



# SOGP NEWS & VIEWS

Vol. 1, Issue 2, July - December 2011 Society of Obstetricians and Gynaecologists of Pakistan



## From the president's desk

*Dear Colleagues and friends*

Seasons greetings and a very happy 2012. May you and your family have a prosperous and Peaceful year. Another year has flown past and we still have so much more to do and now it appears very little time in which to do it!

As usual there has been an end of the year rush to get things done. I attended the council meeting of AOFOG which was from 8 am to 5 pm. I am not joking. The AOFOG federation now has 25 members with Cambodia and China joining the fold this time in Taipei. It was extremely educational for me. AOFOG has around 6 committees. Most of them are sub specialty and so we don't stand much of a chance chairing any of them yet. After some lobbying at the council meetings we were able to at least be considered for members/deputy chairs on the committees. I have sent in the SOGP nominations and at least one is confirmed. Prof. Syeda Batool from PIMS has been accepted as a member in the committee on Population Dynamics. I am sure she will work hard to foster greater ties between AOFOG and SOGP.

The SOGP in collaboration with UNICEF Pakistan launched the National PPTCT guidelines for the Prevention of Parent to Child Transmission of HIV/AIDS for Pakistan. In keeping with our promise to be involved Nationally at the policy level. These guidelines were earlier reviewed and endorsed by the SOGP. The guideline has been



developed keeping the scope of the epidemic in Pakistan in mind. Pakistan has a concentrated epidemic of HIV/AIDS in certain populations with high risk behavior and emigrants. The HIV epidemic is driven by these clusters. But of great concern for us in our specialty is that more and more the face of HIV is becoming young and female. With a substantial number of cases being diagnosed in the wives of men with high risk behavior such as injectable drug users.

The annual report of the SOGP has been written and disseminated. From this year onward the annual report will be a review of our activities and will provide data on aspects of women's health in Pakistan. If you have not received a copy please contact the Office.

### SOGP Office Bearers

- President** · Prof. Lubna Hassan.
- Vice Presidents** · Prof. Shereen Z. Bhutta (Sindh)  
· Prof. Fareed Zafar (Punjab)  
· Prof. Aisha Siddiqua (Balochistan)
- Gen. Secretary** · Dr. Nighat Shah
- Joint Secretary** · Prof. Muhammad Arshad Chohan
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- Dr. Samrina Hashmi
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- Dr. Shershah Syed
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### SOGP Secretariat

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The SOGP was requested by the MNCH Program and WHO to review and adapt the WHO PCPNC a guide for essential practice. This is a global guide for skilled birth attendants which has been reviewed and adapted by the SOGP Task Force for use in Pakistan. We have also developed an Essential Maternal and Newborn Care course based on the guide complete with a trainers/directors guide and participants workbook. This will hopefully be the national training course for skilled birth attendants which will avoid duplication and wastage. On 19th January 2012 I hosted a one day seminar in Islamabad in which the guideline and course have been endorsed by the government. I take this opportunity to thank and congratulate the members of the Task force and all the co-opted members who helped develop the course.

On the 26th of November we launched the Multan Local chapter. With Prof. Saami Akhtar as the chairperson I have great expectations from the team. Faisalabad too has set a date in February of 2012 to launch their local chapter. Lahore already has the required number of members and medical colleges so I hope they are able to follow suit soon.

Finally I invite you to the 14th International Scientific Congress in Islamabad, 13th - 15th of April, 2012 is getting closer. There will be preconference workshops in Islamabad on the 11th - 12th and post conference workshops from the 16th of April onwards in Peshawar. Please mark the dates in your calendars. Send in your abstracts and register early. Remember this conference is open to members only so if any of your friends (Gynaecologists) are not members of the SOGP encourage them to become members. The membership forms and details can be downloaded from the SOGP website. We have revamped our website, visit the conference site and give us your feedback. I hope to welcome you personally in Islamabad. Take Care and God Bless

**Prof. Lubna Hassan**

President SOGP



### GENERAL SECRETARY'S REVIEW

*Dear Friends,*

**Season's Greetings and Happy New Year,**

As we see the last sun of 2011 setting, we resolve again to continue struggling for women's health and rights issues. 2011 had been hectic demanding but also very fulfilling. We managed to reach out to most of you. A little brief regards our activities:

**World Population Day:** SOGP arranged a seminar on 20th July 2011 at JPMC. Partner organizations like IPAS, NMCH, Greenstar, FPAP, Marie Stopes, AMAN, attended. Prof. Sadiqua N. Jafarey chaired the Seminar.

**Seminar on Reproductive Health:** 30th July, 2011 at Jacobabad Sindh. Speakers were Dr. Rubina from Jacobabad, Dr. Afia Ansar from Karachi, Dr. Samreen Khaliq from Karachi, & Dr. Shamim from Karachi and Dr. Shahida Shaikh from Larkano. Maternal Mortality rate, Women health and rights burden of unsafe miscarriage, contraception counseling in antenatal, emergency and post partum situation & Fistulae due to post partum complications were discussed.

**AOCOG Conference** 23rd-27th Sept, 2011 Taipei, Taiwan, was attended by Prof. Lubna Hassan, myself and other senior members of SOGP. Young gynecologists awards were given to Dr. Nusrat Jokhio (Sindh) & Dr. Sadaf (KP).

**FLOOD Work:** Pakistan's recent floods killed at least 412 people and injured 1,172 others besides affecting over 8.2 million; damaged an area of 7.987 million acres & swept away standing crops in Sindh and Balochistan. At least 389 were killed & 745 were injured in Sindh, while 23 killed & 427 were injured in Balochistan. More than 120,000 pregnant women were affected. SOGP provided relief & antenatal care to displaced women and children in Badin, Khairpur, Sanghar.



A seminar on "**Politics in Abortion**" was held at PMA on 13th Oct, 2011. The speakers were Dr.Nusrat Shah, Dr.Samrina Hashmi, Dr.Sher Shah Syed and Dr.Haleema Yasmin.

SOGP collaborated with the Aga Khan University Hospital's gynae department, to hold a **Gynae Oncology Seminar**. It included talks by eminent speakers and poster presentation. Nerve sparing surgery for cervical cancer was demonstrated live.

**JSOGP launched:** SOGP succeeded in launching its Journal with guidance of Prof Khalida A.K Khanum and deputy editor Prof.Rizwana Chaudhery. The event took place at Islamabad Hotel and was attended by a large number of members from all over Pakistan.

**Islamabad Chapter:** Prof. Lubna Hassan held a meeting on 21st Oct, 2011 with senior members; discussed progress of different sub committees and the upcoming 14th International Scientific Conference

**PPTCT:** The national guidelines for prevention of parent to child transmission of HIV and AIDS were launched in collaboration with National and provincial AIDS control programs of all provinces with SOGP, on 22nd Oct, 2011 at Islamabad Hotel. This was attended by the regional coordinator of AIDS control program.

**PCPNC:** The WHO pregnancy care post natal care national guidelines are being adapted by SOGP and its 2nd consultative meeting was held at P.C Bhurban on 28-30th Oct, 2011. It was attended by WHO members, Members of MNCH program & consultants and members of core group of SOGP. The WHO regional coordinator, Dr.Summaiyya also attended.

**Multan Chapter:** SOGP feels proud to announce the inauguration of Multan Chapter, after Peshawar & Quetta chapters. Prof.Samee Akhtar took oath as chairperson, Dr.Huma Qudusia as co chair, Dr.Shahid Rao as Secretary, Joint Secretary Dr.Arif Siddique, Dr.Mehnaz Khakwani as Treasurer. The executive members included Dr.Ejaz Ahmed, Dr.Razia Mehboob,

Dr.Hajira, Dr.Shazia, Dr Syyeda Ali & Dr.Zubair Mohsin.

**PPIUCD Workshop:** in Collaboration with Greenstar social marketing, was held on 23rd November, 2011 at Hotel Regent Plaza Karachi. Presentations were given by Dr.Azra Ahsan, Dr.Iffat Ashar, Dr. Haleema Yasmin & Dr. Afia Ansar

**Pre conference Meeting:** regarding the 14th International Scientific Conference was held at the Seretariat. Workshops and fund raising activities were discussed by senior members of SOGP.

We will request you to share your work with us. We are also there to support your work and guide and encourage as per need. Signing off for now,

Peace,

**Nighat Shah**

Secretary General

SOGP

### Editor's Note

**Dear Colleagues,**

We are looking for your active participation in our upcoming Biennial conference in Islamabad in April 2012.

If you are involved in academic activities, please send a brief report to [sogpjpmc@hotmail.com](mailto:sogpjpmc@hotmail.com), and we will consider it for publication in our forthcoming issues.

Please send your research articles for publication in the recently launched Journal of SOGP, at [jsogp.articles@gmail.com](mailto:jsogp.articles@gmail.com)

We also invite you to place your advertisements in SOGP News & Views, to support publication of our newsletter. Please contact the SOGP secretariat for Advertisement rates.

Hoping for a peaceful & prosperous year for all of us and Pakistan

Thank you,

**Dr.Sadia Ahsan Pal**







## Greetings from SOGP Pakistan

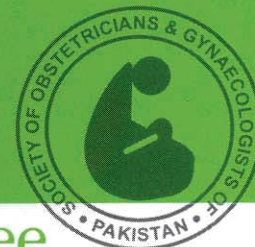
SOGP will have its 14th  
International Scientific Conference  
from 13<sup>th</sup> to 15<sup>th</sup> April, 2012.

In line with the upcoming event we invite  
you to participate in the scientific programme  
& workshops.  
pre conference workshop in Islamabad 12<sup>th</sup> april  
Post conference workshop in Peshawar 16<sup>th</sup> april



[www.sogp.org](http://www.sogp.org)

## Organising Committee



Chairperson:  
Prof. Dr. Lubna Hassan

Secretary:  
Dr. Fauzia Fahim

Office Secretary:  
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Chair Persons Scientific:  
Prof. Nasreen Ruby (International)  
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## World Population Day

On the International World Population day SOGP arranged a seminar on 20th July, 2011 at JPMC with the Senior Speakers and large number of audience. Representative were partner organizations like IPAS, NMCH, Greenstar, FPAP, Maiestopes, AMAN. All presented on the occasion and it was chaired by Prof. Sadiqua N. Jafarey.



## Seminar on Reproductive Health

SOGP arranged a Seminar on "Reproductive Health" on 30th July, 2011 at Jacobabad Sindh and speakers were Dr. Rubina (Jacobabad), Dr. Afia Ansar (Karachi), Dr. Samreen Khaliq (Karachi), Dr. Shamim (Karachi) and Dr. Shahida Shaikh (Larkano). The topics covered were Maternal Mortality rate, Women's health and rights, burden of unsafe abortion, contraception counseling in antenatal, emergency and post partum situation & Fistulae due to post partum complications.





## AOCOG Conference

The International AOCOG Conference from 23rd-27th Sept, 2011 at Taiwan Taipei, was attended by Prof. Lubna Hassan, Dr.Nighat Shah and other senior members of SOGP from Pakistan. Two Young gynecologists awards for SOGP went to Dr.Nusrat Jokhio (Sindh) and Dr.Sadaf (Peshawar).



## FLOOD Work

The devastating floods hit the Sindh hard once again, and were a test for the nation. SOGP as usual was up to the task and carried out a massive relief operation across the Sindh along side its colleagues in the Pakistan Medical Association (PMA). Our first relief effort was in Badin, with a team of doctors including Dr.Nighat Shah (SOGP), Dr.Samrina Hashmi, Dr.Ismail (PMA Karachi) and other doctors.

The second Relif effort was at Khairpur. Dr.Nighat Shah and other team members arranged a medical camp. The third relif effort was at Badin and Golarchi, headed by Dr.Razia Korejo and her team along with Physicians Ophthalmologists and Dermatologists.



## Seminar on Abortion

A one day seminar was arranged on "Politics in Abortion" at PMA on 13th Oct, 2011, a large number of members attended. The speakers were Dr. Nusrat Shah, Dr. Samrina Hashmi, Dr. Shershah Syed and Dr. Haleema Yasmin.



## SOGP & AKUH Seminar Oncology

SOGP collaborated with the Aga Khan University hospital's gynae department, to hold a two days Gynaecological Oncology seminar with invited international speakers. It included talks by eminent speakers and poster presentations. Nerve sparing surgery for Cervical Cancer was demonstrated live.





## JSOGP:

SOGP has succeeded in launching its Journal by help of the kind guidance of Prof Khalida A.K Khanum and deputy editor Prof.Rizwana Chaudhery. The event took place at Islamabad Hotel and was attended by a large number of members from all over Pakistan. The launching of JSOGP was felt as an important step towards the progress of the national society.



## Multan Chapter

Current Executive Council of SOGP feels proud to announce the inauguration of Multan Chapter of SOGP after Peshawer chapter and Quetta chapter. Prof.Samee Akhtar took oath as chairperson, Dr.Huma Qudusi as co chair, Dr.Shahid Rao as Secretary, Dr.Arif Siddique as Joint Secretary & Dr.Mehnaz Khakwani as Treasurer. The executive members included Dr. Ejaz Ahmed, Dr. Razia Mehboob, Dr. Hajira, Dr. Shazia, Dr. Syeda Ali & Dr. Zubair Mohsin







### PCPNC:

The WHO pregnancy care post natal care national guidelines are being adapted by help of SOGP and its 2nd consultative meeting was held at P.C Bhurban on 28-30th Oct, 2011. It was attended by WHO members, Members of MNCH programme and consultants and members of core group of SOGP. It was held for 2 days and all the adapted modules were discussed in depth. The WHO regional coordinators Dr.Summaiyya also attended.



### PPTCT:

The national guidelines for prevention of parent to child transmission of HIV and AIDS were launched in collaboration of National and provincial AIDS control programmes of all provinces with SOGP on 22nd Oct, 2011 at Islamabad Hotel. This was attended by the regional coordinator of AIDS control program, and Senior SOGP members.



## PPIUCD Workshop:

SOGP held a workshop on PPIUCD in Collaboration with Greenstar social marketing on Wednesday 23rd November, 2011 at from 12.00am to 04.30pm at Hotel Regent Plaza Karachi. Presentations were given by Dr.Sadiqua Jafarey, Dr.Azra Ahsan, Dr.Iffat Ashar, Dr. Haleema Yasmin, Dr. Afia Ansar.





## Pre conference Meeting:

A meeting was held at Secretariat regarding participation in the 14th International Scientific Conference from Sindh and holding of different pre conference workshops and fund raising activities for Biennial conference were discussed by senior members of SOGP





### Islamabad Chapter:

President Prof. Lubna Hassan held a meeting with Islamabad chapter on 21st Oct, 2011. The senior members discussed the progress of different sub committees and the upcoming 14th International Scientific Conference which will be held at Islamabad on 13th-15th April, 2012.



### Upcoming Events

#### MRCOG Part-2 Revision Course (Written and OSCE)' from 26-28 Feb 2012

The Royal College of Obstetricians & Gynaecologists (RCOG) is organizing this course at Ziauddin University (Clifton Campus) Karachi.

Candidates will have the opportunity to experience all the current formats of testing namely: MCQ, EMQ, SAQ and OSCE.

The number of delegates is STRICTLY LIMITED TO 20 (early application advised).

For registration contact Dr Nida Lakhani 0334 3851840; nidalakhani786@hotmail.com & Dr.Sadia Mujahid: 0321 242 3598. Details of the course are available on the RCOG website.

Both MRCOG and FCPS-2 trainees can attend this course.

#### Intensive Course in Emergency Obstetrics & Neonatal Care (EmONC)

Organized by: AMAN, NCMNH & JANUM

Dates: 27, 28 & 29 Jan 2012

Venue: JPMC Auditorium, Karachi

For Registration: Contact Ms. Mahvesh at NCMNH office. Tel: 35341597-8

### BJOG themed issue on Gynaecological Oncology for 2012 - FREE

The issue is available to download for FREE until 31 March 2012

Highlights include: Preterm birth after conisation of the cervix, Treatment options for endometrial cancer, Urban-rural differences of gynaecological malignancies, Cervical cancer and the HPV vaccine (including the TOMBOLA trial)

**Dr Pierre-Martin Hirsch,  
Deputy Editor-in-Chief says:**

"Cervical cancer remains a common cause of premature death in developing countries due to a lack of organised screening programmes and vaccination programmes. In contrast, in developed countries, cervical cancer is becoming a rare disease, and the gynaecological community are focussing on improving outcomes in ovarian cancer by developing new surgical and chemotherapy techniques.

**Dr Raj Naik, co-editor of the issue adds:**

"Survival in itself is not the only outcome measure of interest and this edition also concentrates on improvements in treatment-related morbidity with laparoscopic surgery, robotic surgery as well as sentinel node assessment. Cancer prevention through vaccination and screening are key to any overall strategy and this edition covers a spectrum of thought-provoking papers investigating the many contentious areas both for the developed as well as the underdeveloped countries."

### On crying infants and clamping of cords

All babies cry, and in the first months of life they cry a lot-one to two hours a day on average, and continue with persistent crying beyond three months. These babies and their parents must be taken seriously. Although most will have no long term adverse effects, the strain on the family is associated with higher rates of physical abuse and postnatal depression, as well as behavioural problems in childhood

Of course there's one cry that no parent would want





to prevent the baby's first, traditionally provoked by a slap on the bottom. Modern childbirth practices tend towards a gentler approach, except for one quite recent and now entrenched intervention: early clamping of the umbilical cord. The BMJ has published before on the growing evidence against this practice (BMJ 2007;335:312) (BMJ2010;340:c1720) (BMJ 2010;341:c5447). Still more than 95% of UK obstetricians and midwives still clamp the cord within two minutes of birth. First recommended in the 1970s, it became part of the bundle of interventions that made up the "active management of labour," along with use of oxytocics and controlled cord traction, to reduce the risk of postpartum haemorrhage. A systematic review of active management in 2000 found that it did indeed reduce maternal blood loss. But a subsequent systematic review in 2007 looked specifically at the timing of cord clamping and found that delayed clamping posed no risk to the mother.

Any concerns about risks to the baby of polycythaemia or other adverse effects from placental transfusion should have been allayed by another 2007 systematic review, which found that delayed cord clamping is beneficial at birth and into infancy. A randomised controlled trial conducted by Ola Andersson and colleagues (Sweden) found that delaying clamping for 3 minutes after delivery improved all measures of iron status at 4 months of age with no neonatal adverse effects (doi:10.1136/bmj.d7157). NICE's current guidance recommends early clamping but is now under review. It's time for a change of practice.

*Abstract from : BMJ 2011;343:d8159. Fiona Godlee, editor, BMJ*

## Emergency Contraception

Plan B One-Step, a single 1.5-mg tablet of levonorgestrel, is intended to be taken as soon as possible after unprotected intercourse. The single dose is at least as efficacious as a previous version of the product, which contained two 0.75-mg tablets of levonorgestrel to be taken 12 hours apart. Levonorgestrel has been widely and safely used as a constituent of numerous oral contraceptives for many years, both as the single levorotatory enantiomer and in the racemic mixture (norgestrel). The best available evidence indicates that it prevents

pregnancy largely by delaying or preventing ovulation, but prevention of implantation cannot be ruled out. Levonorgestrel does not cause abortion; it does not terminate an established pregnancy (an implanted conceptus) and should not be confused with the abortifacient mifepristone (RU-486).

Levonorgestrel as an emergency contraceptive has been available in the United States by prescription since 1999, and its safety and efficacy have been well documented and scientifically reviewed. In addition, the safety and efficacy of its use when sold without a prescription (over the counter [OTC]) have also undergone extensive review.

The only documented adverse effects of a dose of levonorgestrel are nausea and delay of menses by several days

*This abstract is from the article Alastair J.J. Wood, M.D., Jeffrey M. Drazen, M.D., and Michael F. Greene, M.D.*

*December 14, 2011 (10.1056/NEJMp1114439)*

## Letters to the Editor

Dear Prof. Sadiha,

Although it is quite late, but I must mention that the copy of the SOGP News & Views Vol. 1., Issue 1, Jan - Mar, 2011, that you gave me was exceptional, diverse and beautifully laid out. I congratulate you for it.

You may like to know that the desire for publication of a journal from the forum of a single national society (SOGP), was initiated by Prof. Bilquis Malik of Larkana who was at that time the President of (Pakistan Society of Obstetricians & Gynaecologists (PSOG). The then President of Pakistan (Gen. Zia ul Haq) and DG Health (Gen. Mohsin Pal), supported the merger of these two professional organizations. I being, the Hon. Secretary General of PSOG, executed the job of handing over the total funds of PSOG during a special visit to Karachi, to Late Prof. Mahmooda Saeed (President of SOGP, 1985). After the merger, our mission was accomplished.

With Best Wishes

Yours Sincerely,

Prof. K.A.K Akhtar



*The Royal College Representative Committee with senior Fellows & Members of the RCOG, and SOGP .June 2011 after the Part 2 MRCOG Course held at ZMU, Karachi.*



## Society of Obstetricians & Gynaecologists of Pakistan

### ***SOGP Annual Calendar Of Events 2012***

Date	Events	Program
28 <sup>th</sup> Jan,2012	Executive Committee Meeting	Biennial Conference and future collaborations /projects of SOGP
4 <sup>th</sup> Feb ,2012	World Cancer Day	Sharing of Proforma for Gynae Cancers from all chapters
18-19 <sup>th</sup> Feb,2012		Workshop on Research Methodology
8 <sup>th</sup> March,2012	International Women Day	Walk/Press conference on Women Health Issues / Announcement Nawabshah and Larkano Chapter (if membership is completed)
13 – 15 April, 2012	World Health Day	SOGP 14 <sup>th</sup> International Biennial Conference
8 <sup>th</sup> May 2012	Mothers Day	Sharing of Data of Maternal Mortality Audit (all chapters).
June 2012		Advanced postgraduate Course for FCPS/MCPS/ IMM, Essay writing, TOACS and long cases.
July 2012	Regional Scientific meeting	Muzafarabad Azad Kashmir
August 2012	World Breast Feeding Day	Awareness program for Midwives at all chapters
26 <sup>th</sup> Sept 2012	World Contraceptive Day	World Contraceptive Day with UNICEF/Bayer-Schering
7 – 12 October 2012	FIGO World Congress Rome Italy	Stall by SOGP
November 2012	International Day for the Elimination of Violence against Women	Meeting with Stake holders
1 <sup>st</sup> Dec,2012	World Aids Day	Academic Seminar with Aids Control program all chapters





## Abbreviated Prescribing Information

**Indications:** Prevention of persistent infection, premalignant cervical lesions and cervical cancer caused by oncogenic Human Papillomaviruses (HPV). **Dosage And Administration:** The primary vaccination course consists of three doses. The recommended vaccination schedule is 0, 1, 6 months. If flexibility in the vaccination schedule is necessary, the second dose can be administered between 1 month and 2.5 months after the first dose and the third dose between 5 and 12 months after the first dose. *CERVARIX* is for intramuscular injection in the deltoid region. **Contraindications:** Hypersensitivity to any component of the vaccine. **Warnings And Precautions:** It is good clinical practice to precede vaccination by a review of the medical history (especially with regard to previous vaccination and possible occurrence of undesirable events) and a clinical examination. As with all injectable vaccines, appropriate medical treatment and supervision should always be readily available in case of a rare anaphylactic event following the administration of the vaccine. Syncope (fainting) can occur following, or even before, any vaccination as a psychogenic response to the needle injection. It is important that procedures are in place to avoid injury from faints. The administration of *CERVARIX* should be postponed in subjects suffering from acute severe febrile illness. However, the presence of a minor infection, such as a cold, should not result in the deferral of vaccination. *CERVARIX* should under no circumstances be administered intravascularly or intradermally. No data are available on subcutaneous administration of *CERVARIX*. *CERVARIX* should be given with caution to individuals with thrombocytopenia or any coagulation disorder since bleeding may occur following an intramuscular administration to these subjects. As with any vaccine, a protective immune response may not be elicited in all vaccinees. *CERVARIX* is a prophylactic vaccine. It is not intended to prevent progression of HPV-related lesions present at the time of vaccination. *CERVARIX* does not provide protection against all oncogenic HPV types. Vaccination is primary prevention and is not a substitute for regular cervical screening or for precautions against exposure to HPV and sexually transmitted diseases. Sustained protective efficacy has been observed for up to 6.4 years after the first dose. Duration of protection has not fully been established. Sustained protective efficacy has been observed for up to 9.4 years after the first dose. Long-term studies are ongoing to establish the duration of protection. **Interactions;** It can be given with reduced antigen diphtheria-tetanus-acellular pertussis vaccine (dTpa), inactivated poliovirus vaccine (IPV) and the combined dTpa-IPV vaccine; hepatitis A (inactivated) vaccine (HepA), hepatitis B (rDNA) vaccine (HepB) and the combined HepA-HepB vaccine. Administration of *CERVARIX* at the same time as Twinrix™ (combined HepA-HepB vaccine) has shown no clinically relevant interference in the antibody response to the HPV and hepatitis A antigens. If *CERVARIX* is to be given at the same time as another injectable vaccine, the vaccines should always be administered at different injection sites. There is no evidence that the use of hormonal contraceptives has an impact on the efficacy of *CERVARIX*. As with other vaccines it may be expected that in patients receiving immunosuppressive treatment an adequate response may not be elicited. **Pregnancy And Lactation;** *Pregnancy:* Vaccination should, be postponed until after completion of pregnancy. *Lactation:* *CERVARIX* should only be used during breast-feeding when the possible advantages outweigh the possible risks. **Adverse Reactions:** *Very common:* headache, myalgia. *Common:* gastrointestinal including nausea, vomiting, diarrhoea and abdominal pain, itching/pruritus, rash, urticaria, Arthralgia, fever (38°C). *Uncommon:* Upper respiratory tract infection, lymphadenopathy, dizziness, other injection site reactions such as induration, local paraesthesia. **Post Marketing Data:** *Rare:* Allergic reactions (including anaphylactic and anaphylactoid reactions), angioedema, syncope or vasovagal responses to injection, sometimes accompanied by tonic-clonic movements. **M.R.P. Cervarix™** Rs. 4700.00. Prices are subject to change without prior notice. **Please read full prescribing information prior to administration.**

Version number: GDS018/IP12, Date of issue: 15 Aug 2011

Full prescribing information is available on request.



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PKCER/07711 (1211)



SHE'S WORKED HARD  
TO GET HERE.

TOO HARD TO  
LET CERVICAL CANCER  
THREATEN THAT

Cervical cancer is the second most prevalent cancer in women worldwide.<sup>1</sup> Today, you can do much more to help prevent it. Cervarix™ is a new cervical cancer vaccine that offers protection designed to last.<sup>2,3</sup> Cervarix™ formulated with the innovative Adjuvant System AS04 induces antibody levels that start high and stay high<sup>2</sup> - providing strong and sustained protection against cervical cancer.<sup>4</sup>

*Take Control. Protect her world.*



**REFERENCES:** 1. Parkin M, Bray F, Ferlay J, Pisani P. Global Cancer Statistics, 2002. *CA Cancer J Clin* 2005; 55:74-108. 2. Gall et al. Presented at the 2007 meeting of the American Association for Cancer Research, Los Angeles, CA, April 14-18, 2007. Abstract 4900. 3. Giannini SL et al. Enhanced humoral and memory B cellular immunity using HPV16/18 L1 VLP vaccine formulated with the MPL/aluminium salt combination (AS04) compared to aluminium salt only. *Vaccine* 2006; 24 (33-34): 5937-5949. 4. Harper DM. C. Sustained HPV-16 and 18 antibody levels through 5.5 years in women vaccinated with the HPV-16/18 VLP AS04 candidate vaccine. *ESGO* 2007; Abstract 2128.

Full prescribing information is available on request.

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