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**Letter to Editors** 

# Letter to the Editors on the Article by Azevedo e Silva et al

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#### Publishers,

In a recent issue of CSP, Azevedo e Silva et al. 1 highlighted in their study important evaluations of cervical cancer control actions, based on data recorded in the Unified System in Health (SUS), at the period in 2013 The 2020.

This study showed a diversity of factors related (still) to the great fragility of our health system regarding the prevention and screening of cervical cancer, which contribute too much to this neoplasm being ranked third among the most common cancers. incidents It is at fourth position in number in deaths in between women [2].

Cervical cancer occurs due to persistent infection with oncogenic subtypes of HPV, especially O HPV-16 It is O HPV-18, responsible per fence in 70% of the cancers cervical [3].

Until little time, the bigger tool in prevention in injuries precancerous It is cancer of lap in uterus was periodic screening through cytopathological examination of the uterine cervix, known as preventive exam or Pap smear. In this way, injuries can be diagnosed even in stages forerunners for O cancer, increasing the chance in cure, if O treatment for instituted in manner precocious [4].

However, the form of prevention through screening exams has limitations, because, in addition to of women, men can carry HPV and can transmit it to their partners. In addition to dis- only, to the injuries precancerous no if restrict just to the lap of uterus, but they can to emerge in others sites such as oropharynx, vulva, anus and penis. There is also the possibility of false-negative results and women who are unable to maintain regularity in their screening exams, not impacting at reduction of number in Deaths [4].

One of the consequences of these limitations is that, sometimes, cervical cancer is only diagnosed when already established, in many cases, in advanced stages, making treatment difficult. ment It is decreasing too much the survival of the patients.

Thus, prophylactic HPV vaccines have the potential to prevent cervical cancers in women, in addition in contemplate the prophylaxis for men [5].

considering studies about from the prevention primary, if glimpse what the vaccine against O HPV it will be O core guiding from the reduction of number in women what will die in cancer in lap in uterus at the future. Second O flat from the Organization world from the health (WHO), must be vaccinate against O HPV, until 2030, 90% of girls before of the 15 years [6].

A vaccination against O HPV prevents the neoplasm intraepithelial cervical type specific degree 3 (NIC 3) It is inducing antibodies neutralizing per for the any less 12 years [4].

In this way, the Federal Government included in the SUS National Immunization Program (PNI), in 2014, HPV vaccination of girls aged 9 to 14 years and boys aged 11 to 14 years, in two doses, with interval in 6 The 12 months [7].

However, the accession he has if shown very below of expected It is recommended for the Ministry of Health. The low index is related to religion, faith, customs and beliefs regarding sexual life and level of schooling [8].

At perspective of article [1], they are perceived yet the failure of actions what aim the reduction from the mortality in women with cancer in lap in uterus It is the need in campaigns informative It is, mainly, guidance counselors about the importance from the vaccination against O HPV.

The vaccine does not replace cervical cancer screening actions, both strategies should be used as complements. As advocated by the WHO, such actions are part of a strategy global strategy for the elimination of cervical cancer as a public health problem, reducing dozens of thousands of all deaths the years [9].

### **Collaborators**

G. Rotava substantially participated in the elaboration dog of text. No. M. Constantine participated sub- essentially in the preparation of the text. MA Macha- of participated substantially from the elaboration of text. CEM Marcon participated substantially of the elaboration text.

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