

PEDAGOGICAL-ACADEMIC EXTENSION ON DIAGNOSIS AND FIGHT AGAINST CERVICAL CANCER: AN EXPERIENCE REPORT

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KEY MESSAGES

What is already known about the topic? Cervical cancer screening declined during the COVID-19 pandemic in Brazil. What are the new discoveries? Virtual extracurricular pedagogical activities on this topic aimed at medical students expand the theoretical foundation of this audience. What do these new discoveries imply? Consequently, they increase the level of curriculum content for the performance of students and future medical professionals. What are the consequences of the findings? They provide greater domain and technical engagement for the specialized clinical approach of patients in programs to combat this neoplasm.

ABSTRACT

INTRODUCTION: Cervical Cancer (CC) is one of the most common malignancies among women worldwide. In Brazil, it is the third most incident and the fourth cause of cancer mortality in women, without considering non-melanoma skin tumors¹. This disease settles in the uterine cervix and its main risk factor is the infection by Human Papilloma Virus (HPV) with carcinogenic potential, mainly types 16 and 18, responsible for about 70% of cervical cancers. With this work, it is intended to report experience of academic-pedagogical action, carried out to instruct students on how to prevent and diagnose CC. **REPORT:** The activity “Cancer of the Cervix, not here!”, organized by the student department, took place during the “Março Lilás” period, via virtual platform and was taught by a gynecologist. 89 students participated. The initial approach was a recorded reenactment of a problem situation. Afterwards, the lecture started and was explained about HPV, the levels of prevention, diagnosis and the importance of CC. At the end of the action, participants were encouraged to reflect, with a moment of exposure and resolution of the issues raised. **DISCUSSION:** It reflected on the person-centered consultation, vaccination and Pap smear. This activity provided experimentation with dynamic ways of teaching students, who were hampered by the suspension of classes and face-to-face services due to the quarantine. It also highlighted the decrease in performance of CC screening during the COVID-19 pandemic. The lecture also served as an incentive for future studies on the impact of the pandemic on CC screening. **CONCLUSION:** The discussions held by the invited professional allowed the understanding, by the students, of ways to prevent CC, the possible clinical manifestations of HPV in females, the importance of self-care and screening, in addition to diagnosis and treatment.

KEYWORDS: Uterine Cervical Neoplasms; Early Detection of Cancer; Primary Prevention.

INTRODUCTION

Uterine Cervical Neoplasms; Early Detection of Cancer; Cervical cancer (CC) is one of the most common malignant neoplasms among women in the world. In Brazil, it is the third most recurring and the fourth cause of cancer mortality in women, without acknowledging non-melanoma skin tumors. This disease settles on the cervix and its main factor is the Human Papilloma Virus (HPV) infection with cancerogenous potential, mainly types 16 and 18, which are responsible for about 70% of cervix cancers (1).

The CC can be prevented in two levels. The first level is the Primary prevention, in Brazil, it is done by the "Sistema Único de Saúde" (SUS), through vaccination with two doses of the quadrivalent vaccine (Gardasil®) for boys, aged between 11 and 14 years, and girls, between 9 and 14 years-old. However, it does not replace the need for screening, given that less than 40% of women of the target age in the world are vaccinated – an even lower incidence in less developed countries (2). For secondary prevention, there are specific guidelines for the screening of malignancy through cytopathological examination, primarily in the primary care of the SUS (3,4).

A new paradigm of approach to the CC was established, due to the Coronavirus pandemic (COVID-19) that impacted health systems. In this scenario, elective procedures, including cancer screening, were suspended to prioritize emergencies and reduce the risk of dissemination of the new coronavirus (5).

In this context, involving social isolation and reallocation of health services, distance communication, education and awareness actions are essential for the target audience. Health professionals and academics, including medical students, who can have an active role in the dissemination and guidance of information, must continue their roles in prevention through remote activities.

Thus, the objective of this work is to report the experience of the activity, in lecture format, promoted in order to raise awareness and encourage medical students about clinical aspects of cervical cancer and help fight against neoplasm.

REPORT

The academic-pedagogical action entitled "Cervical Cancer, not here!" came up with the intention of providing tools to medical students on how to prevent and diagnose UCC and present the signs and symptoms of this disease.

The lecture contributed to the enrichment of the "Março Lilás" campaign, month alluding to combating cervical neoplasia, and, in addition to motivating, provided subsidies for students to bring information and guide the female population, in order to clarify the importance of self-care and the prevention of that disease.

The project was idealized by academics of the graduate course in medicine, working in a public health axis of a student division. The event took place via virtual platform

and was taught by a doctor with residence in Gynecology and Obstetrics. It had the participation of 89 students from different periods, having as initial approach a staging made by three academic organizers of the event and presented in video format. In it, the case of a 35-year-old patient with low socioeconomic status, who began sexual life at the age of 14, without a steady partner and who denied the use of contraceptives, was represented. Upon arriving at the clinic of Gynecology, she chose not to take the examination of Pap smear, for shame in exposing their intimate parts, the non-recognition of being part of the risk group and for not knowing, to be sure, what is and for what purpose this exam months later, she returned to the clinic with the clinic compatible with the disease in focus and was confirmed with tests.

After the presentation of the video, the speaker made a theoretical approach on the main factor involved in the etiology of Cervical Cancer, Human Papilloma Virus (HPV), its levels of prevention and diagnosis, possible factors that interfere in the acceptance or not of the oncotic cytology exam, such as early onset of sexual activity, low socioeconomic status, multiplicity of partners and inadequate intimate hygiene. During the activity, participants were encouraged to reflect on the fictitious case presented and the epidemiological data discussed during the lecture. Furthermore, there was a moment dedicated to the participants to expose their questions to the invited professional.

At the end of the activity, an impact assessment was carried out using a non-mandatory virtual form, made available through a link in the meeting platform chat. It was not necessary to review the Research Ethics Committee, according to the Brazilian Resolution No. 510/2016 of the National Health Council, item VIII - activity carried out solely for the purpose of education, teaching or training without the purpose of scientific research, undergraduate students, technical courses, or professionals in specialization will not pass the CEP/CONEP system evaluation (6). The evaluation methods consisted of 8 guiding questions, two referring to the degree of knowledge about prevention and diagnosis before and after the event; one on the ability to talk about the topic; three related to the identification of signs and symptoms before and after the lecture; one on the quality of the event; and one for suggestions.

The activity achieved a high level of engagement and involvement; contributes with complementary theoretical knowledge; it enabled better conduct in the approach of patients, especially in the gynecology outpatient clinics of the students' higher education institution; another positive point was the encouragement to deepen the theme among the participating academics, with subsequent production of bibliographic reviews and epidemiological studies.

The main difficulties encountered during and after the execution of this activity were finding a common time in which the largest number of participants from the target audience adhered, due to the current and mandatory curricular activities of the students. Also noteworthy is the drop in the number of participants at the end of the event establishing disparity between the numbers of enrolled and answered impact assessments.

DISCUSSION

At first, there was a reflection on how important it is to carry out a person-centered consultation, clarification about the necessity of barrier methods such as condoms, in addition to HPV vaccination and Pap smears. It is known that the screening of women using the oncotoc colposcopy test can reduce the mortality rate from CC by 80%. However, each year there are approximately 500,000 new cases in the world, of which 70% occur in underdeveloped countries (7,8).

The persistence of high-risk HPV infection and poor screening of the female population are the main factors responsible for the development of this pathology (9). In the behavioral profile of women who develop this cancer, the highlights are early age at first sexual intercourse, multiplicity of partners with history of sexually transmitted infections, use of oral contraceptives, multiparity, precocity in the first pregnancy, in addition to studies on the influence of smoking and poor diet on some micronutrients (8).

CC is still a public health problem in Brazil, where the highest prevalence and mortality rates are found in women with less favored social and economic conditions and in those who have difficulty in accessing health services for detection and/or treatment of the disease, for economic, geographical and cultural reasons (8).

However, it is a disease sensitive to Primary Care actions, as technologies for control - diagnosis and management of precursor lesions - are already established and allow cure in approximately 100% of the cases detected in the initial phase (7). The relation between the reduction in screening and the high rate of diagnosis at more advanced stages is a reflection of health inequity, as it is a representation of avoidable and unfair morbidity and mortality.

During the participation of the gynecologist, it was also mentioned about epidemiology, etiologic agent, forms of prevention, conducting the gynecological consultation and highlighted about the decrease of screening for this type of neoplasm during the pandemic. It is known that the spread of COVID-19 has impacted health systems around the world in relation to elective procedures, including, for example, the examination of oncotoc cytology (1). Cancer screening has been hampered in most countries to prioritize reduction of the spread of the new coronavirus (SARS-CoV-2) (3).

Through the dialogue, the need to encourage the female population to determine their own health goals and behaviors, to learn about health and diseases, with intervention and support strategies, counseling and ongoing supervision, was considered. It was discussed about personal hygiene, strategies to detect and prevent diseases, in particular Sexually Transmitted Diseases (STD), such as Human Immunodeficiency Virus (HIV) infection, and aspects related to sexuality and sexual functioning.

It was observed that investing in prevention and awareness of the population is less costly than the curative treatment of

different types of pathologies, especially in public health network, thus reducing costs with hospitalizations, surgeries and treatments (10). Therefore, it is necessary that, during exams and consultations, these women are treated with respect and dignity, do not feel ashamed or embarrassed and accept to undergo future exams and consultations.

With this moment, it was also possible to experience a more dynamic, practical and allusive form of teaching for those who are at the beginning of the course or with suspended practices. In addition, the difficulties faced in medical education were discussed due to the decrease in elective face-to-face consultations in the context of a pandemic. Furthermore, academics, as well as health teams, have the responsibility to contribute to the mediation between different interests, in relation to health, existing in society (10). And for that, it is necessary to insert this information during graduation and train students about the importance of this theme and the way to approach the population.

Finally, there was an incentive for future studies on the impact of the pandemic on CC screening; surveys that correlate the provision of health services; the characteristics of the relationship between demand and use of health services, recognizing aspects and/or dimensions that act as facilitators or obstacles to this use by potential users; and, health service delivery outcomes (11).

CONCLUSION

The explanation of the pedagogical activity based on Cervical Cancer allowed the elucidation of the theme among the academic community, including a holistic approach to the content based on scientific knowledge demonstrated by a specialized professional in the area using technical terms focused on pathophysiology, diagnosis and adherence to most effective forms of treatment. The discussions allowed the students present to understand the ways to prevent CC, various clinical manifestations of HPV in females and the importance of self-care.

Moreover, there was also a focus on therapeutic forms and on the importance of encouraging the dissemination and facilitating access to these types of knowledge, sometimes overlooked by medical education, in order to remedy possible failures in the service to the population and in the management of this type of comorbidity.

The limitations of this activity includes, in addition to the general reasons of the global context of not being carried out in person, concerns about the choice of the best time for greater adhesion of the target audience, suggesting that in reproduction of this activity, an evaluation is made in the event planning in order to identify the best day and time for the participants. There was also a drop in participation at the end of the event and in the number of contributions for impact assessment, with shorter lectures being suggested, as well as the realization of dynamics to improve participation.

In view of this successful experience, its reproduction in other institutions is recommended, as well as the production of investigations and other studies, in order to draw attention to the elucidation of the problem of CC screening and the consequences in the context of the pandemic.

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POTENTIAL COMPETING INTERESTS

The authors declare that they have no competing interests.

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