Abstract

Objective. To identify country-level correlates of geographical variations in cervical cancer (CC) mortality in Latin America and the Caribbean (LAC). Materials and methods. CC mortality rates for LAC countries (n=26) were examined in relation to country-specific socio-economic indicators (n=58) and Human Papilloma Virus (HPV) prevalence using linear regression models. Results. High mortality at ages <5 years, low per capita total expenditure on health, and low proportion of the population with access to sanitation were identified as the best independent predictors of CC mortality (R2=77%). In the subset of countries (n=10) with HPV prevalence estimates, these socio-economic indicators together with high-risk HPV prevalence explained almost all the between-country variability in CC mortality (R2=98%). Conclusion. The findings suggest that continuing socioeconomic improvements in LAC countries will be associated with further reductions in CC mortality even in the absence of organised population-based screening and vaccination programmes.

Keywords

Uterine cervical neoplasms, papillomaviridae, mass screening, Latin America.