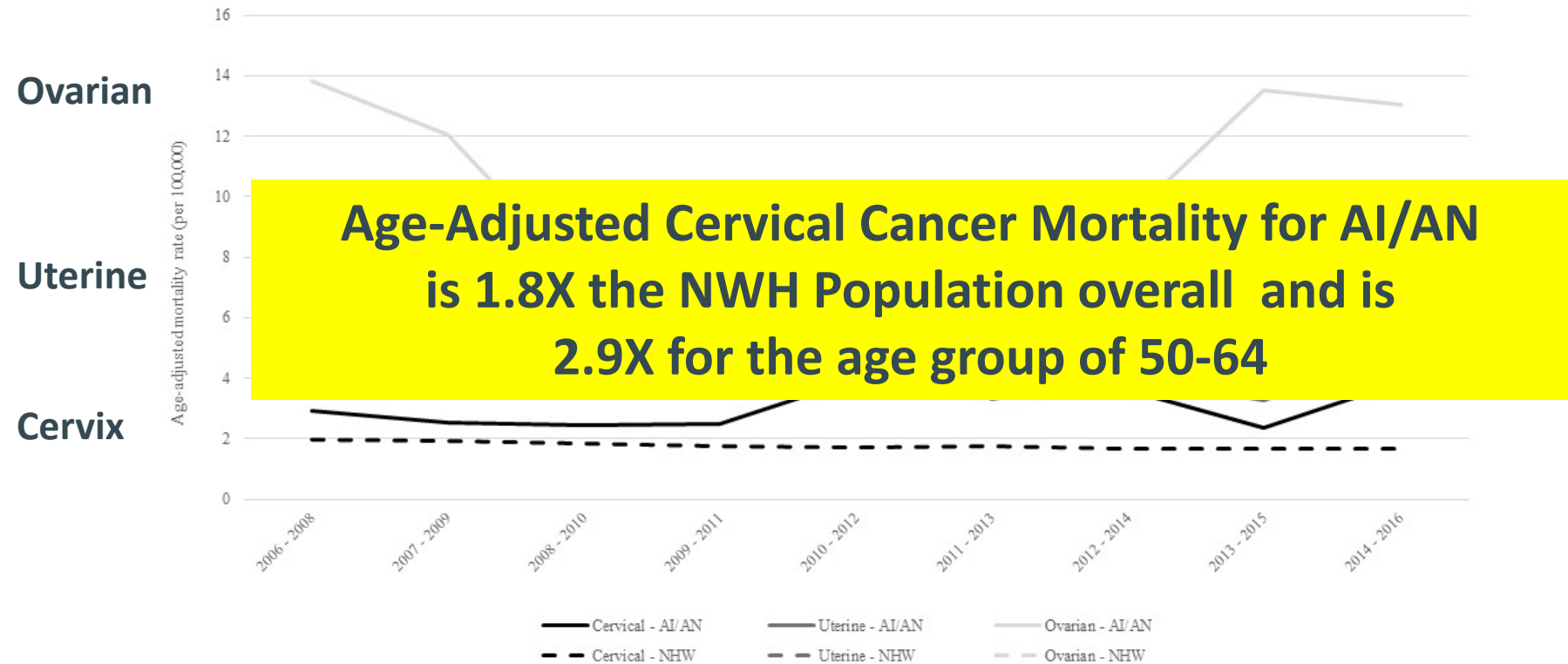
# Characteristics of AI/AN and NHW diagnosed with cervical cancer

	AI/AN	NHW
<b>Age at Dx*</b>	<b>44.7</b>	<b>49.2*</b>
<b>Age Group*</b>		
< 35	21.7%	17.0%
35-49	45.7%	39.6%
50-64	25.8%	26.1%
65+	6.8%	17.4%
<b>Stage at Dx</b>		
Localized	43.0%	51.5%
Regional	33.9%	29.9%
Distant	15.8%	11.6%



# Mortality from Gynecologic Cancers in PNW

Figure 2. Trends in age-adjusted cervical, uterine, and ovarian cancer mortality rates among AI/AN and NHW, Northwest Region, 2006-2016.



Abbreviations: AI/AN = American Indian/Alaska Native; NHW = Non-Hispanic White

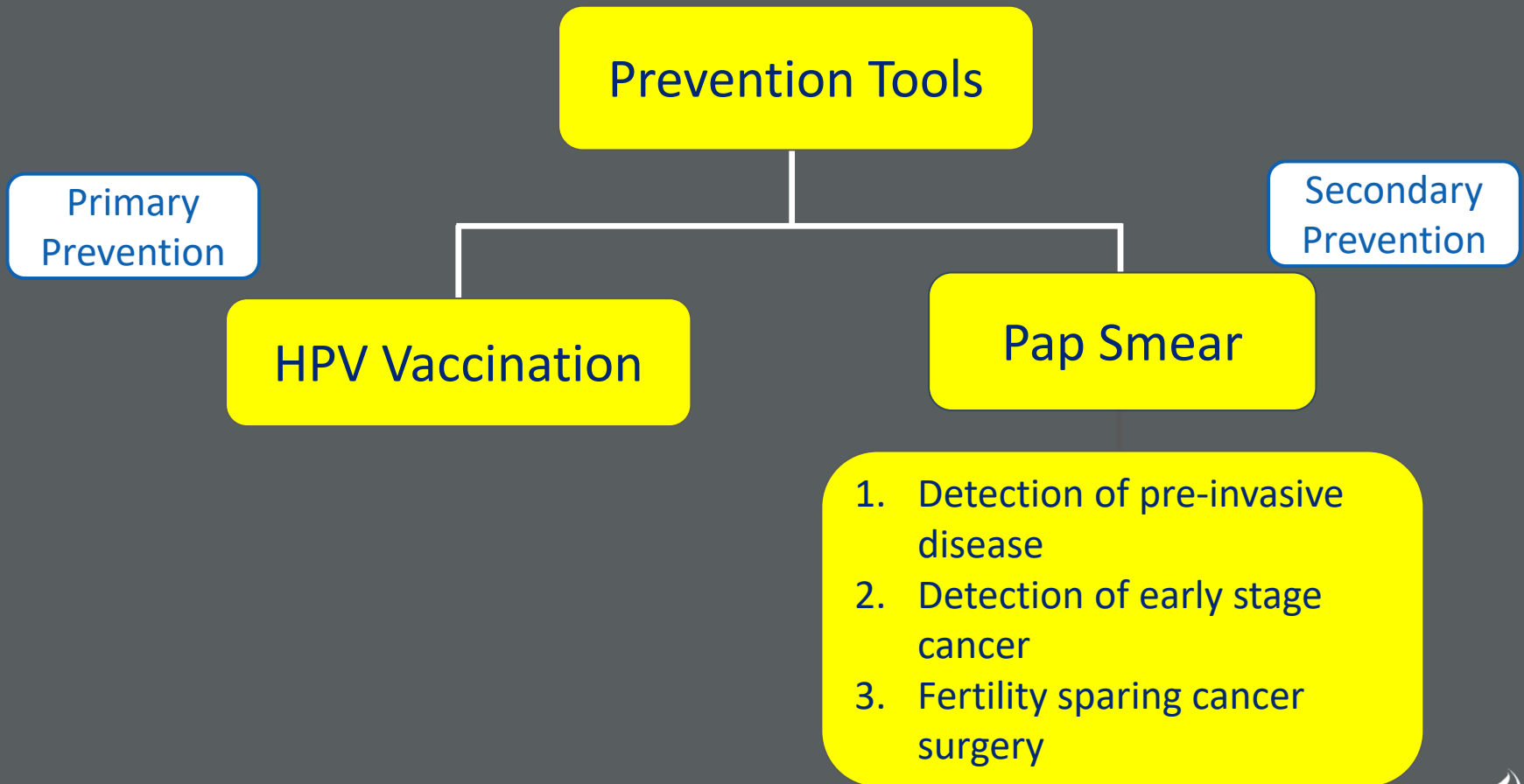
# Characteristics of AI/AN and NHW dying from cervical cancer

	AI/AN	NHW
<b>Age Group*</b>		
< 50	0.8%	0.9%
50-64	10.4%	3.6%
65+	7.1%	4.6%
<b>County of Residence*</b>		
Metropolitan	3.2%	1.7%
Non-metropolitan	3.1%	2.0%

**How do things look in the  
Pacific Northwest?**

**They Could Be Better:  
Cervical Cancer is  
**PREVENTABLE!****

# Cervical Cancer Prevention



# Advisory Committee on Immunization Practices (ACIP) HPV Vaccination Guidelines

PATIENT POPULATION	# HPV VACCINE DOSES	INTERVAL BETWEEN DOSES
Individuals Ages 9 – 14 (EXCEPT immune compromised)	2	0,6 months OR 0, 12 months
Individuals Ages 15-45 AND immune compromised patients	3	0, 1, and 6 months OR 0, 2, and 6 months



# HPV Vaccination Is Safe, Effective, and Provides Lasting Protection

## \* HPV Vaccine is SAFE

- Benefits of HPV vaccination far outweigh any potential risks
- Safety studies findings for HPV vaccination similar to safety reviews of MCV4 and Tdap vaccination

## \* HPV Vaccine WORKS

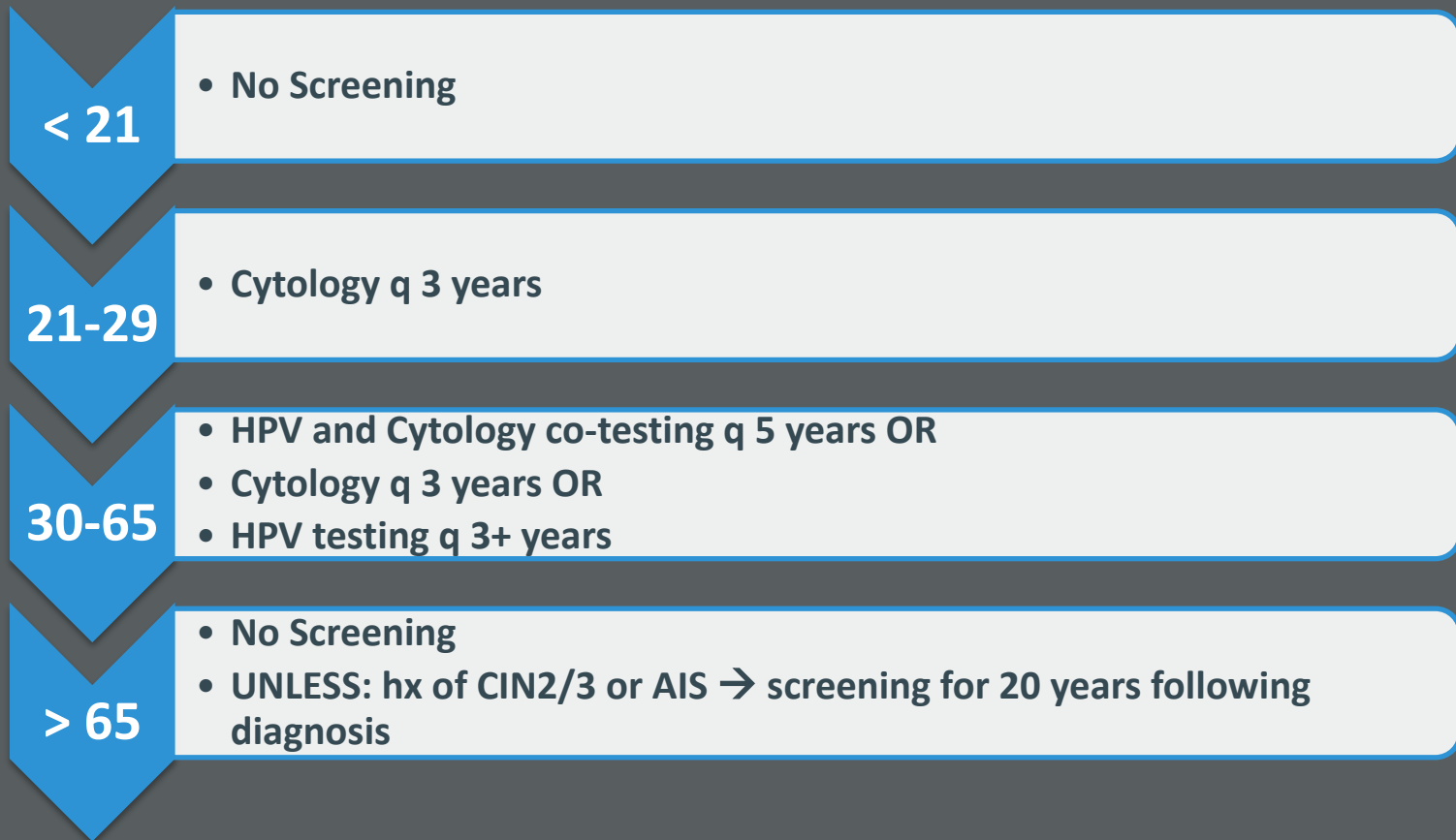
- Population impact against early and mid outcomes have been reported in multiple countries

## \* HPV Vaccine LASTS

- Studies suggest that vaccine protection is long-lasting
- No evidence of waning protection



# Cervical Cancer Screening – Guidelines for General Population



# Cervical Cancer Screening – American Cancer Society Updates

< 25

- No Screening

25-65

- Should have a primary HPV test every 5 years. Co-testing every 5 years or cytology every 3 years acceptable.

> 65

- No Screening
- UNLESS: hx of CIN2/3 or AIS → screening for 20 years following diagnosis



# Cervical Cancer Screening in HIV + women

- Cervical cancer screening with cytology should begin within one year of diagnosis (this includes women < 21 years of age)
- OR....within one year after the initiation of sexual activity
- Cervical cancer screening should continue for the duration of a woman's lifetime (i.e. do not stop at age 65)

# What are next steps for AI/ANs in PNW?

Is the research being done in Indian Country?

Are AI/AN women undergoing pap smears and are AI/ANs getting Vaccinated?

What are the barriers and facilitators to accessing prevention?

# Is the research being done in Indian Country, if yes, what type?

- Research Question:



- What is known and what gaps exist in the literature regarding the following categories in AI/ANs:

- Cervical cancer epidemiology
- Cervical Cancer screening and prevention
- Cervical cancer diagnoses



# Are AI/AN women undergoing pap smears and are AI/ANs getting Vaccinated?



<u>NATIONAL DATA</u>	AI/AN (%)	NHW (%)
Up-to-date pap smear	54.8	69.0
Received Full HPV Vaccination	48.0	41.9

- IHS FY 2016, 2017, 2018 Performance (GPRA) Measures - Tribal, IHS Direct and Urban Programs. 2017. at [www.ihs.gov/crs/includes/themes/responsive2017/display\\_objects/documents/gpra/2018/2016-208\\_Matrix.pdf](http://www.ihs.gov/crs/includes/themes/responsive2017/display_objects/documents/gpra/2018/2016-208_Matrix.pdf).)
- Percent of women aged 18 and over who had a pap test within the past 3 years. 2015. at [www.cdc.gov/nchs/data/hus/2017/071.pdf](http://www.cdc.gov/nchs/data/hus/2017/071.pdf).)
- Jacobs-Wingo JL, Jim CC, Groom AV. Human Papillomavirus Vaccine Uptake: Increase for American Indian Adolescents, 2013-2015. American journal of preventive medicine 2017;53:162-8.
- Reagan-Steiner S, Yankey D, Jeyarajah J, et al. National, Regional, State, and Selected Local Area Vaccination Coverage Among Adolescents Aged 13-17 Years - United States, 2015. MMWR Morb Mortal Wkly Rep 2016;65:850-8.



# Are AI/AN women undergoing pap smears and are AI/ANs getting Vaccinated in Oregon?



## Research Goals:

- Determine the Utilization of HPV vaccination initiation and completion among AI/ANs in Oregon
- Determine the adherence to pap smear screening guidelines among AI/AN women in Oregon



NPAIHB

Indian Leadership for Indian Health



OHSU

# What are the barriers and facilitators to accessing available prevention tools?



## Research Plan:

- Focus groups of providers and community members
- Identify strengths and areas of needed support among communities with high and low utilization of prevention tools







# Take Home Points

- Both nationally and regionally, AI/AN women have persistently suffered an undue burden of cervical cancer disparities.

**Age-Adjusted Cervical Cancer Incidence for AI/AN is  
1.57X the NWH Population**

**Age-Adjusted Cervical Cancer Mortality for AI/AN  
is 1.8X the NWH Population overall and is  
2.9X for the age group of 50-64**

# Take Home Points Cervical Cancer is **PREVENTABLE!**

## **Vaccinate!**

- FDA Approval for ages 9-45
- Target ages 11-12
- Safe, Effective, Long-lasting

## **Get Pap Smears Updated!**

- Discuss best screening strategy  
with provider

# Take Home Points

**Partner with local and regional  
community members to create  
solutions!**



Thank You