

Lesotho

Human Papillomavirus and Related Cancers, Fact Sheet 2017 (2017-04-19)



I. Key data on HPV and HPV-related cancers



Lesotho has a population of 696,199 women ages 15 years and older who are at risk of developing cervical cancer. Current estimates indicate that every year 312 women are diagnosed with cervical cancer and 185 die from

the disease. Cervical cancer ranks as the 1st most frequent cancer among women in Lesotho and the 2nd most frequent cancer among women between 15 and 44 years of age. Data is not yet available on the HPV burden in the general population of Lesotho. However, in Southern Africa, the region Lesotho belongs to, about 3.2% of women in the general population are estimated to harbour cervical HPV-16/18 infection at a given time, and 62.5% of invasive cervical cancers are attributed to HPVs 16 or 18.

Table 1. Crude incidence rates of HPV-related cancers

| | Male | Female |
|---------------------------------|------|--------|
| Cervical cancer | - | 27.8 |
| Anal cancer | - | - |
| Vulva cancer | - | - |
| Vaginal cancer | - | - |
| Penile cancer | - | - |
| Pharynx (excluding nasopharynx) | 0.7 | 0.1 |

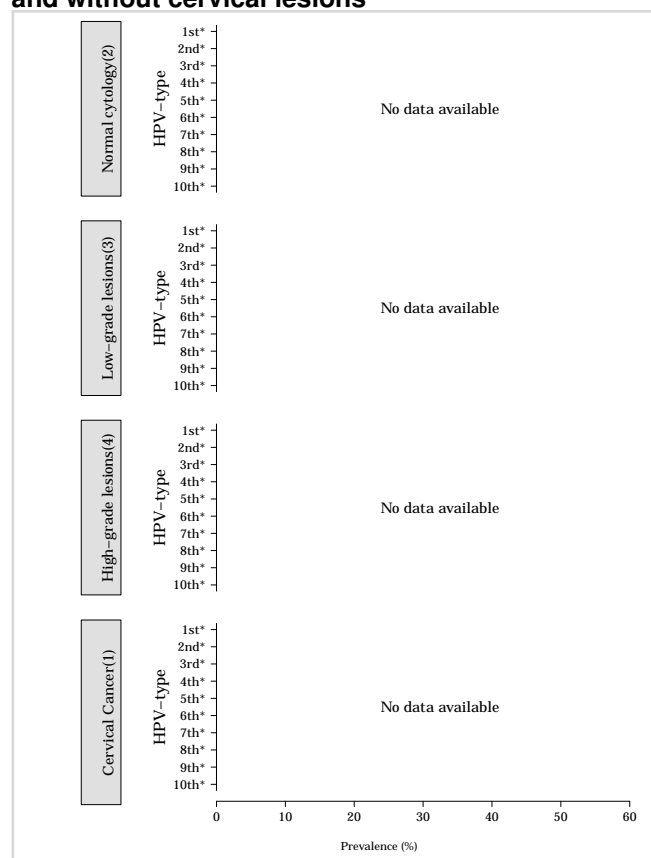
Table 2. Burden of cervical cancer

| | Incidence | Mortality |
|--|-----------|-----------|
| Annual number of new cases/deaths | 312 | 185 |
| Crude rate | 27.8 | 16.5 |
| Age-standardized rate | 38.4 | 23.2 |
| Cumulative risk 0-74 years (%) | 3.8 | 2.3 |
| Ranking of cervical cancer (all years) | 1st | 1st |
| Ranking of cervical cancer (15-44 years) | 2nd | 1st |

Table 3. Burden of cervical HPV infection Lesotho

| | No. Tested | % (95% CI) |
|--|------------|------------|
| HPV prevalence in women with normal cytology | - | -- |
| HPV 16/18 prevalence: | | |
| Normal cytology | - | -- |
| Low-grade cervical lesions | - | -- |
| High-grade cervical lesions | - | -- |
| Cervical cancer | - | -- |

Figure 1. Comparison of the ten most frequent HPV oncogenic types in Lesotho among women with and without cervical lesions



*No data available. No more types than shown were tested or were positive.

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II. Complementary data on cervical cancer prevention

Table 4. Factors contributing to cervical cancer (co-factors)

| | |
|---|--------------------|
| Smoking prevalence (%), women | 0.4 |
| Total fertility rate (live births per women) | 3.3 |
| Hormonal contraception use (%) (pill, injectable or implant), among women | 31.9 |
| HIV prevalence (%), adults (15-49 years) | 23.4 [22.1 - 24.8] |

Table 5. Sexual behaviour

| | |
|---|-----------|
| MEN | |
| Percentage of 15-year-old who have had sexual intercourse | 26 |
| Range of median age at first sexual intercourse | 17.1-22.6 |
| WOMEN | |
| Percentage of 15-year-old who have had sexual intercourse | 9 |
| Range of median age at first sexual intercourse | 18.2-19.0 |

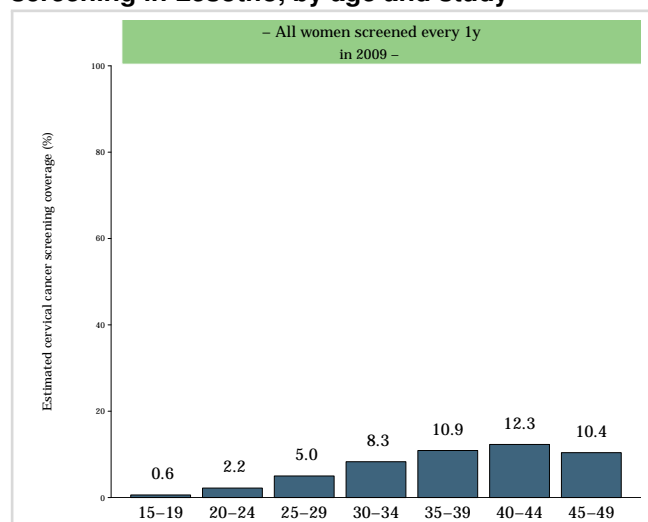
Table 6. HPV vaccine introduction

| | |
|---|------------------|
| HPV vaccination programme | National program |
| Date of HPV vaccination routine immunization programme start | 2012 |
| HPV vaccination target age for routine immunization | 9-13 |
| Full course HPV vaccination coverage for routine immunization: % (calendar year) | - |

Table 7. Cervical screening practices and recommendations

| | |
|---|---|
| Cervical cancer screening coverage, % (age and screening interval, reference) | 5.5% (All women aged 15-49 screened every 1y, DHS 2009 Lesotho) |
| Screening ages (years) | - |
| Screening interval (years) or frequency of screens | - |

Figure 2. Estimated coverage of cervical cancer screening in Lesotho, by age and study



Contact information:

ICO HPV Information Centre
 Institut Català d'Oncologia
 Avda. Gran Via de l'Hospitalet, 199-203
 08908 L'Hospitalet de Llobregat (Barcelona, Spain)
 e-mail: info@hpvcentre.net
 internet address: www.hpvcentre.net