



National Institute for Public Health
and the Environment
Ministry of Health, Welfare and Sport



Monitor screening programs in the Caribbean Netherlands

Cervical cancer population screening

Figures for 2022-2023

Between February and November 2022, the cervical cancer screening program was introduced in the Caribbean Netherlands: first on Saba, then on Sint Eustatius and finally on Bonaire.¹

The first results are:

- a properly set up screening process on each island that is tailored to that island's specific situation;
- the availability of information materials, allowing people to make an informed decision about participation;
- training or refresher courses for those who perform the cervical swab tests on all islands;
- all analyses are performed by a single accredited laboratory on Curaçao. This laboratory carries out both the test for the human papilloma virus (HPV typing) and the cytology test for cancer cells;
- a number of tasks have been delegated to local and regional partners, such as information provision and sampling. The RIVM screening organization remains responsible for monitoring the entire screening process;
- a screening process that follows the guidelines applicable in the European Netherlands as much as possible.

¹ The key figures for the first year of breast cancer screening on Bonaire were summarized in 2022 in a [monitor](#) for 2021-2022.

Cervical cancer population screening figures for 2022-2023

Saba

Introduction

Cervical cancer screening was introduced on Saba in February 2022, in partnership with Saba Cares. In this publication, we present the data for the first year (February 2022–November 2023).



Of all the samples received, 4 (<3%) were unsuitable for HPV analysis. All cytology analyses could be performed.

The screening program

Because of the relatively small size of the target group on Saba, we have organized a number of screening rounds each year. On Saba, we started by inviting women aged 50 to 60. They were soon followed by women from other age groups. Over the course of the three-year pilot, we will invite all women in the target group. As it is not possible to send invitation letters on Saba by regular mail, women are invited by telephone or WhatsApp. Additionally, women in the target group can make an appointment themselves. The screening interval after the initial screening is five years. After the samples are taken, they are collected, packaged and shipped to the laboratory on Curaçao.



The number of women who participated in the first year of cervical cancer screening was 135 (so far, around 29% of the total target group – women aged 30 to 60 – have participated).



Cervical cancer or a preliminary stage (CIN2+) was found for 6 out of a total of 10 referrals (60%).

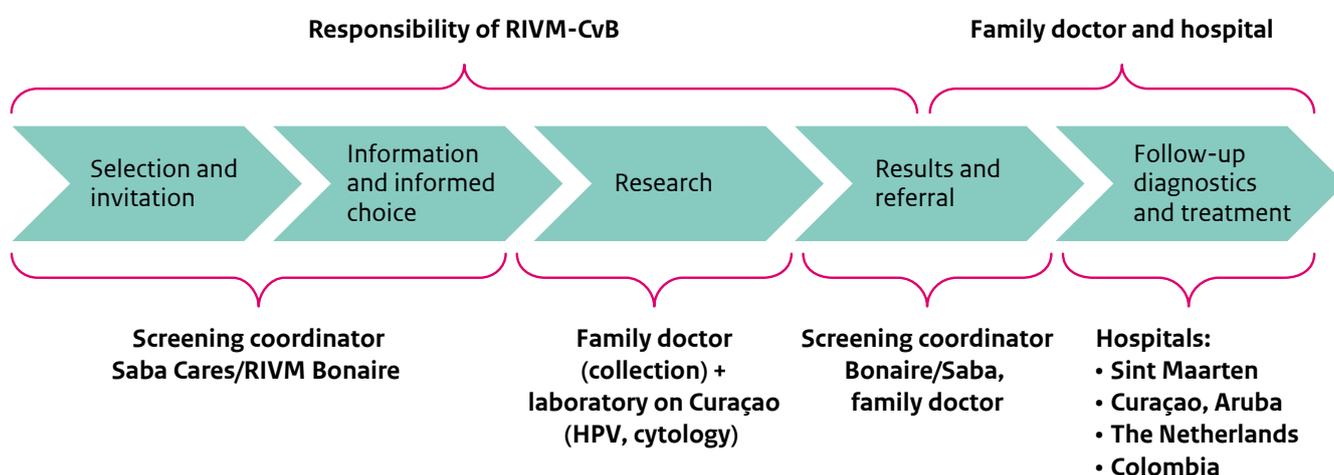
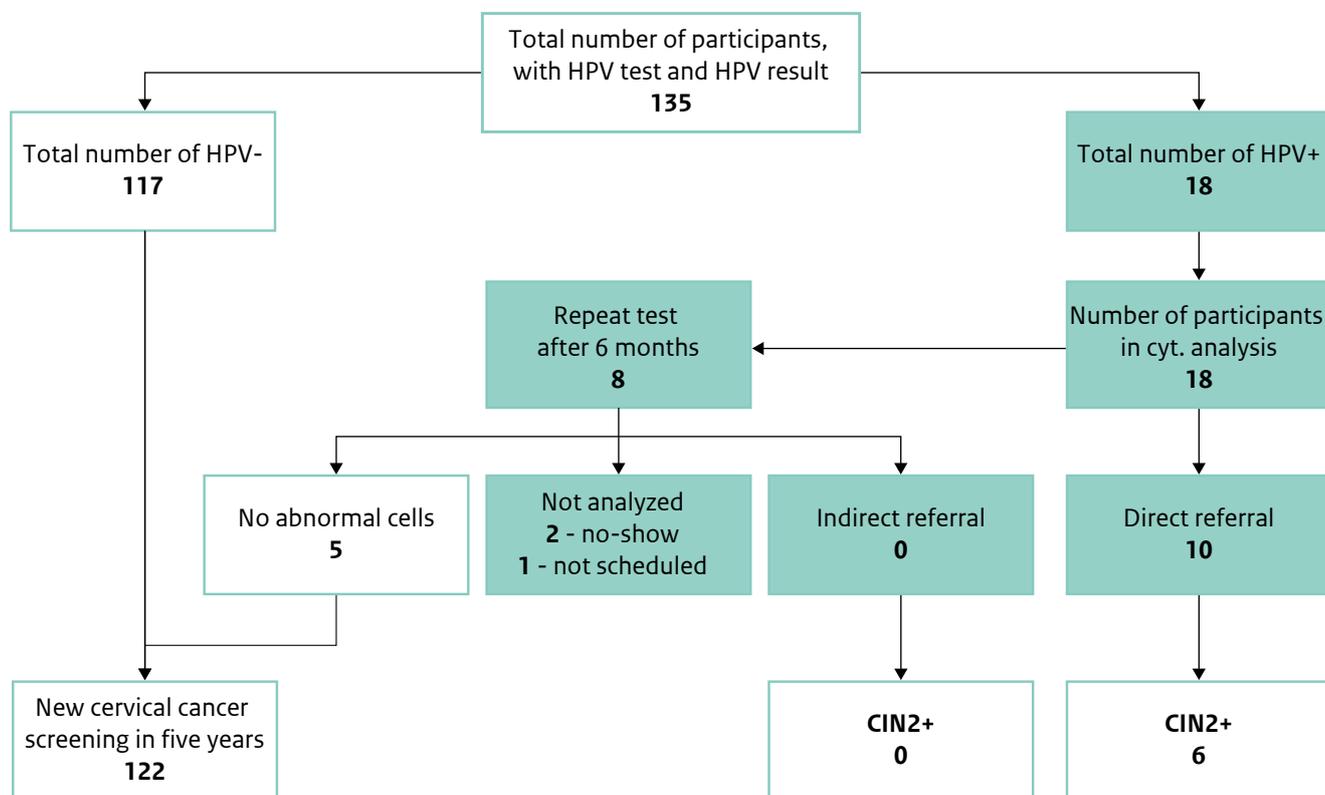


Figure 1. Flow chart of the screening process for cervical cancer screening on Saba in 2023



This figure shows data of participants whose HPV test result was known before November 15, 2023.

- 18 of the 135 samples (13%) were HPV+.
- A cytology analysis was performed for all 18 HPV+ samples (100%).
- Abnormal cells were found in 10 of the 18 samples (56%). The participants involved were referred for a diagnostic examination.
- Eight participants received an invitation to have a cytology analysis performed after 6 months for a re-check.
- Five of these eight participants (63%) participated in this repeat cytology test. In all cases, the results were negative. At the time of reporting, an analysis had not yet been performed for the other 3 participants.

Figure 2. Number of women who were eligible to participate (entire column) and number of women who actually participated (in green). Participants aged over 60 were admitted, as this was their last chance to participate in the screening.

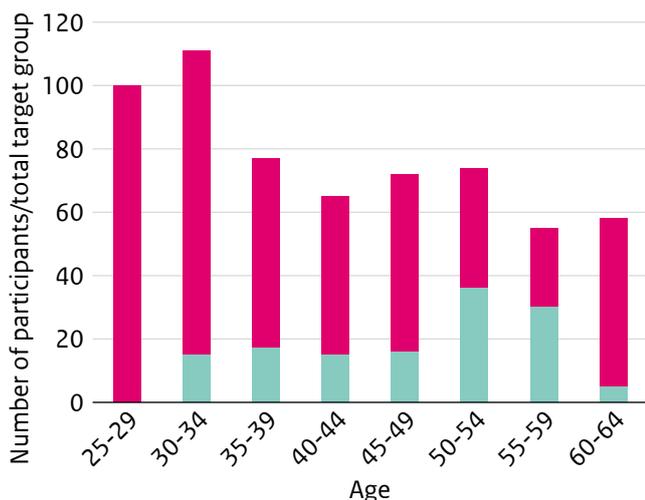


Figure 3. All results were reported to the screening organization within the agreed 28-day period

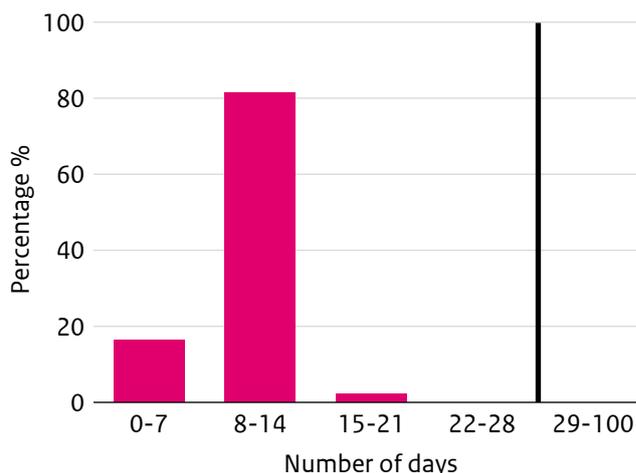


Table 1. Number of telephone invitations by age category

Age category	Number of telephone invitations
30-39 years	147
40-49 years	70
50-59 years	80

Key results

1. In spite of the logistical demands of shipping the samples to Curaçao, the screening results were reported to the screening organization on time.
2. Four cervical swab tests could not be analyzed. A repeat sample was required. This is no cause for alarm – the staff who perform the cervical swab test have received special training. We will continue to monitor the number of repeat cervical swab tests.
3. 13% of participants were HPV+. Generally speaking, the number of participants was too low to be able to compare the results to those of other programs.
4. The data in Figure 2 seems to indicate that the participation rate was slightly higher in the 55–59 age category.

Cervical cancer population screening figures for 2022-2023

Sint Eustatius

Introduction

Cervical cancer screening was introduced on Sint Eustatius in June 2022, in partnership with the Public Health and Prevention Clinic and the Sint Eustatius Health Care Foundation. In this publication, we present the data for the period from the start of the program in June 2022 until November 15, 2023.

The screening program

Because of the relatively small size of the target group on Sint Eustatius, we have organized a number of screening rounds each year. On Sint Eustatius, we started by inviting women aged 50 to 60, followed by the younger groups. Over the course of the three-year pilot, we will invite all women in the target group. Participants receive an invitation letter. Additionally, women in the target group can make an appointment themselves. The screening interval after the initial screening is five years. After the samples are taken, they are collected, packaged and shipped to the laboratory on Curaçao.



Of all the samples received, 1 (<1%) was unsuitable for HPV analysis. All cytology analyses could be performed.



The number of women who participated in the first year of cervical cancer screening was 139 (so far, around 17% of the total target group – women aged 30 to 60 – have participated).



Cervical cancer or a preliminary stage (CIN2+) was found for 2 out of a total of 11 referrals (18%).

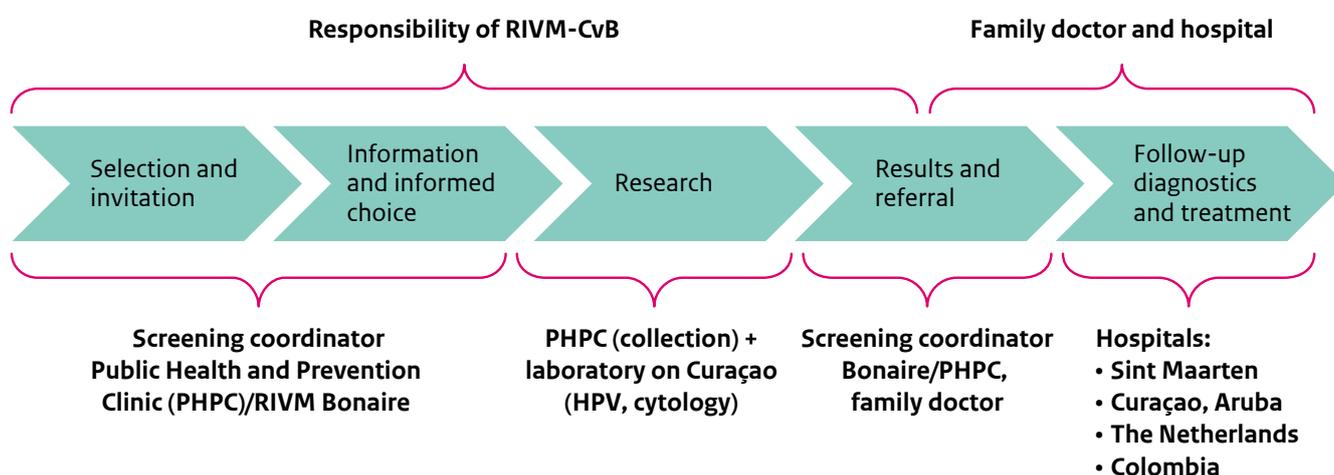
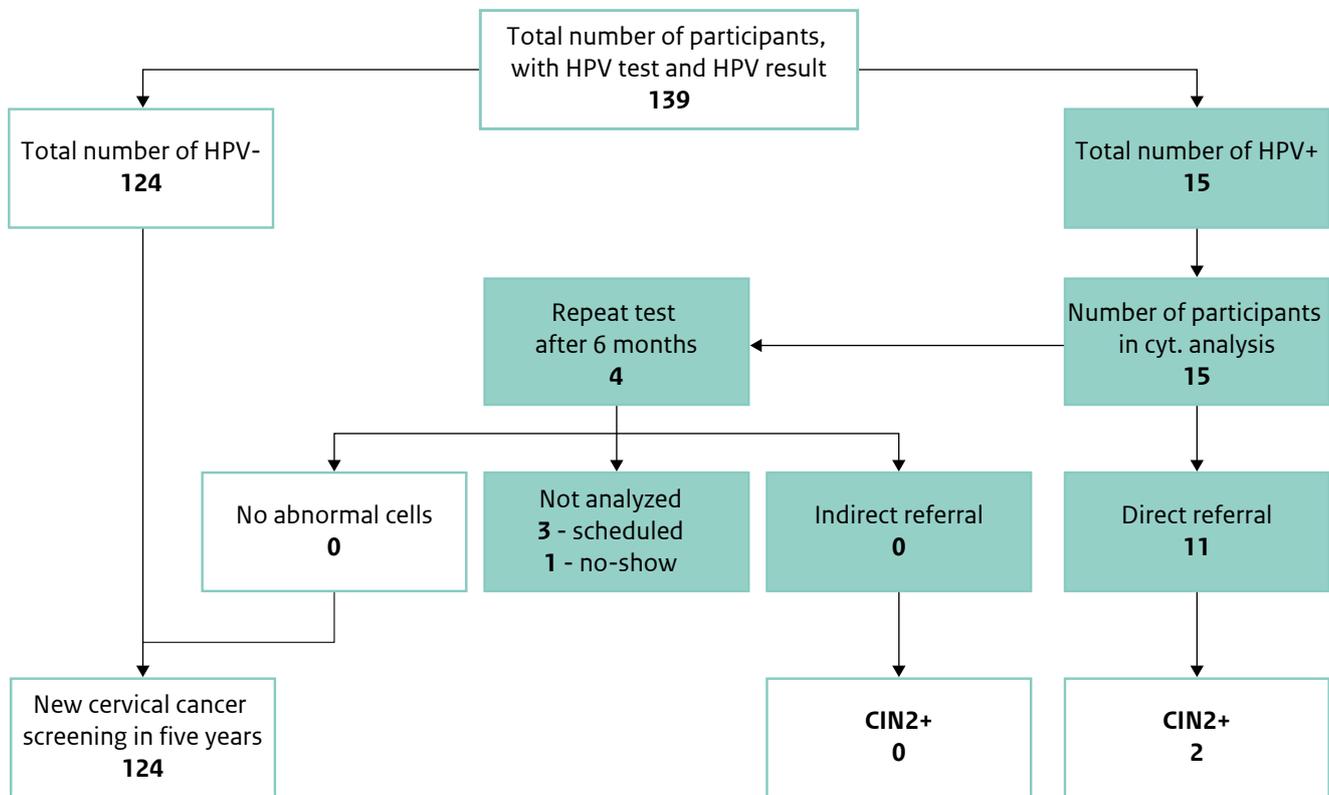


Figure 1. Flow chart of the screening process for cervical cancer screening on Sint Eustatius in 2023



This figure shows data of participants whose HPV test result was known before November 15, 2023.

- 15 of the 139 samples (11%) were HPV+.
- Abnormal cells were found in 11 of the 15 samples (73%). The participants involved were referred for a diagnostic examination.
- Four participants received an invitation to have a cytology analysis performed after 6 months for a re-check. At the time of reporting, these analyses had not yet been performed.

Figure 2. Number of women who were eligible to participate (entire column) and number of women who actually participated (in green). Participants aged over 60 were admitted, as this was their last chance to participate in the screening.

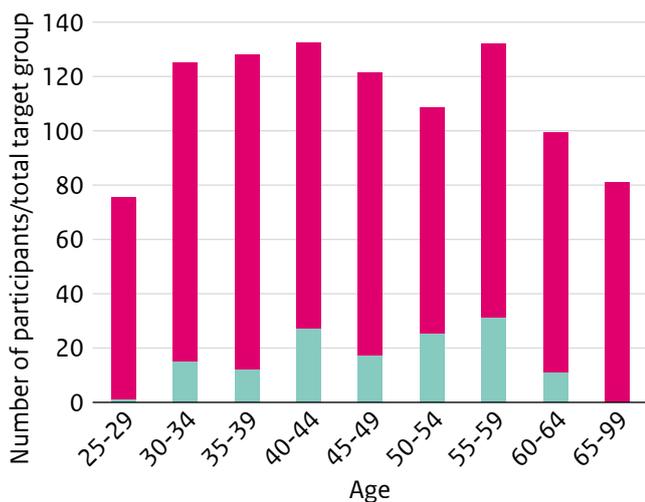


Figure 3. All results were reported to the screening organization within the agreed 28-day period

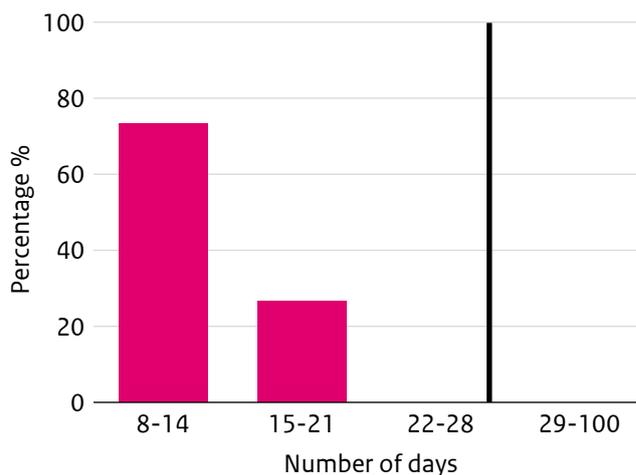


Table 1. Number of invitations sent by age category

Age category	Number of telephone invitations
30-34	50
35-39	54
40-44	201
45-49	161
50-54	88
55-59	102
60-64	5

Key results

1. In spite of the logistical demands of shipping the samples to Curaçao, the screening results were reported to the screening organization on time.
2. The number of cervical swab tests that, after sampling, proved unsuitable for analysis was very low, meaning that the cervical swab tests were done correctly and that the quality of the samples was still good enough for analysis upon arrival at the laboratory.
3. 11% of participants were HPV+. Generally speaking, the number of participants was too low to be able to compare the results to those of other programs.
4. The data in Figure 2 seems to indicate that the participation rate was slightly higher in the 55–59 age category. So far, only a small proportion of women on Sint Eustatius have participated. We will continue to invest in good education and information provision.

Cervical cancer population screening figures for 2022-2023

Bonaire

Introduction

Cervical cancer screening was introduced on Bonaire in November 2022, in partnership with family doctors. In this publication, we present the data for the period from the start of the program in November 2022 until November 15, 2023.



Of all the samples received, 4 (<1%) were unsuitable for HPV analysis. All cytology analyses could be performed.

The screening program

On Bonaire, an invitation letter is sent to a selection of women in the target group every month. Participants can visit their family doctor at set hours to have a cervical swab test performed. We started by inviting women aged 50 to 60 on Bonaire as well, followed by the younger groups. Over the course of the three-year pilot, we will invite all women in the target group. Additionally, women in the target group can make an appointment themselves. The screening interval after the initial screening is five years. After the samples are taken, they are collected, packaged and shipped to the laboratory on Curaçao.



The number of women who participated in the first year of cervical cancer screening was 560 (so far, around 10% of the total target group – women aged 30 to 60 – have participated).



Cervical cancer or a preliminary stage (CIN2+) was found for 1 out of 2 indirect referrals (50%) and 7 out of 64 direct referrals (11%). No diagnostic data is available for 20 of the 64 direct referrals.

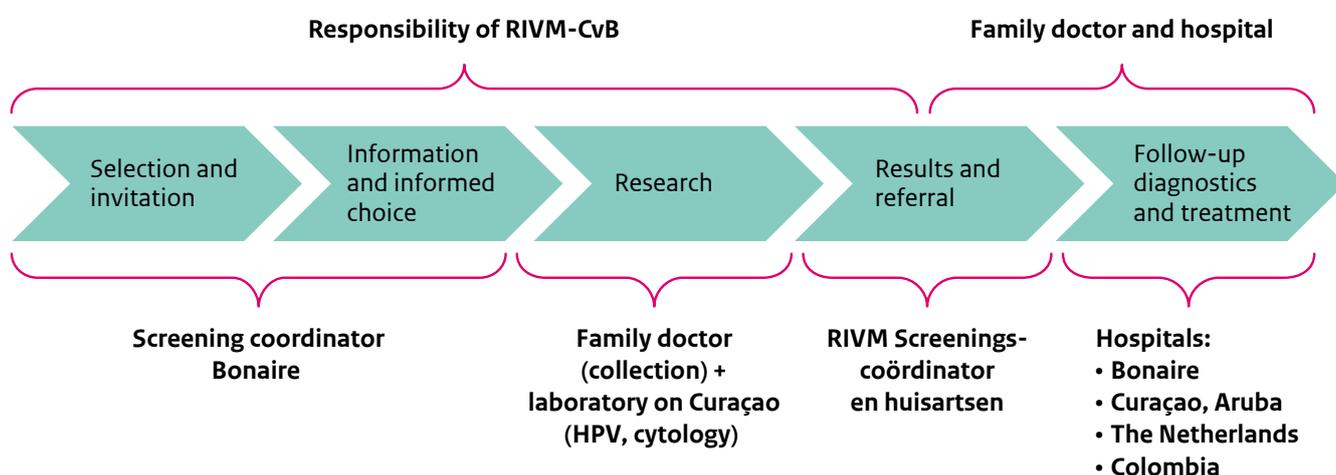
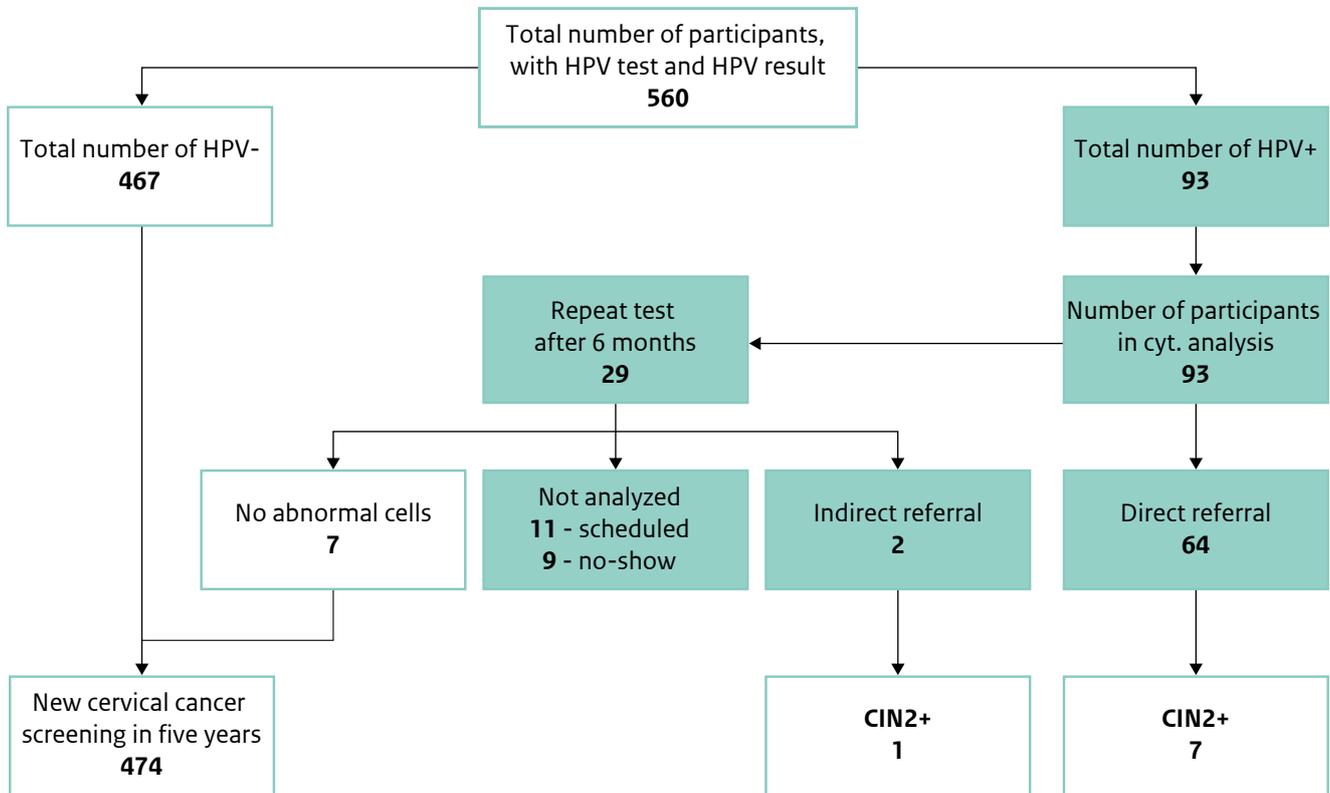


Figure 1. Flow chart of the screening process for cervical cancer screening on Bonaire in 2023



This figure shows data of participants whose HPV test result was known before November 15, 2023.

- 93 of the 560 samples (17%) were HPV+.
- A cytology analysis was performed for 93 of the 93 HPV+ samples (100%).
- Abnormal cells were found in 64 of the 93 samples (69%). The participants involved were referred for a diagnostic examination.
- 29 participants received an invitation to have a cytology analysis performed after 6 months for a re-check. Nine of these participants (31%) participated in this repeat cytology test. At the time of reporting, an analysis had not yet been performed for the other 20 participants.

Figure 2. Number of women who were eligible to participate (entire column) and number of women who actually participated (in green). Participants aged over 60 were admitted, as this was their last chance to participate in the screening.

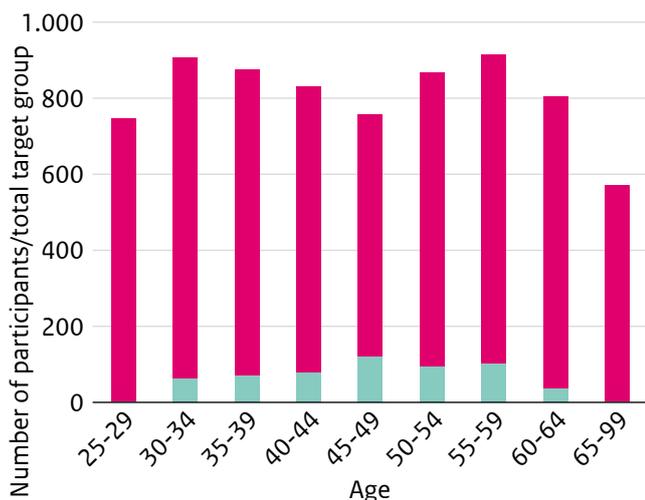


Figure 3. 99% of the results were reported to the screening organization within the agreed 28-day period

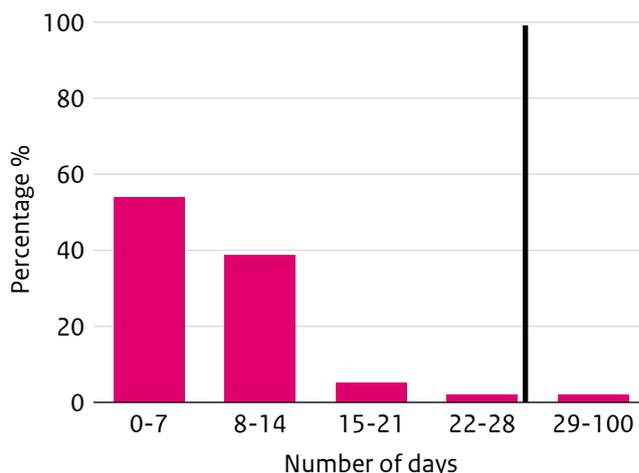


Table 1. Number of invitations sent by age category

Age category	Number of telephone invitations
30-34	-
35-39	-
40-44	119
45-49	689
50-54	352
55-59	735
60-64	42

Key results

1. In spite of the logistical demands of shipping the samples to Curaçao, the screening results were reported to the screening organization on time.
2. Four cervical swab tests could not be analyzed. A repeat sample was required. This is no cause for alarm – the staff who perform the cervical swab test have been well trained. We will continue to monitor the number of repeat cervical swab tests.
3. 17% of participants were HPV+. Generally speaking, the number of participants was too low to be able to compare the results to those of other programs.
4. The data in Figure 2 indicates that the participation rate was slightly higher in the 45–49, 50–54 and 55–59 age categories. A possible explanation for this is that these women received an invitation letter. Even so, several younger women participated. So far, 16% of women on Bonaire in every age category have been screened. We will continue to invest in good education and information provision.

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The cervical cancer population screening in
the Caribbean Netherlands is carried out by:

