

**FC409.5 Changes in Cervical Cancer Epidemiology over a period of 25 years**

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Changes in Cervical Cancer Epidemiology have been reported over recent decades, particularly influenced by screening programs. This presentation asks for several screening effects in general and related to the administrative structure in former East Germany (fEG). We analysed the once National Cancer Register for age adjusted incidence (1961-1987) and mortality (1970-1988). Facts are based on the territory of fEG within a screening-period of 14 years (1974/76-1988). The program included a cytological and colposcopic examination every second year, for those between 20-65 years of age and risk groups. The incidence of Carcinoma in situ (CIS) increased 1961/62 to 1985/86 by 663,9%, 1975/76 to 1985/86 by 7,9%. Cervical cancer (CC) incidence decreased by 36,1%/ 28,3%. Age adjusted incidence trend on CIS/CC (1970/72 to 1985/86): age 20-29a +204,7%/+93,7%, 30-39a +63,7%/+0,4%, 40-49a -19,8%/ -52,3%, 50-59a -43,5%/ -55,1%, 60-69a +178%/ -35,1%, and > 70a +55,0%/ -13,0%. CC-stage distribution trend (1970-1986): St. I +25,9%, St. II -35,0%, St. III -20,9% and St. IV +12,0%, Mortality decreased (1976/77 to 1987/88) by 31,0%. Age distribution in Berlin (East) as above - 14,3%, - 31,2%, -62,2%, -64,3%, -47,5%, -35,6%. Different trends will be seen if facts are related to single countries. In conclusion early screening effects (Increasing incidence CIS and CC followed by a reduction of CIS, trends to lower stages of CC, trends of age distribution to younger women) and late effects (reduction of incidence and mortality of CC), are observed and attest the efficiency. Nevertheless it also shows a nearly constant decreasing trend of the mortality, so we have to discuss whether this is an effect of screening or are there other epidemiological, probably side effects.