

Kandel, Ghanshyam. 2014. **Results of Cervical Cancer Screening Program in Selected Areas of Northeast Thailand.** Master of Public Health, International Public Health, Khon Kaen University.

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ABSTRACT

Cervical cancer is the third most common cancer among women in Thailand. Branch 7 of the National Health Security Office (NHSO) has been financially supported a large scale screening services aimed at reducing mortality and morbidity in Northeast Thailand since 2006. This cross sectional study aimed to assess the differences in the test results of the cervical cancer screening tests in selected areas of Northeast Thailand. Data collected for the period from 2010 to 2014 of twelve districts of four provinces namely RoiEt, MahaSarakham, KhonKaen and Kalasin was assessed. The data was made available from NHSO KhonKaen office. Bivariate analysis was done to calculate odds ratio and p values.

The median age of women being screened was 43 years (IQR 35-51 years). Of the total of 173,693 females participating in the screening attempt, 25 percent were 15-34 years old. The Mueang (urban) districts of all provinces under investigation except Kalasin had the highest proportion of abnormal cases. The Phonampai district of Roi Et, located also near the urban centre of the province, had, for a district unusual high proportion of abnormal cases. However it must be noted, that this district served for a cervical cancer screening pilot project undertaken by a medical faculty from a university at Bangkok. The extraordinary care given to the screening within the framework of a pilot project could probably not be achieved through routine procedures. The province Kalasin had a very low proportion of abnormal cases compared to other provinces. Compared to young women (15-34 years), women of middle age (35-49 years) and those aged 50 years or above had fewer abnormal tests [OR=0.68 (95% CI: 0.62-0.75) & OR= 0.59 95 % CI , 0.52-0.66).

The high proportion of missing values obtained at the RoiEt province might be an indicator of flaws in the delivery of the service, or data recording or the reporting system. Anyway this finding needs further exploration by the health authorities responsible for supervising the staff involved. Higher proportions of abnormal cases among young women could be because most young women could have gone voluntarily for screening for the first time compared to older women who might have repeated screening. Considerable numbers of very young women participating and having high rates of abnormal test indicates that the program should also prioritise younger women. Women with problems or symptoms had gone for screening in urban areas but actually living in rural districts.

It is recommended that the overall screening program in the region need to be reassessed and improvement. This also applies to the recording- and reporting system. Since the bottle neck of such a program might be the work overload of laboratory staff trained to screen the slide. Particular attention might be given to this aspect of the program. Regular screening provision should be made available for women of all ages and special health promotion activities for young women and increasing access to prevention activities in rural areas is recommended.