



Results of the Psycho Estampa Study on the Social and Psychological Consequences of Positive Human Papillomavirus Testing In Jujuy, Argentina

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Abstract

Testing for the human papillomavirus can have a severe effect on women's life and may cause them to forego follow-up and treatment. This study evaluated the psycho-social effects of HPV positivity in Jujuy, Argentina, a middle-to-low socioeconomic region, among women who had undergone HPV testing. The Psycho-Estampa Scale, which was created and validated specifically for use in screening environments, was utilised in this cross-sectional investigation to assess the psycho-social impact of HPV positive. The Overall Impact score as well as the mean scores for each of the five scale domains were calculated. Using ordinal logistic regression, we compared scores based on cytology triage diagnosis. The study sample consisted of 163 women who had tested positive for HPV at the Centro Carlos Alvarado hospital, 124 of whom had normal triage cytologist. The total Impact rating was Concerns about cancer and treatment had the biggest psycho-social impact, followed by the sexuality domain. The domain with the lowest mean score was Uncertainty regarding information provided by health providers.

Keywords: Human Papillomavirus DNA Tests, Argentina, Latin America, Psycho-social impact

INTRODUCTION

With more than 500,000 new cases and 250,000 deaths per year, 90% of which occur in middle-low income countries, cervical cancer continues to be a severe public health issue worldwide (Wong CH., et al 2018). Human papillomavirus testing, a substitute for traditional screening methods was created in recent years to identify sexually transmitted infections involving carcinogenic forms of HPV (Davis C., et al 2017). HPV testing has been found to effectively lower cervical cancer incidence and mortality due to its high sensitivity and negative predictive value (Peterson DL., et al 1994). Additionally, HPV testing enables self-collection of sample, which is useful in boosting screening uptake. In order to speed the eradication of cervical cancer, the World Health Organisation currently advises screening using HPV testing in conjunction with HPV vaccine. More than 15 nations have implemented HPV testing throughout the world (Koestner A., et al 1971). The majority of the countries in the region

are doing pilot or demonstration projects in order to advance towards nationwide implementation of primary screening, while Argentina and Mexico are adopting it as a public health policy for the prevention of cervical cancer (Rabotti GF., et al 1964). To reduce the incidence of cervical cancer, there must be high screening coverage and strong follow-up recommendations and treatment adherence (Cuatico W., et al 1976). Given that oncogenic HPV infection is relatively common among women aged 30 and older, many of the women who are screened will be found to have the virus (Yoshida J., et al 1978). Triage tests are used to identify HPV positive women who will need diagnosis and treatment (Huszthy PC., et al 2012). Only a portion of HPV + women will have a positive triage test indicating a precancerous lesion requiring further evaluation. HPV testing identifies infection with an oncogenic type of HPV that cannot be treated (Simeonova I., et al 2014). Most HPV + women will receive an HPV+/trriage negative result, necessitating repeat screening in 12–18 months due to the HPV test's moderate

specificity for detecting cervical preconcert (Neely JE., et al 1983). Therefore, while it is possible to detect an infection with an oncogenic strain of HPV, a positive result does not guarantee that the infection will result in cervical cancer (Barbarich Marsteller NC., et al 2013).

DISCUSSION

Preconcert cancer, or the need for treatment for the lady (Aoki., et al 2012). The majority of women who contract HPV will recover naturally. Evidence suggests that because of all these factors, HPV testing may negatively affect women's psychosocial well-being (Giordano GD., et al. As a result of the infection's known sexual transmission, HPV positivity infers promiscuity, stigmatisation, and impurity and can engender feelings of shame, anxiety about upcoming relationships, and concerns about the woman's or their partner's sexual behaviour (Connan F., et al 2006). Dominiak-Felden Additionally, HPV results may cause worry, fear of dying, disease denial, or a woman's decision to forgo further testing, treatment, or follow-up (Beadle JN., et al 2015). It has been demonstrated that when people believe that an abnormal screening test indicates cancer and certain death, they are more Barriers to the diagnosis and treatment of precancerous lesions may also arise from their relationship with a sexually transmitted disease. As a result, HPV positive can have a detrimental psychosocial influence on women's lives, which may lead to a lower quality of life as well as a decreased ability to complete diagnosis, treatment, and follow-up. Nevertheless, no study from Latin America has statistically examined the possible negative psychosocial impact of HPV testing as primary screening using a validated scale particularly designed to measure it. In order to create a scale and assess the psychosocial effects of HPV positivity in the context of cervical cancer prevention programmes employing HPV testing as the primary screening, we conducted the Psycho-Estampa study in Colombia and Argentina. Women with aberrant cytologist had a higher risk of having a greater total Psycho-social Impact than women with normal cytologist. According to the cytology results, no statistically significant variations were discovered in the scores of particular domains. To lessen the psycho-social effects of HPV testing as primary screening and its potential impact on the completion of the diagnosis/treatment process, it is vital to develop particular counselling interventions.

CONCLUSION

Nevertheless, no study from Latin America has statistically examined the possible negative psycho-social impact of HPV testing as primary screening using a validated scale particularly designed to measure it. In order to create a scale and assess the psycho-social effects of HPV positivity in the context of cervical cancer prevention programmes employing HPV testing as the primary screening in Latin America, we conducted the Psycho-Estampa study in Colombia and Argentina. The Psycho-Estampa study is

a component of ESTAMPA, a multicentre investigation directed by IARC-WHO to assess various cervical screening and triage strategies utilising HPV. The results of the psychosocial effects of women who had their HPV tested in Jujuy, Argentina are presented in this research. As far as we are aware, this is the first assessment. Utilising a validated scale created especially for Latin American women, of the psychosocial effects of HPV testing in the region. As a result, it provides crucial information for developing policies aimed at minimising effects, enhancing women's quality of life, and enhancing their capacity to continue receiving follow-up treatment. Women who were tested at the gynaecology department of the Centro Sanitaria Dr. Carlos Alvarado, the primary hospital in San Salvador de Jujuy, the provincial capital, made up the study population. In this gynaecological programme, about 6,000 women are routinely tested for HPV. Women who tested positive for HPV and had abnormal cytology's were advised to have a colposcopy and biopsy, and those who had cervical intraepithelial neoplasia grade 2 or worse on biopsy received the necessary care. Having difficulties with cognition or the senses was an exclusion criterion. Women with HPV who were 30 to 65 years old were eligible. When getting their HPV test results from April 2015 to March 2016, eligible women were asked to participate in the study. Those who decided to do so signed an informed consent form and were called about 8 days later for a face-to-face or telephone interview with a trained interviewer.

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