



Consider every girl in Canada born in 1995...



When this cohort turned 12 years old, these girls were vaccinated for HPV 16 & 18.



At 21 years old, they will be screened for cervical cancer.

WITH VACCINATION, HPV prevalence will go down.

CURRENT **SCREENING GUIDELINES**:

Screening

Every 3 yrs Start at 21 yrs

2060

SCENARIOS

Should we continue to screen vaccinated women for cervical cancer?



What's the impact on incidence, deaths and costs if we CHANGE OUR SCREENING GUIDELINES?

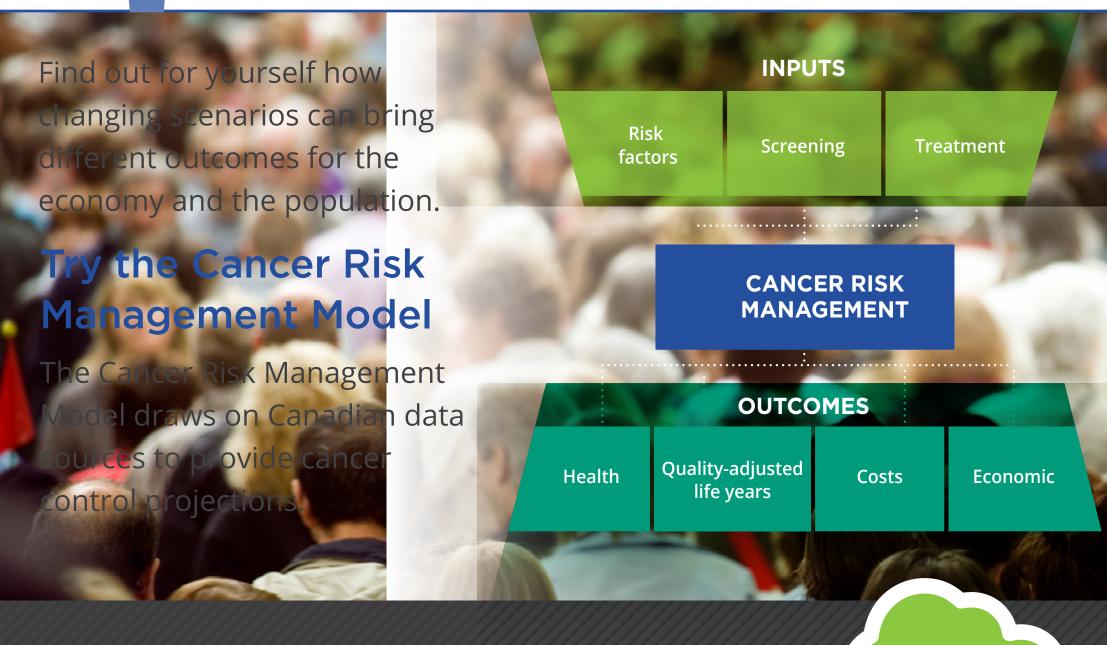
FUTURE INCIDENCE PER 100,000 *in the year 2060*

9/ TOTAL COHORT CERVICAL CANCER DEATHS

LEGEND CHANGE **TOTAL LIFETIME COST (billions)** *vaccination* + *screening* + *treatment, discounted* 3% **HIGHS** LOWS 12.96 Highest Vaccination 1,517 incidence and No screening 0.33 highest deaths 8.34 No vaccination Screening GUIDELINES 1,186 Every 3 yrs Highest cost 1.06 Start at 21 yrs 4.69 Vaccination 594 Screening Every 3 yrs 0.97 Start at 21 yrs Vaccination CHANGE TO SCREENING 5.42 Screening 736 FREQUENCY **Every 5 yrs** 0.74 Start at 21 yrs More cost-effective 7.35 Vaccination outcomes are possible Screening 988 with vaccination and **Every 10 yrs** 0.57 Start at 21 yrs a change to our current screening guidelines. Vaccination 4.98 CHANGE TO SCREENING AGE RANGE Screening 601 Every 3 yrs 0.88 Start at 25 yrs 4.94 Vaccination Screening 621 Every 3 yrs 0.78 Start at 30 yrs

population. Assumed screening rate of 80% of the population.

Note: CRMM v2.1 Assumed vaccination rate of 70% of the



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