FOREWORD

EUROGIN 2007 roadmap on cervical cancer prevention

The mission of EUROGIN is to promote excellence in the field of HPV infections, prevention and management of pre-cancers and cancers of the cervix and lower genital tract. EUROGIN is a forum for multidisciplinary exchange of knowledge and views, for consultation and for sharing experiences among experts, research scientists, and clinicians. It also represents a platform for genuine teaching, education and information for physicians, patients and public health authorities.

The demonstrated effectiveness of HPV prophylactic vaccination opens a new era of hope for both health professionals and women. It urges us to continue our ongoing efforts to promote information, training, communication, education and coordination of resources to ensure the best-practice solutions to prevent, control and treat genital pre-cancers and cervical cancers worldwide.

EUROGIN has a long record of experience in building consensus, since 1997. Our aim is to promote the highest standards in cervical cancer prevention by translating evidence-based data into clinical practice. The rapidly increasing volume and complexity of medical advancements in this area makes it difficult for physicians to incorporate data into the daily practice. Therefore, EUROGIN Consensus Conference Guidelines are proposed as a tool to assist physicians in the decision making process, and hence improve quality of care.

The process of developing guidelines includes needs’ assessment, defining and evaluating implementation options, and thus revision is complex and requires a great deal of expertise and experience.

The main objectives of the EUROGIN guidelines are:

- To enhance professional learning, patient education and physician communication.
- To recognize the physician’s responsibility to his/her patient, and balance the needs at the private and public health level.
- To reach a consensus in the field of cervical cancer prevention, based on high level of collective expertise.
- To coordinate strategies for implementation of the recommendations, emphasizing the role of patients, physicians and other healthcare providers.
- To promote the dissemination of information through traditional communication channels, networking and the internet.

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The EUROGIN consensus on prevention of cervical cancer was reviewed in 1997, 2000 and updated in 2003 and 2007 [1–6]. For the first time new options for Europe, including liquid-based cytology and HPV testing in clinical management and primary screening, were incorporated. Subsequently, vaccines against the most common cancer-causing HPV types have been developed, tested in clinical trials, and launched.

This year the EUROGIN Consensus Conference focused on HPV prophylactic vaccination against cervical neoplasia and cancer. Four specific topics were addressed: (1) age of HPV vaccination; (2) is viral status needed before vaccination; (3) screening approaches for vaccinated populations; and (4) monitoring of vaccinated women.

The choice of these topics was proposed in order to assist the physician, and to answer the main and urgent questions he/she has in the daily practice.

Chapters were developed on the above four conference topics and authors were directed to the following structure: background and rationale, current evidence-based medical practice, expert opinion, recommendations, directions for future research, clinical perspectives, references and disclosure of potential conflicts of interest.

The peer-review process included three levels: (A) two coordinators (J. Monsonego (France) and A. Singer (UK)) from the EUROGIN board of directors. Their role consisted of defining the general framework, determining the topics of interest and the oversight of compliance with timelines. (B)
Two independent chair persons who also participated in the review process (C. Wheeler (US) and S. Franceschi (France)). They had the role of acting as an interface between the authors and a working group of reviewers to reach a consensus. (C) Eight experts, as members of the drafting group, including two experts responsible for drafting each topic.1

The choice of the authors was based on the following criteria:

- Proven experience of collaborating with EUROGIN.
- Clear commitment to a common cause of cervical cancer prevention and record of relevant publications.
- Ability to express an opinion in full independence, to serve the cause of cost-effective cervical cancer control, even when involved in disclosed partnerships with industry.
- A balance representation between clinicians and non-clinicians, and also between North America and Europe.

The strength of this project relied on a multidisciplinary team, in order to assist clinicians in the daily practical questions and decisions. In addition, a group of 47 selected independent reviewers aimed to ensure the representation of a variety of relevant disciplines. Their comments were taken into account by the chairs before finalizing the report.

Process

The authors provided a draft report on their respective topics, that was circulated through the reviewers’ group by January’07. Modifications were made based on discussions, and the statements were approved before the EUROGIN Conference 2007.

The EUROGIN 2007 Roadmap contrasts with the former assignment of EUROGIN guidelines published in 1997, 2000 and 2003. The Roadmap designation represents an approach that provides direction to current and future best practices related to HPV vaccines while acknowledging the rapidly evolving landscape and evidence related to primary and secondary cancer prevention. As additional data on HPV vaccination becomes available from clinical trials, statements in the document will be updated as needed. The full report is published with a series of other papers presented here, and available at EUROGIN web site (www.eurogin.com) and at Elsevier web site (www.sciencedirect.com).

This collection of papers shall represent an independent synthesis of experts’ views and opinions with sufficient substance, details on methodology and contextual information to aid clinicians and policymakers. The chairman endorses the conclusions as the EUROGIN 2007 roadmap is based on the current evidence, taking into account the views and opinions of the majority of the reviewers.

The challenges ahead are many, but let me highlight a few priorities:

1. To understand the burden of HPV disease and to recognize the respective role of primary and secondary prevention in the control of cervical cancer, ensuring the complementary and synergistic implementation of these two preventive measures to achieve the goal of eliminating the disease. In addition, to be aware of the importance of compliance and coverage of the target populations as a main issue to reach visible public health benefits.

2. To improve the level of knowledge of the physician by providing a simple and clear message through the communication channels available to date.

3. To promote an educational program for changing the attitude of the public—moving from a curative system to preventive approach.

Acknowledgements

The group of reviewers included the following persons: K. Ault (USA), F. Breitbart (France), X. Castellsague (France), C. Clavel (France), L. Denny (RSA), J. Dillner (Sweden), B. Duval (Canada), Elbasha (USA), A. Ferency (Canada), J.M. Foidard (Belgium), I. Frazer (Australia), G. Garnett (UK), S. Goldie (USA), A. Hildesheim (USA), P. Hillemans (Germany), E. Joura (Austria), H. Lawson (USA), Lehtinen (Finland), C. Meijer (Netherlands), A. Moscicki (USA), N. Munoz (France), D. Nardelli-Haefliger (Switzerland), S. Pagliusi (Switzerland), J. Patnick (UK), K.U. Petry (Germany), W. Prendiville (Ireland), M. Quinn (Australia), G. Ronco (Italy), P. Sasieni (UK), M. Schiffmann (USA), J. Schiller (USA), A. Schneider (Germany), T. Schwarz (Germany), J. Sherris (USA), H. Strickler (Australia), S. Syrjänen (Finland) and J. Wardle (UK).

References


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