

## Cervical cancer assessment in Romania under EUROCHIP-2

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### ABSTRACT

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**Background.** Inside the European project EUROCHIP-2, the Romania team has ruled out an assessment study regarding cervical cancer screening programs (CCS) in Romania, in Nov 2006-March 2007. The general purpose was to be aligned to European Council recommendations that states that an organized cervical screening program should be offered in all member states, in order to reduce the specific incidence and mortality. The aim of the study was to assess cervical cancer burden and current cervical cancer screening status in Romania and in various sub-regions (DR), and also to identify problems and barriers and to propose solutions for implementing an organized cervical cancer screening program at national level.

**Methods.** The study was based on a statistical survey and a comprehensive literature review of the most important European, national and regional papers or studies completed in this field.

**Results.** Over 2000-2006, a total number of 22,830 new cases and 12,763 deaths from cervical cancer was registered in Romania. In 2005, the crude rate of incidence varied largely in the 8 DR between 17.8-31.3 and mortality varied between 12.3-21.5. The proportion of women tested by DRs on total female population varied between 3.2%-0.6%; the highest screening activity was observed in region VI, where run the only organized CCS in Romania. In 2005, there were one GP per 578 female population aged 25-65; regarding the specialists in 2007 per country we had: 3,012 women aged 25-65 per one gynecologist, 21,195 women per one oncologist and 13,258 women per one histopathologist.

**Discussion and conclusion.** There were no major changes in policy screening over 2000-2006 correlated with no major difference in specific mortality in Romania. Significant differences in incidence and mortality between DRs were observed in 2005, which impose deeper analyzes of local conditions and resources and local strategies to be adopted. The burden of cervical cancer is particularly high in Romania and is related to the absence of an organized CCS program or the ineffectiveness of the opportunistic screening programs. It is needed that European Council recommendations be implemented and quality assurance strategies to be checked and maintained at all screening levels in Romania. Free full text available at [www.tumorionline.it](http://www.tumorionline.it)

**Key words:** EUROCHIP, cervical cancer, screening program barriers, Romanian development regions.

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