

Challenges to cervical screening in a developing country: The case of Malaysia

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Objectives: Many developing countries including Malaysia will need to continue relying on cervical screening because they will not be able to cover their entire female adolescent populations with HPV vaccination. The aim of this paper was to establish the extent of the health care, informational, financial and psychosocial barriers to cervical screening in Malaysia.

Methods: Literature search for reports on implementation, perceptions and reception of cervical screening in Malaysia published between January 2000 and September 2008.

Results: Despite offering Pap smears for free since 1995, only 26% of Malaysian women have been screened. Several factors may have contributed to this. No call-recall system has been established. Women are informed about cervical screening primarily through mass media rather than being individually invited. Smears are free of charge if taken in public hospitals and clinics, but the waiting times are often long. The health care system is unequally dense, with rural states being underserved compared to the urban ones. If the screening coverage was to increase, the shortage of smear-readers would become increasingly apparent.

Conclusions: Improving screening coverage will remain an important strategy of combating cervical cancer in Malaysia. The focus should be on the policy-making context, improving awareness and the screening infrastructure, and making the service better accessible to women.