CANCER SCREENING FACT SHEET (3 PAGES)

FINLAND – CERVIX – 2016

SCREENING POLICY (2016)

- Population-based screening gradually implemented starting from 1963.
- Current screening policy in force since 1992 (by-law on public health, replaced by the decree on screening in 2006 with a revision in 2011) regarding the age range and interval,[1] recommendations on follow-up and treatment of screen-positives and screen-detected lesions were updated in 2016.[2]
- National target age range 30-64 years. Some municipalities invite also 25- and 65-year old women.
- All resident women due for screening based on the birth-year are personally invited preferably (but not exclusively) with a scheduled appointment, excluding only women with a data access prohibition in the population registry. Invitations are physical letters. One scheduled re-invitation per screening round is recommended but not universally adopted.
- Interval between negative screens is 5 years.
- Primary screening test is predominantly cytology but can also be HPV.
- Criteria for follow-up screening test are ASC-US or hrHPV positivity for all women, LSIL for women below the age of 30.
- Criteria for referral for diagnostic confirmation are ASC-H, HSIL+, AGC-NOS and AGC-FN+, and persistent ASC-US, LSIL or hrHPV positivity for all women, or LSIL for women above the age of 30.
- Before the by-law of 1992, the birth cohorts to be invited varied somewhat between municipalities. National invitation coverage exceeded 80% for 40-, 45- and 50-year old women in 1970 (reaching close to 100% in 1975), for 35-year old women in 1975, for 55-year old women in 1995, and for 30- and 60-year old women in 2000.[3,4]

More information on the screening programme: Cervical cancer screening

More information on the recommendations on cervical screening, diagnostic verification, treatment and follow-up [in Finnish, with flow-charts]: Current Care Guidelines

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[1] Government decree on screenings 339/2011. Available from http://www.finlex.fi/en/

[2] Kohdunkaulan, emättimen ja ulkosynnytinten solumuutokset (online). Suomalaisen Lääkäriseuran Duodecimin ja Suomen Kolposkopiayhdistyksen asettama työryhmä. Helsinki: Suomalainen Lääkäriseura Duodecim, 2016. Accessed on 12.12.2016. Available from: http://www.kaypahoito.fi

[3] Anttila A, Pukkala E, Söderman B, Kallio M, Nieminen P and Hakama M. Effect of organised screening on cervical cancer incidence and mortality in Finland, 1963-1995; Recent increase in cervical cancer incidence. Int J Cancer 1999;83:59-65.

[4] Finnish Cancer Registry. Cervical cancer screening Time series by age groups 1991-2011, age group screening. Accessed on 23.12.2016. Available from http://www.cancer.fi/syoparekisteri/en/mass-screening-registry/statistics/

POPULATION, TESTS AND TEST COVERAGE (2014)

Population data are retrieved from the population registry as the aggregate number of resident women at the end of each calendar year stratified by birth year.

Individual level screening test data are retrieved from the electronic screening records at the Mass Screening Registry covering primary screening tests and secondary follow-up screening testing (risk-group testing) analysed by either cytology or HPV. The Mass Screening Registry includes screening visits, tests and diagnostic confirmation in the organised programme, linked to invitations; opportunistic or other tests outside the programme that are estimated to number two thirds of total test volume are currently not routinely recorded. The number of women tested in each period is calculated by internal linkage using the unique personal identifier. National registration coverage of screening test data is 100% from 2008 and onwards; for the period between 1991 and 2007 coverage fluctuates between 87% (1995) and 99% (2004).[5] The registration coverage has not been corrected for in the calculation of Nordscreen indicators and actual test coverage in Finland is therefore higher than reported for indicators using test data from the period before 2008.

Test coverage is calculated as the proportion of women in a specified age range on the last day of the index year with at least one registered test in a specified preceding period of time.

Summary measures [age range]	
Total population in the national target age range [30-64]	1 237 377
Total population in the common core age range [30-59]*	1 045 468
Total number of tests registered [25-69]	198 780
Total number of tests within the national target age range [30-64]	187 189
Total number of tests within the common core age range [30-59]*	155 709
Test coverage according to national screening policy [5.5-yearly; 30-64]	71.5 %
5.5-yearly test coverage within the common core age range [30-59]*	69.9 %

***The common core age range [30-59] is the minimum age group targeted in EU countries that have population-based screening policies in place.[6]**

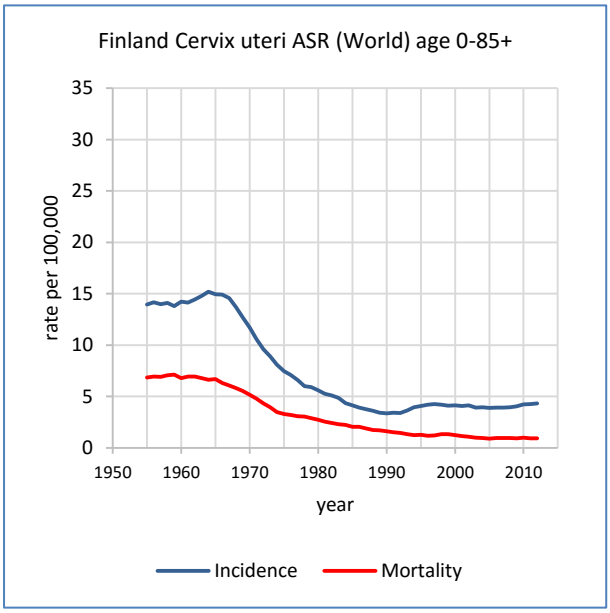
[5] Finnish Cancer Registry. Cervical cancer screening Time series 1991-2011, age group screening. Referenced 12.12.2016. Available from http://www.cancer.fi/syoparekisteri/en/mass-screening-registry/statistics/

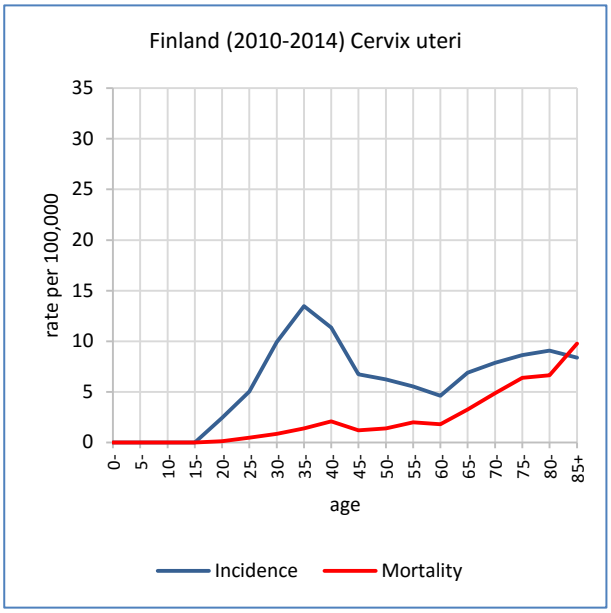
[6] Cancer Screening in the European Union (2017) Report on the implementation of the Council Recommendation on cancer screening. Available from https://ec.europa.eu/health/sites/health/files/major_chronic_diseases/docs/2017_cancerscreening_2ndreportimplementation_en.pdf

CERVICAL CANCER BURDEN (2010-2014, *FROM NORDCAN*[7])

Number of cervical cancers per year	**159**
Number of cervical cancer deaths per year	53**
Age-standardised (W) incidence rate	4.3 / 100 000 person-years
Age-standardised (W) mortality rate	0.9** / 100 000 person-years

**Cancer registry data has been used to validate the cause of death and the remaining number of deaths specified as Uterus, other, is low (7 cases per year, all in ages 60+), composed mainly of ICD-10 code C55 (Uterus, NOS) with only the occasional death from C58 (Placenta).





[7] Engholm G, Ferlay J, Christensen N, Kejs AMT, Hertzum-Larsen R, Johannesen TB, Khan S, Leinonen MK, Ólafsdóttir E, Petersen T, Schmidt LKH, Trykker H and Storm HH. NORDCAN: Cancer Incidence, Mortality, Prevalence and Survival in the Nordic Countries, Version 7.3 (08.07.2016). Association of the Nordic Cancer Registries. Danish Cancer Society. Accessed on 12.12.2016. Available from http://www.ancr.nu