CÁNCER DE CÉRVIX

Findings and lessons learned from a multi-partner collaboration to increase cervical cancer prevention efforts in Bolivia.

Stormo AR, Espey D, Glenn J, Lara-Prieto E, Moreno A, Nuñez F, Padilla H, Waxman A, Flowers L, Santos C, Soria M, Luciani S, Saraiya M.

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<u>Abstract</u>

Cervical cancer is a leading cause of cancer death among women in Bolivia, where cytology based screening has not performed well due to health-systems constraints. In response, the Centers for Disease Control and Prevention and the Pan American Health Organization partnered with the Bolivian Ministry of Health and the Peruvian Cancer Institute (INEN) to build capacity in Bolivia for the use of visual inspection of the cervix with acetic acid (VIA) and cryotherapy. Four 5-day courses on basic clinical skills to perform these procedures, provide related counseling, and manage side effects and infections were conducted from September 2010 to December 2012 for 61 Bolivian nurses and physicians. Of these courses, two were conducted by Bolivian trainers that were certified through a Training-of-Trainers course taught by the INEN. Classroom didactic sessions included lectures and practice with anatomic models followed by clinical practice sessions to provide trainees with practical experience in VIA and cryotherapy. Pre- and post-training evaluations were administered to ascertain knowledge gained. Evaluation of competency was conducted during simulation exercises in the classroom and during supervised performances of procedures in clinical settings. This report summarizes findings and lessons learned that will be useful for planning the supervision and monitoring phase of this project as well as for future partnerships in the Latin American and the Caribbean region.

Survival prognostic factors in patients with uterine carcinosarcoma.

Magaly Malca T., Aldo López B., Carlos Santos O., Manuel Álvarez L.

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<u>Abstract</u>

Objectives: To determine survival prognostic factors in patients with uterine carcinosarcoma. Design: Retrospective cohort study. Setting: Instituto Nacional de Enfermedades Neoplasicas, Lima, Peru. Participants: Patients with uterine carcinosarcoma. Interventions: A review of medical histories and pathology reports in patients with uterine carcinosarcoma treated from 2005 through 2011 was performed. Statistical analysis used SPSS 19.0 for Windows, with frequencies and summary measures. Survival was estimated using Kaplan-Meier method. Significance was 95%, p< 0.05. Multivariate analysis for prognostic variables was done with Cox proportional hazards model. Main outcome measures: Survival prognostic factors. Results: In 37 patients with uterine carcinosarcoma mean age was 63 years, most of them (67%) presented advanced stages. Non-standardized initial surgery was performed in 33 patients (89%). Only seven patients had pelvic lymphadenectomy (19%) that did not influence overall survival. Omentectomy was done in 15 patients (40%), and eight had metastases to omentum influencing overall survival. Conclusions: Surgical and adjuvant treatments were developed in a nonstandardized way. Only factors influencing survival were stage at diagnosis and omentum metastasis. Adjuvant therapy did not improve survival. Omentectomy should be considered in staging.