

EPIDEMIOLOGY OF UTERINE CERVICAL NEOPLASMS IN THE CITY OF BELÉM, PARÁ (2019-2024): REGIONAL CHALLENGES AND CONTROL PERSPECTIVES

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Introduction: Cervical cancer (CC) has emerged as an important public health challenge in the North of Brazil, especially due to its high incidence and significant impact on female mortality. The city of Belém, in the state of Pará, reflects a complex epidemiological reality with worrying patterns of hospital morbidity and insufficient adherence to screening strategies, hindering effective prevention and early diagnosis of the neoplasm. Therefore, controlling CC has become a strategic priority for the equitable and comprehensive promotion of women's care. **Objectives:** To conduct a study on the epidemiological and sociodemographic profile of cervical cancer cases in Belém, Pará between 2019 and 2024, with an emphasis on the aspect of early health screening, based on the cytopathological examination. **Methods:** This is an ecological, descriptive study with a retrospective approach, based on consolidated statistics on the incidence, hospitalizations, mortality, and cervical cancer screening in the municipality of Belém, Pará, from 2019 to 2024. Data on malignant cervical neoplasia (ICD-10 C53) were obtained from the Department of Information Technology of the Unified Health System, using secondary data from the Cancer Information System and the Mortality Information System. The analysis considered the variables: sex, age group, and self-reported race/skin color, following the classification used by the Brazilian Institute of Geography and Statistics. **Results:** A total of 117,506 cytopathology tests were performed in Belém during the study period, with 115,947 (98.7%) conducted specifically for cervical cancer screening. Of the total examinations analyzed, 5,208 (4.5%) indicated indicated low-grade squamous intraepithelial lesions (LSIL), and 1,609 (1.4%) showed high-grade squamous intraepithelial lesions (HSIL), which are associated with an increased risk of progression to invasive cervical carcinoma if not adequately treated. Furthermore, 141 cases of squamous cell carcinoma were identified. Hospitalizations for cervical cancer represented 67.3% of total medical admissions in the state of Pará, with the highest number recorded in year of 2024 (592). The majority of hospitalizations occurred among women who self-identified as of mixed race/skin color (2,776 cases; 94.2%), and aged 30 to 59 years (2,079 cases; 70.5%). Additionally, Belém reported 646 deaths from CC, with

a mortality rate of 21.94%. Of these deaths, 613 occurred among women who self-identified as of mixed race. **Conclusion:** The analyzed epidemiological profile highlights the persistent challenge of elevated mortality rates from cervical cancer in Belém, Pará. The cytopathological tests performed and the significant detection of precursor lesions emphasize the relevance of early intervention strategies. However, the considerable number of oncological hospitalizations due to CC reveals weaknesses in the healthcare network and limited access to timely diagnosis and treatment. The data point to a particularly vulnerable group, women of reproductive age who self-identify as of mixed race. The concentration of cases in this racial group was statistically significant, indicating racial and social disparities in disease outcomes. The findings of this study reinforce the urgency of implementing regional public policies that integrate primary prevention, epidemiological surveillance and specialized care. Effective control of cervical cancer thus requires a continuous, territorially based approach focused on health equity in the Northern region.

Keywords: Epidemiological profile; uterine cervical neoplasms; papillomavirus infections.