

## **CERVICAL CANCER IN INDIGENOUS WOMEN IN THE NORTHERN REGION OF BRAZIL: AN EPIDEMIOLOGICAL ANALYSIS**

Vanessa de Cássia Souza Ferreira<sup>1</sup>, Lucas Quaresma Martins<sup>1</sup>, Carlos Eduardo Oliveira da Silva<sup>1</sup>, Beatriz Lobato Canizo Pereira<sup>1</sup>, Marina Rodrigues Moura<sup>2</sup>, Giovanna Gilioli da Costa Nunes<sup>2</sup>

<sup>1</sup>Universidade do Estado do Pará (UEPA)

<sup>2</sup>Universidade Federal do Pará (UFPA)

**Introduction:** Cervical Cancer (CC) is the third most common type of cancer among women in Brazil, according to INCA (National Cancer Institute), and the most frequent in the Northern region, as reported by the Brazilian Medical Association. In the sociodemographic context, the Indigenous population in the Northern region was 753,780 inhabitants in the 2022 IBGE Census, with 44.48% being female. This scenario justifies conducting an epidemiological analysis of this ethnic group to understand the current state of gynecological healthcare provided to these women. **Objectives:** To analyze cases of CC among Indigenous women in the Northern Region of Brazil between 2020 and 2024. **Methods:** This is a descriptive, cross-sectional, quantitative, and retrospective study. Data were collected from the database of the Department of Informatics of the Unified Health System (DATASUS), through the Hospital Information System of SUS (SIH/SUS). The identification of the Indigenous population was based on standardized demographic filters from the database. The following variables were analyzed: age group, incidence rate, and mortality rate. **Results:** From 2020 to 2024, among a female Indigenous population of 335,282, 103 women were diagnosed with CC: 13 in 2020 (12.6%), 24 in 2021 (23.3%), 22 in 2022 (21.3%), 25 in 2023 (24.2%), and 19 in 2024 (18.4%). The age groups with the highest proportions were 40–49 years, with 40 affected Indigenous women, and 30–39 years, with 22 confirmed cases. The most statistically significant incidence and mortality rates occurred in the states of Rondônia and Tocantins, respectively, with 83.83 cases per 100,000 Indigenous women in Rondônia and 10 deaths per 100,000 Indigenous women in Tocantins. **Conclusion:** The significant number of cases and deaths from 2020 to 2024 likely reflects the barriers of geographical isolation, which hinder access to HPV vaccination and CC prevention. Additionally, a hypothesis for the higher incidence among women aged 40–49 relates to menopause as a transitional phase, along with increased cervical cytology testing, leading to higher detection in this age group. However, the high mortality rate in Tocantins is associated with poor accessibility to public healthcare services, infrastructure issues, and lack of transportation to Indigenous communities. Furthermore, the higher CC incidence rate in Rondônia highlights the state's deficient healthcare coverage in areas with limited access

to medical services and lower socioeconomic indicators, as reflected in the region's CC epidemiology. In summary, the Northern Region has the largest Indigenous population in the country, and this scenario underscores the need to expand healthcare coverage in these areas, ensuring preventive and integrative medical assistance for Indigenous women in the North.

**Keywords:** Uterine cervical neoplasms; indigenous peoples; epidemiology.