# The Opportunity for Expanded Intervention During a Cervical Cancer Assessment Program in Rural Nepal. A Feasibility and Acceptability of Non-Surgical Intervention.

<u>Fiona Coombes<sup>1, 2</sup></u>, Samuel McGill<sup>1, 2</sup>, Annabelle Brennan<sup>1</sup>, & Mahadev Baniya<sup>3</sup> <sup>1</sup>Griffith University School of Medicine, Gold Coast, Australia; <sup>2</sup>Royal Brisbane and Women's Hospital, Queensland, Australia; <sup>3</sup> Community Service Academy Nepal, Kathmandu, Nepal

# Background

Nepal shoulders a higher burden of gynaecological disease than urban Australia<sup>1</sup>, particularly in its more remote regions. A program run by a Nepalese non-government organisation based in Kathmandu organises outreach women's health camps in rural regions. These health camps involve a team of nurses, administrative staff and gynaecologists providing cervical screening and arranging surgical treatment of severe pelvic organ prolapse. Pelvic floor muscle training is well known to prevent and treat pelvic organ prolapse, reduce symptoms and improve quality of life.<sup>2</sup>

# Aims

The aim of this study was to assess the feasibility and acceptability of developing and delivering a pelvic floor exercise and education pamphlet to integrate into these outreach heath camps in rural Nepali communities.

## Methods

1. A pelvic floor program was developed with women's health physiotherapists accompanied by simple education for pelvic floor health. It was designed in conjunction with the local team of health care workers and a gynaecologist (Fig. 2). It was then translated into Nepali. (Fig. 1)

2. A video call was arranged to educate healthcare workers on pelvic floor health and pelvic floor muscle activation assessment and training.

3. In 2022 a team from Australia travelled to Nepal to implement the handout at a health camp alongside cervical screening (by visual inspection with acetic acid, VIA) and prolapse screening for surgery.

4. Data collection has continued by the local team for 18 months to assess feasibility and acceptability for local women.

# Results

The health camp was attended by 542 women, (see Table 1.)

- 32 women were identified to have epithelial changes of the cervix.
- 47 women were diagnosed with pelvic organ prolapse, • 22 of which were severe and referred for surgery.

All 542 women were given a pelvic floor exercise and health handout.

In the following 24 months, 17,000 women have received the handout over 14 health camps and 6 education programs.

Table 1. Women's Health Camp November 2022 Summary			
	Day 1	Day 2	Total
Attendees	272	270	542
VIA (visual assessment with acetic acid)	258	260	518
Cervical dysplasia	18	14	32
Mild to moderate prolapse	19	25	47
Severe prolapse, referred for surgery	7	15	22
Received surgery	N/A	N/A	9
Handout Received	272	270	542

# Discussion

It was feasible to design and introduce a pelvic floor exercise and education program to a rural health camp in Nepal and accepted by local healthcare workers. There are significant limitations in our study including a lack of follow-up data – due to the nature of the rural communities and their inaccessibility. Future work should assess the impact of these handouts on women's prolapse symptoms and quality of life.



International Agency for Research on Cancer. Cancer Today.https://gco.iarc.fr/today/home: World Health Organisation;2020 2. Hagen S, Stark D. Conservative prevention and management of pelvic organ prolapse in women. Cochrane Database Syst Rev.2011;12):CD003882

## Fig 1. Pelvic floor handout

## **PELVIC FLOOR EXERCISES**

## **STRENGTHEN YOUR PELVIC** FLOOR MUSCLES F YOU HAVE HAD SURGERY, WAIT 6 WEEKS .Awareness Exercise

ADVICE AND EXERCISES TO HELP WOMEN

between when the muscles are relaxed and

stomach muscles relaxed



2.Visualisation Exercise •The urine - Imagine trying to stop the flow o urine. Feel for a drawing up sensation in the

The Patuki- Imagine tying a patuki around you hips, draw your hips together. 3.Quick Repetitions

Lie on your side or back with your body relaxed Repeat the visualization exercises: second hold x 10 repetitions / x 2 daily -Utilise these quick contractions prior to sneezing, coughing, laughing to reduce leakage

## 4.Long Holds

 Lie on your side or back with your legs, buttocks and chest relaxed Repeat the visualization exercises 10 second hold x 5 – 10 repetitions / x 2

Progressions Try these exercises while sitting in a chair standing or walking

## **PRACTISE HEALTHY BOWEI** AND BLADDER HABITS

Drink 2L of water a day Avoid smoking, coffee, tea, alcohol and fizzy Eat foods with fibre like fruits, vegetable

Wait until you definitely have an urge to go t toilet and try not to delay once you feel like DO NOT try to push or strain while doing a

- You may need to use stool softeners after giving birth. Ask a doctor or nurse if you need

When using a drop toilet, aim to relax your pelvic floor and your calf (lower leg) muscles If you are sitting on a toilet seat, lean forward raise your feet on a stool and relax your pelvic

## **HOW TO USE A PESSARY**

Your doctor may prescribe you a pessary. This a ring object that is inserted into your vagina to support your pelvic organs. You should: Use it for normal day to day activities e.g. lifting bjects, long walk Remove if uncomfortable, have excessive o offensive vaginal discharge, notice unusual

Remove for intercourse Remove pessary once a week to wash with Replace red, rubber pessaries every 3 months

with your docto Remove and wash white, silicone pessaries every 3 months

Caagbay D, Black K, Dangal G, Raynes-Greenow C H. Can a Leafle with Brief Verbal Instruction Teach Nepali Women How to Correctly Contract Their Pelvic Floor Muscles? Journal of Nepal Health Researc ouncil (2017).15(36):105-9 Hagen S, Stark D. Conservative prevention and management of pelv rgan prolapse in women. Cochrane Database of Systematic Reviews 011, Issue 12. Art. No.: CD003882. DO

## Fig 2. Pelvic floor handout, translated to Nepali



🕨 खोक्दा हाच्छिउँ गर्दा र वजन उठाउँद गर्दा पिसाब चहिन 🖻 योनीदारमा केही फलेको वा सनिएको अंगव

🕨 दर्गन्धयक्त योनी श्राव हन ► सम्भोगमा समस्या हन तल्लो पेटसँग सम्बन्धित माँशपेशीहरू

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प्रीमती सम्बन्धमा पनि महत पऱ्याउँछ



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