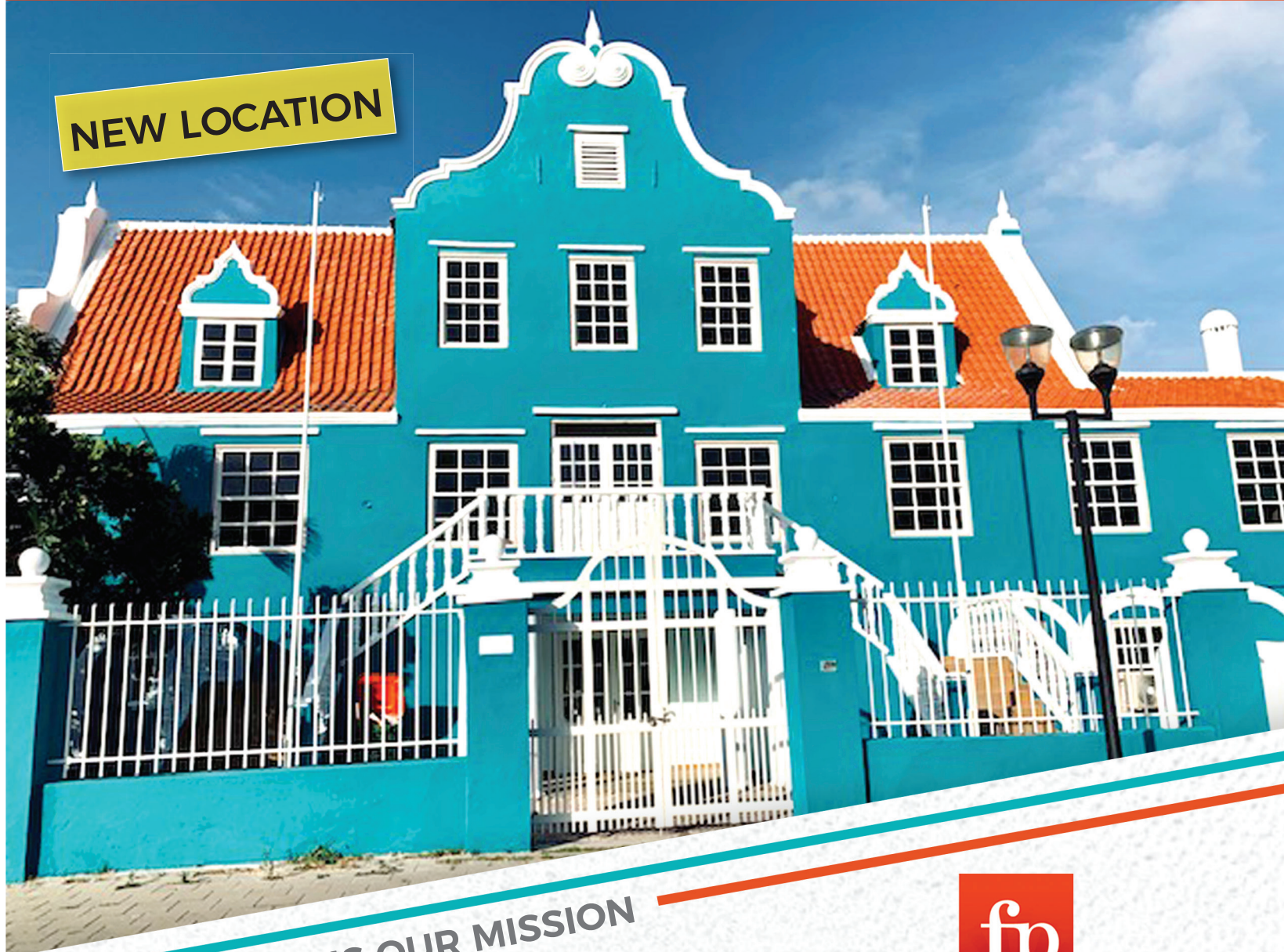


NEW LOCATION



PREVENTION IS OUR MISSION



fundashon **prevenshon**



ANNUAL REPORT

2018



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1. FOREWORD

Fundashon Prevenshon celebrated its tenth anniversary in the year 2018. We are proud of the two successful screening programs we have launched in the ten years since our inception. Our mission remains the expansion of cancer prevention programs, nationally and internationally.

In the year 2018, we enumerated the many steps that helped build the foundation for the continued and future roles of Fundashon Prevenshon. These included a new location for Fundashon Prevenshon. This new location is a full-fledged screening center not only for Curaçao but also for the region. This new location will be much larger than the current location in the Klipstraat (which measures 160 m2).

With all the regulations and foundations in place, we can now receive the new 3D mammography machine, a donation from the Rotary of Curaçao. We are very grateful to the Rotary and the other organizations and businesses, for their generous donations. We are now the only center in Curaçao offering this new medical technology.

At the end of 2018, I transferred my position as President of the Board to Prof. Dr. H. Pinedo. The main reason was my increased professional responsibility that resulted in less time to carry out all the duties in my role as President. I will, however, continue as a board member of Fundashon Prevenshon and continue my support for the new projects. I am thankful to the entire board for their trust in me during the time of my presidency. And now, on to the future chapters of the Fundashon Prevenshon.

Ms. R. Pardo
BOARD DIRECTOR

2. ABOUT FUNDASHON PREVENSHON

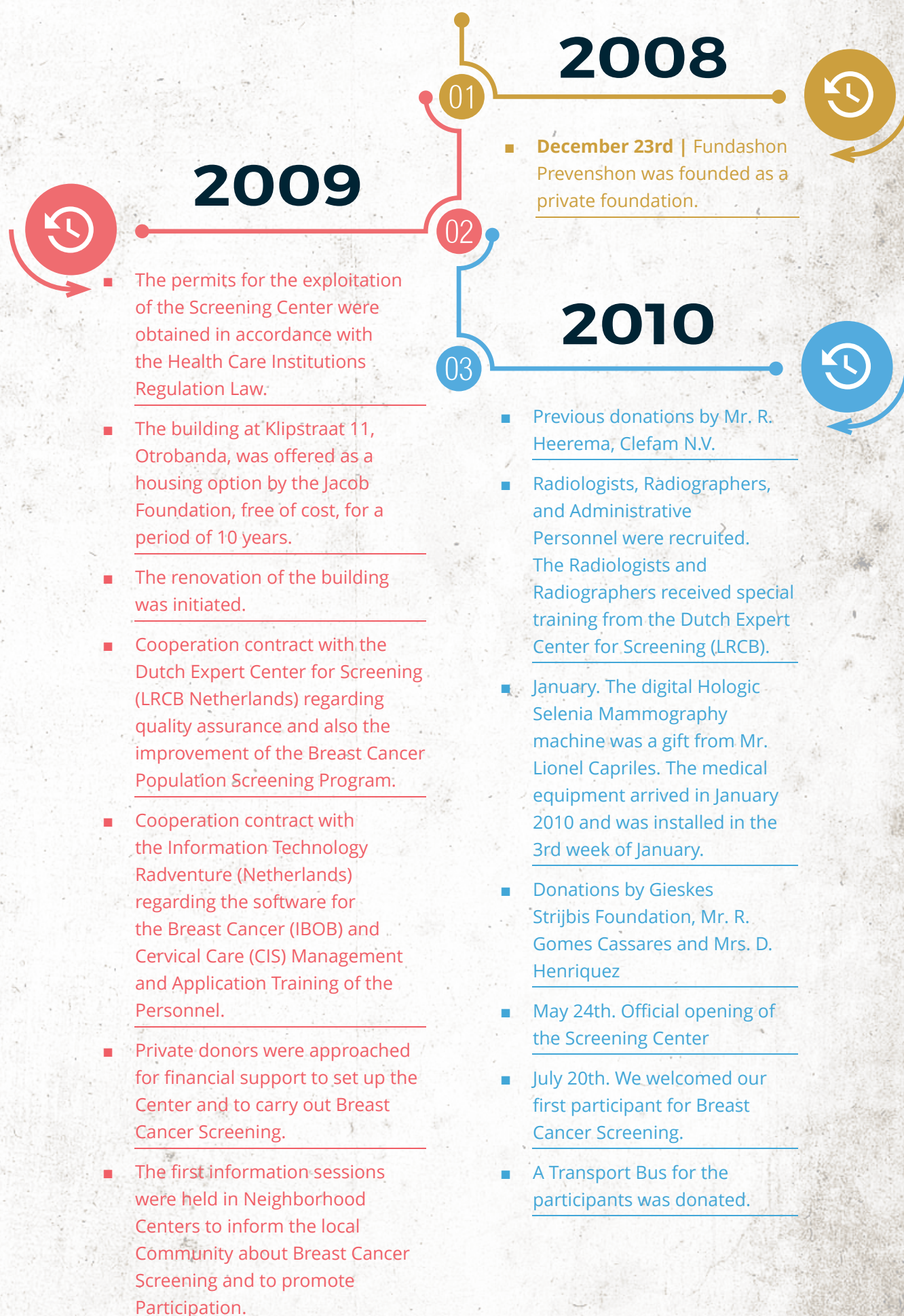
A 10-YEAR JOURNEY OF PREVENTION, AWARENESS, AND INNOVATION



2.1 HISTORY AND KEY MILESTONES

Fundashon Prevenshon was founded on December 23rd, 2008, at the initiative of the late Mr. Lionel Capriles and Professor Dr. H.M. Pinedo. Today, Fundashon Prevenshon celebrates a major milestone, its 10th anniversary. Since its inception, Fundashon Prevenshon has partnered with the Government of Curaçao, and major local benefactors, businesses, and organizations to accomplish its goals and objectives.

Fundashon Prevenshon's major achievements, medical and administrative milestones, and memorable events, during its ten years from 2008 to 2018, are summarized on the next pages.



2011



- The establishment of the Complaints Committee.
- The Fundashon acquired Membership to the Senologic International Society.
- The Board approved the Scientific Research on Cervical Cancer and, thereafter, the Population-Based Screening for Cervical Cancer.
- Conversations and Agreements regarding Collaboration during the Scientific Study with VU Medical Center Amsterdam and Laboratories were conducted.
- Donations by Blokker Holding and Gieskes Strijbis Foundation.

04

2012

05



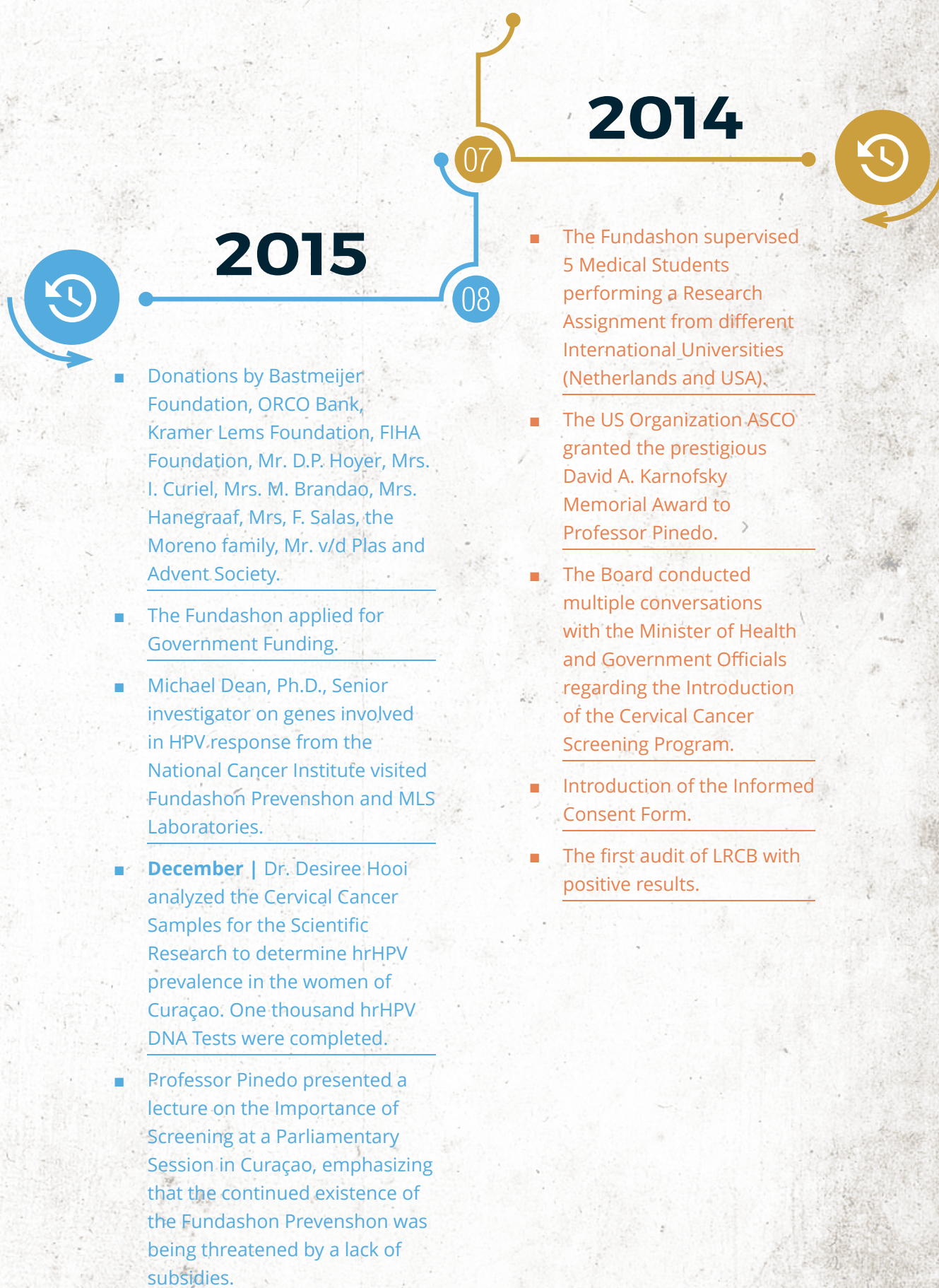
- All gifts (Keep in Touch Foundation) presented to Professor H.M. (Bob) Pinedo, at his retirement from the VU Medical Center Amsterdam, were donated by Professor Pinedo to Fundashon Prevension.
- Donations by Carex Mr. R. Heerema, Blokker Holding, Schumacher Kramer Foundation, Gieskes Strijbis Foundation
- The Audit Committee was appointed by the Board.
- Continuous conversations with the government about our role in Public Health and our Joint Responsibilities.
- Fundashon Prevension provided information to the community, health care professionals and other interested parties, regarding the Setup and Execution of the Cervical Cancer Screening.
- The 'Golden Sun Award' was granted to Fundashon Prevension for its community services by the local Radio Hoyer.

2013



- Fundashon Prevension approached Desiree Hooi to conduct the Scientific Research on Cervical Cancer.
- Members of the Medical Ethical Committee were appointed by the Board.
- Fundashon Prevension organized a mini-symposium "HPV in Preventive Health Care".

06







- **May 8** | Rotary Dinner, to raise funds towards the Purchase of the New 3D Mammography Machine.
- **May 29** | The first Kòmbersá Salú Conference with local Speakers at the World Trade Center was successful.
- **September 2** | The second Kòmbersá Salú Conference with local and international Speakers.
- **October 25** | Desiree Hooi, MD, obtained her Doctorate Degree at the Vrije Universiteit Amsterdam, The Netherlands, after a successful public defense of her Dissertation.
- **November 13** | Installation of the 3D mammography as a gift of the Local and International Rotary Organization.
- **December 14** | Celebration of the 10th Anniversary of Fundashon Prevenshon. Professor Pinedo announced that we are looking for a Larger Building due to the Expansion of the Screening Activities.

2.2 MISSION AND VISION

Our Mission is to establish and maintain a center for prevention through screening, early diagnosis and early detection of disease.

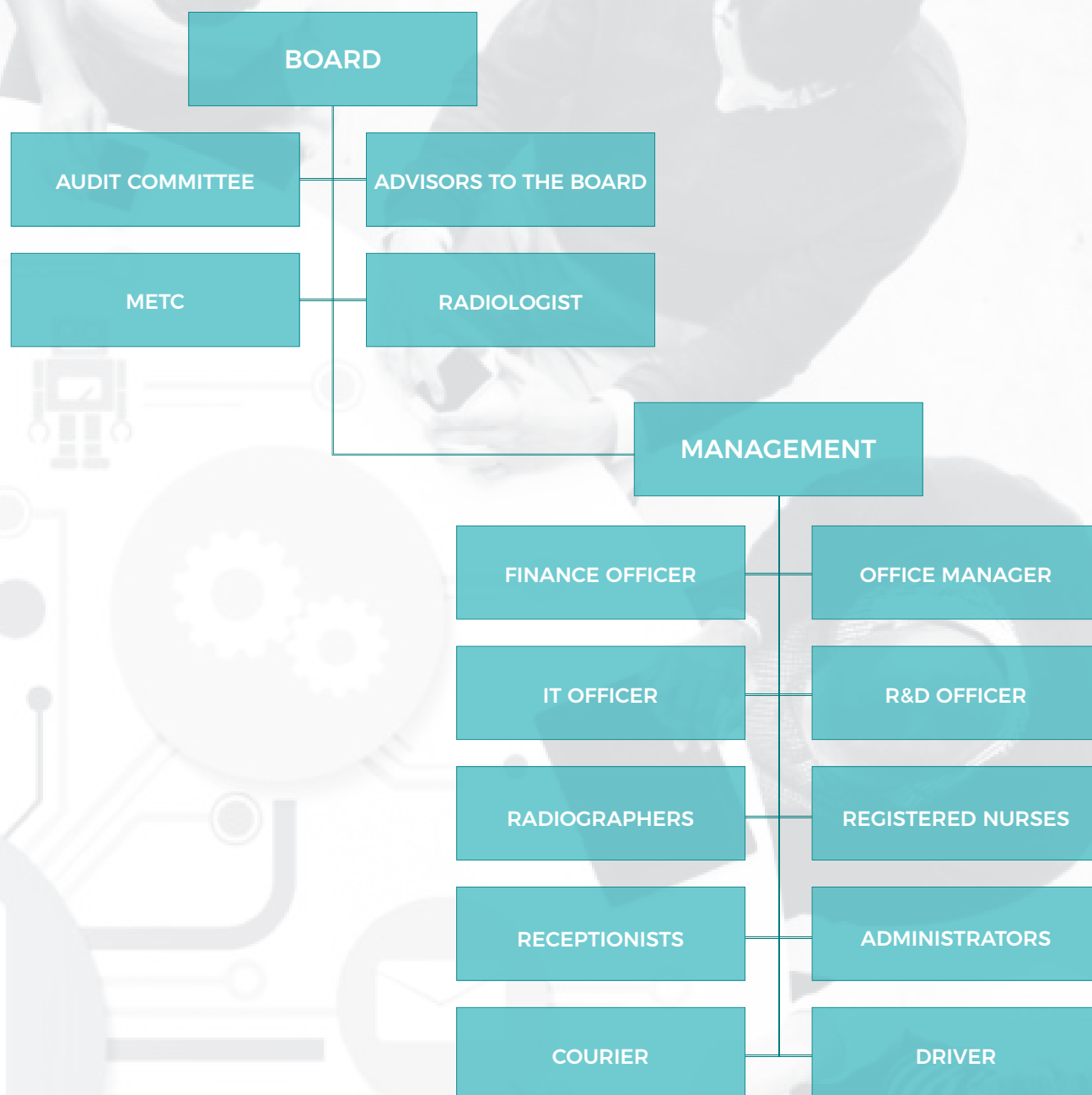
Our Vision is that the community of Curaçao will benefit from the Fundashon Prevenshon screening activities and thereby be given the chance to live a longer and healthier life.

Our Objective is to promote public health in Curaçao by reducing mortality and decreasing presentation of advanced disease, through implementation and continuation of cost-effective organized population-based screening. The screening programs are planned, executed and monitored on the principles of accountability, efficiency, and sustainability.

Our strategy is to partner with key organizations and stakeholders and to conduct scientific research in collaboration with local and international healthcare professionals and Universities. These strategies are formed and supported as a result of collaboration with our stakeholders. Our stakeholders include the local Government, Organization of General Practitioners, Medical specialists, Princess Wilhelmina Foundation, other health care providers, educators, neighborhood associations and insurers.

To achieve our objectives, we aim to develop and maintain strong collaboration with the neighborhood associations and key community representatives to guarantee that the community is well-informed and aware of the benefits of screening.

3. THE ORGANIZATION



Raiza Pardo, MD MBA	President
Douglas Pinedo, MD	Vice President
Randolph van Eps, LLM	Secretary
Karina Lombardi MSc RA	Treasurer
Professor Dr. Herbert. M. Pinedo	Member
Lisa Capriles	Member
Nancy van der Wal	Member

Igor Gomez Bravio, MD	Advisor
Ludwig Hermina, MD	Advisor
Francois Simon, MSc	Advisor

3.1 THE BOARD AND ADVISORS

The Board held a total of 6 meetings, during which a number of important subjects were discussed to define the direction of the foundation. Raiza Pardo resigned as President of the Board in December 2018, she remains on the Board as a member.

The role of the Board:

- The Board sets policies to guarantee the proper use of funds, effective management of human resources, and provision of quality services according to the mission and vision of the foundation. The main policy points are set during the first board meeting of the year; the policy document is discussed with the management.
- The Board determines and supervises the budget, the multi-year budget policy plan and multi-year policy plan (including the investment plan).
- The Board supervises the preparations for the Annual Report and the annual accounts.
- The Board supervises and advises the management on the implementation of the policies, on the financial reporting and accountability.

The following matters were discussed during the board meetings:

- The celebration of the 10th anniversary on December 23rd.
- The Rotary Global Grant towards the purchase of the 3D mammography.
- The replacement of the 'old' mammography machine.
- Planning new screening programs.
- Conversations were held with ophthalmologists to discuss the glaucoma screening program.
- Conversations were held with the Oncologist and Gastroenterologists to discuss the colorectal screening program.
- The current space at Klipstraat regarding limited space on accessibility and the search for a new location.
- Increasing the awareness and screening activities.
- Frequent conversation with the Government regarding the subsidy for 2019.
- The collaboration with the Association of General Physicians.
- Fundashon was audited by the LRCB, the Board made sure that all preparations were made in order to comply with the quality requirements.
- Frequent meetings regarding the preparations for the Colon cancer screening, Glaucoma Screening and the role in pre-diabetes screening in collaboration with the Association of General Practitioners.



3.2 MEDICAL ETHICAL COMMITTEE (METC)

Karina Keizer Att at Law	Chairman
Stefan Coolen Ph.D	Member
Alex Roose, MD	Member

3.3 RADIOLOGISTS

Ludwig Hermina, MD
 Nienke Antonides, MD
 Izyo Hooker, MD
 Redina Ljumanovic, MD Ph.D
 Jo-Ann Tai, MD

Mercedes Campagnard-de Windt, radiographer, has worked at Fundashon Prevension since the start of the breast cancer screening program. Mercedes retired in December 2018. We thank her for all the good work during that last 10 years. Two new radiographers, Della Kromoredjo and Gladys Berkeveld, were hired to reinforce the team. They received a specialized training from LRCB during their last visit.



3.4 THE TEAM

STAFF

Louise Elstak, General Director
 Corrie Batelaan, Assistant manager
 Priscella de Lannoy-Martines MSc, Research and Development
 Darsy Martinus, IT Officer
 Anthon Poulino, Finance Officer

NURSE PRACTITIONERS

Ethel Bijnoe, RN
 Marla Borgschot, RN
 Mercedes Richardson, RN
 Norinda Scharbaai, RN

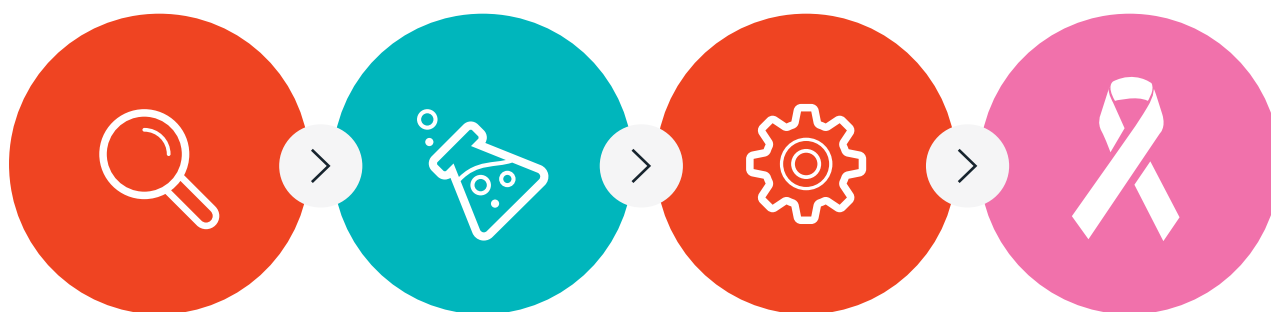
RADIOGRAPHERS

('MBB' Medical Imaging and Radiation Experts)

Mercedes Campagnard-de Windt
 Esther Chin-A-Lien
 Jeanette de Lannoy-Schloss
 Anneke Rhodes-Bennema
 Della Kromoredjo
 Gladys Berkeveld

RECEPTIONIST, ADMINISTRATION, DRIVER AND COURIER

Cristele Sirvania
 Lorraine Mercera
 Meredith Lourencia
 Zaida Nicolaas-Davelaar
 Ingrid Cristina-Klooster
 Janine van Ierland
 Mirugia de Mey
 Eldon Martina
 Sherwin Pablo



4. POPULATION SCREENING

Fundashon Prevenshon is currently responsible for the organization and the execution of two population screening programs in Curaçao.

Population screening involves a test being offered to individuals in an eligible group, usually defined by age, as part of an organized program. The target group is scientifically proven to have the most risk and to receive the most health benefit from screening.

*The **World Health Organization** recently stated in the published document on the Global non-communicable disease reduction action plan (2013-2020) that the prevention of cervical cancer through population-based cervical cancer screening and HPV vaccination, and the prevention of breast cancer through population-based mammography screening linked with timely treatment are the most cost-effective interventions for prevention and control of these types of cancers.*

With our current population screening programs, Fundashon Prevenshon puts Curaçao ahead most Non-Latin Caribbean countries that lack a well-organized national population-based screening program for breast cancer and cervical cancer where the target population of the whole country is specifically invited to participate. Most of these countries implement an opportunistic screening often times people of low social-economic backgrounds or who reside in rural areas do not get screened due to accessibility issues and high costs of screening.

Accessibility to the screening programs is essential. All women and legal residents of Curaçao who are in the target group will receive an invitation to participate. We offer transportation services free of cost to guarantee that all participants can reach the prevention center or one of our other locations for cervical cancer screening. Additionally, we have a toll-free number (0800-1811) to contact our office to make or change an appointment or to inquire for any other questions.

The population screening programs are currently facing a number of challenges. There is currently no national policy on breast cancer and cervical cancers screening. As a result, general practitioners can refer their patients to other clinics to have their mammography followed by an ultrasound. Subsequently, Fundashon Prevenshon has no complete overview of the percentage of the target population that is actually being 'screened' and no guarantee that the screening is being performed according to the screening protocol.

Fundashon Prevenshon has an agreement with the Civil Registry that provides an annual overview of the personal records database of women in our target groups. This poses a great challenge as a group of women do not receive invitations for various reasons. We are still unaware of the number of women who fall into this group.

4.1 BREAST CANCER SCREENING

The purpose of breast cancer screening is not to prevent breast cancer but to decrease breast cancer mortality by detecting breast cancer as early as possible before any symptoms appear. This is of great concern as breast cancer is the most frequent cancer type among women in Curaçao. Curaçao is very unique in the non-Latin Caribbean as other countries only offer opportunistic mammograms.

Breast Cancer Screening is an organized population-based screening program. The target group is women aged 45-75. An invitation letter is sent every two years with the time and date of the appointment. Women who are being treated for a breast-related disease, or who have had a complete mastectomy are excluded from the screening. The breast cancer screening is audited biannually by the Dutch Expert Center for Screening (LRCB) to guarantee the quality of the professionals and equipment and to provide improvement recommendations. LRCB also provides specialized training for the radiographers and radiologists.

Two X-rays of each breast are taken by a radiographer. The x-rays are assessed by two independent Radiologists. A third Radiologist may also assess the mammograms when a consensus is not reached.

DATA ANALYSIS

The Target Population in 2018 increased as opposed to the previous years (table 1). However, the number of Invitations has decreased in 2018. The decrease in the number of invitations is attributable to a number of reasons. The de-registrations in 2016 also accounts for the number of women that were not invited in 2018. Additionally, invitation letters that have been sent are returned to us by the Postal Office due to different reasons including the following: address does not exist, the person does not reside at the address, unknown resident or moved. It is still not possible to get in touch with these women as their contact information is unknown to us. Additionally, women who have been referred to a gynecologist and who are being treated for breast cancer are also not invited.

Since the beginning of the breast cancer screening program, a total of 59,406 breast cancer screenings have been performed. 17,665 women were invited to participate in the Breast Cancer Screening Program in 2018; 7,837 women participated in the screening resulting in a participation rate of 44.4%. This is a slight increase in comparison to previous years.

44% of the women who participated are up-to-date with their screening, meaning that they participated in the screening in the year that they were invited.

The Non-response rate, the proportion of women who did not participate or who did not indicate that they are unable to participate, decreased (46.1%) in comparison to the previous years.

Some women do not participate on the day of their appointment and subsequently they may take a long time before contacting Fundashon Prevenshon to make a new appointment. In general, 80% of women who participated in 2018 re-attend the screening between 21 and 26 months after their previous screening. However, there is a large group of women who have participated in the two previous rounds but who have not responded to the current invitation. We will actively contact this group of women to make new appointments if they wish so and to determine why they have not participated.



Table 1: Primary Indicators for the Breast Cancer Screening Program (2014-2018)

	2014	2015	2016	2017	2018
TARGET POPULATION	35,533	36,961	38,440	39,919	40,250
NUMBER OF INVITATIONS	19,492	22,070	20,929	20,984	17,665
MAMMOGRAMS	7,492	8,703	8,699	8,630	7,837
PARTICIPATION RATE (%)	38.4	39.4	41.6	41.1	44.4
NON-PARTICIPANTS	2,376	2,455	1,894	2,107	1,687
NON-RESPONSE	9,996	10,912	10,336	10,247	8,141
NON RESPONSE RATE (%)	51.3	49.4	49.4	48.8	46.1
REFERRALS	425	322	393	362	340
REFERRAL RATE (%)	5.70	3.70	4.5	4.2	4.3
NUMBER OF SCREENING DAYS	247	259	260	249	222
AVERAGE NUMBER OF SCREENINGS PER DAY	30.3	33.6	33.2	34.6	35.3

826 women were invited to participate in the screening for the fifth screening round; 591 women (71.5%) responded and participated in the screening. The re-attendance of the group of women who initially participated in the screening program in 2010 is very high, there is a clear motivation to continue getting a mammogram every two years.

A group consisting of 1,383 45-year-old women were invited to participate in the screening for the first time. One-third (31%) of these women responded to the invitation and had a mammogram taken.

Table 2 shows the voting districts with the highest breast cancer screening participation rate. Boca Samí, Bullenbaai, Jandoret, and surrounding neighborhoods have the highest participation rate (72%). Previous analysis indicated that Brievengat had the highest participation rate in the period from 2010 to 2014 (86%). The neighborhoods in the east part of the island have the highest participation rate.

Table 2: Top 5 Voting districts with the highest breast cancer screening participation rate in 2018.

VOTING DISTRICT	INVITATION	SCREENING	PART. RATE	DESCRIPTION
11	58	42	72%	Boca Sami, Bullenbaai, Jandoret, Landhuis Malpais, Landhuis Wechi
91	121	87	72%	Kirindongo Abou, Nabij Vetter, Ronde Klip, Vetter
94	143	96	67%	Rust en Vrede, Santa Rosa
59	75	50	67%	Brievengat, Cas Cora, Jongbloed, Rust en Vrede Bij Brievengat, Trai Seru
72	163	108	66%	Nabij Sta Rosa, Noord Zapateer, Ronde Klip, Sapate

Table 3: Percentage of referred clients with BI-RADS 0, 1, 2, 3, 4 and 5

BI-RADS	LEFT	RIGHT	TOTAL
0	130	117	247
1	4,161	4,169	8,330
3	3,483	3,487	6,970
4	53	60	113
5	10	4	14
TOTAL	7,837	7,837	15,674

REFERRALS

340 women were referred for further analysis at the Mammopoli St. Elisabeth Hospital or at another health care institution (referral rate 4.3%). As previously mentioned, a third radiologist will assess the x-rays in case the two radiologists have not been able to reach a consensus; 58% of women were referred after arbitration by a third radiologist.

The majority (43%) of women who were referred for further testing participated in the screening for the first time (screening round 1).

CHALLENGES

The number of invitation days is lower in comparison to previous years due to the malfunctioning of the air-conditioning in the mammography room and the malfunctioning of the mammography equipment. The screening was also suspended for a number of days for the dismantling of the old mammography equipment and installation of the new 3D mammography and training of the radiographers and radiologists.

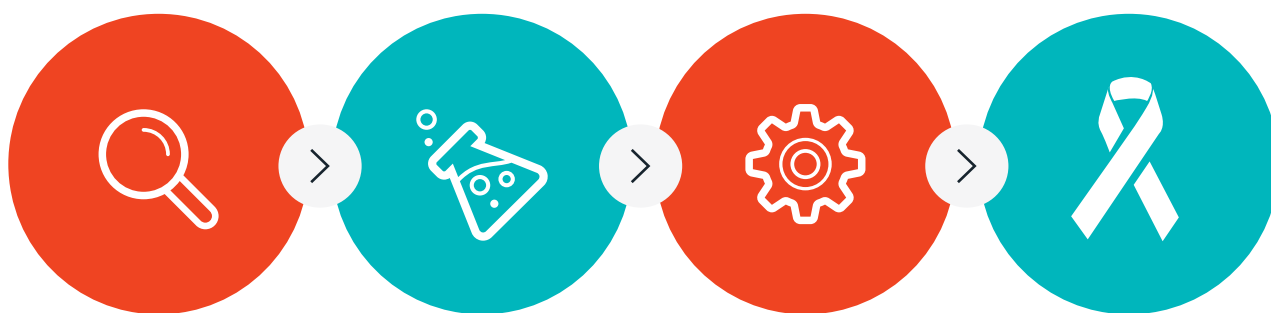
As mentioned above, 31% of 45-year-old women who are invited to participate in the screening for the first time actually responded and participated in 2018.

Unfortunately, we have no contact information other than their home address of these women. We are currently exploring other alternatives to reach this group in order to increase participation.

We need to shift our focus on women who previously participated in the screening but who have not responded to their invitation. This is a large group of women. We will actively contact these women to make new appointments if they wish to re-attend and to determine the reason for not responding to the invitation.

The focus of our awareness activities will also need to shift to not only to increase the attendance of women who never have participated but also to educate on the benefits of re-attendance.





4.2 CERVICAL CANCER SCREENING

Cervical Cancer Screening is a well-organized screening program.

The purpose of the cervical cancer screening program is to prevent cervical cancer by early detection of a pre-cancer condition. The protocol of the cervical cancer screening was composed by Dr. Gomes Bravio, Gynecologist Oncologist. The protocol was approved by the Medical Ethical Committee of the Fundashon. The target population consists of 56,558 women aged 25 to 65 years. An invitation letter is sent to the target group to participate in the cervical cancer screening program. Women who have had a complete hysterectomy, who are currently being treated by a gynecologist, who have not previously had sexual relations and women who are pregnant and up to six-month post-pregnancy are excluded from the screening program. Women who are over 65 years and never had a cytology test nor a cytology test in more than 10 years can also participate in the screening.

LABORATORY TESTS

Women aged 25-29 only receive cytology testing. Women over 30 years receive a high-risk HPV (hrHPV) DNA test and cytology testing when hrHPV is detected. Women aged 25 to 29 with positive cytology (ASC-US, LSIL) are recalled after 6 months and 12 months. Women aged 30-65 with a hrHPV positive with a negative cytology (NIN, PAP1) test result are recalled after 12 months as most hrHPV infections are transient and do not require immediate intervention. The follow up based on the test results are described in the Protocol for Cervical Cancer screening in Curaçao.

Data Analysis

In 2018 Fundashon Prevenshon send an invitation letter to 11,765 women.

1,914 (16%) women responded to the invitation and participated in the screening in 2018. The number of invitation letters, participation and participation rate based on age category are shown in table 3.



LOCATIONS

Fundashon Prevenshon has multiple locations strategically located on the island to accommodate our clients who reside or work in these areas. Our offices are located at Sorsaka Medical Center, Aesculapius Medical Center, Sambil Shopping mall and since July 2018 our clients on the West side of the Island can get screened at the office of Dr. Janga at Tera Kòrá.

DATA ANALYSIS

In 2018 Fundashon Prevenshon send an invitation letter to 11,765 women.

1,914 (16%) women responded to the invitation and participated in the screening in 2018. The number of invitation letters, participation and participation rate based on age category are shown in table 4.

Table 4: Number of invitations, number of women who responded to the invitation and participation rate for the cervical cancer screening based on age category.

AGE GROUP	INVITATIONS	PARTICIPATION	PARTICIPATION RATE
25-29	2,134	270	13%
30-34	1,166	194	17%
35-39	1,215	243	20%
40-44	1,284	258	20%
45-49	1,429	262	18%
50-54	1,556	261	17%
55-59	1,526	218	14%
60-65	1,455	208	14%
TOTAL	11,765	1,914	16%

Table 5: Voting districts with the highest participation rate as a result of the invitation letter.

VOTING DISTRICT	INVITATION	SCREENED WOMEN	PART. RATE	DESCRIPTION
60	689	153	22%	Waterloo
85	553	119	22%	Brakkeput Abou, Brakkeput Ariba, Brakkeput Mei Mei, Caracasbaai, Cas Grandi, Hanenberg, Jan Sofat
59	351	74	21%	Brievengat, Cas Cora, Jongbloed, Rust en Vrede Bij Brievengat, Trai Seru

In total 4,737 samples were collected and analyzed in the laboratory in 2018. Table 6 shows the details of the number of samples were collected in 2018 based on location and age group.

3,573 (73%) samples were collected at the offices of Fundashon Prevenshon; the majority (47%) of the samples were collected at our centrally located main office in Otrobanda.

1,295 (27%) samples were collected by the General Practitioners and Gynecologists, this is less in comparison to 2017 (1,716).

Table 6: Number of invitations, number of women who responded to the invitation and participation rate for the cervical cancer screening based on age category.

AGE GROUP	AESCULAPIUS	OTROBANDA	SAMBIL	SORSAKA	TERA KÒRÁ	EXTERNAL	TOTAL
25-29	35	187	37	64	8	168	499
30-34	47	186	44	105	10	156	548
35-39	33	190	46	114	4	195	582
40-44	45	232	48	114	10	161	610
45-49	35	398	34	79	2	146	694
50-54	32	372	31	71	2	127	635
55-59	53	352	32	37	8	94	576
60-65	48	330	20	39	8	71	516
>66	11	44	0	4	2	16	77
TOTAL	339 (7%)	2,291 (48%)	292 (6%)	627 (13%)	54 (1%)	1,134 (24%)	4,737

LABORATORY RESULTS

As mentioned previously, hrHPV is tested in women 30 years and older. hrHPV was detected in 26% of women. The hrHPV detection rate was the highest (35%) among women in the age group 30-34 years. This is consistent with the results of the data analysis in 2017 (30.4%). As expected, the hrHPV detection rate decreases with increasing age.

The most recent results of the monitor of the cervical cancer screening in the Netherlands indicate that the youngest women (30-34 years) have an hrHPV detection rate of 21.3%. In total hrHPV was detected in 9% of all women screened in 2017. This is much lower in comparison to our results.



Figure1: hrHPV detection rates (%) per age category

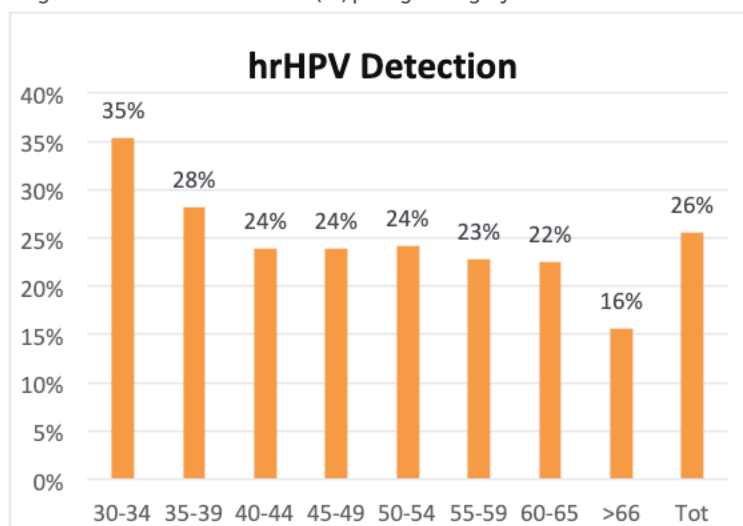


Table 7: Pap detection rates per age group in cytology tested samples.

AGE	PAP 0	PAP 1	PAP 2	PAP 3A	PAP 3B	PAP 4	PAP 5
25-29	1%	87%	4%	6%	1%	0%	0%
30-34	1%	80%	6%	10%	2%	0%	0%
35-39	2%	82%	6%	7%	4%	0%	0%
40-44	1%	85%	6%	7%	1%	0%	0%
45-49	2%	87%	4%	6%	0%	0%	0%
50-54	0%	91%	2%	6%	1%	0%	0%
55-59	2%	88%	3%	2%	2%	0%	0%
60-65	3%	88%	6%	3%	0%	0%	0%
>66	0%	94%	3%	3%	0%	0%	0%
TOT	1%	86%	5%	6%	1%	0%	0%

PATHOLOGY RECOMMENDATIONS

As mentioned above, the pathologist will give a recommendation for the follow-up based on the result of the screening according to our screening protocol. Figure 2 gives an overview of the recommendations based on age.

Repeat after 3 and 5 years

The majority of the participants (80 % of women between 25 and 29 years, and 91% of HPV negative women) had a normal test result and will receive an invitation after 3 or 5 years.

Referral to Gynecologist

The total Referral rate in 2018 was 9.4%, this is higher in comparison to 2017 where only 3% of all women were referred to a gynecologist. 653 women attended for the secondary test in 2018, 319 (48%) of these women were referred to the gynecologist.

Incomplete analysis

Incomplete analysis refer to samples that were not analyzed according to the screening protocol. We noted multiple reasons as incomplete data on the laboratory form, no Pap test result or no HPV test result, and missing recommendation. The recommendations will be corrected by the Pathologist and send to the General Practitioners.

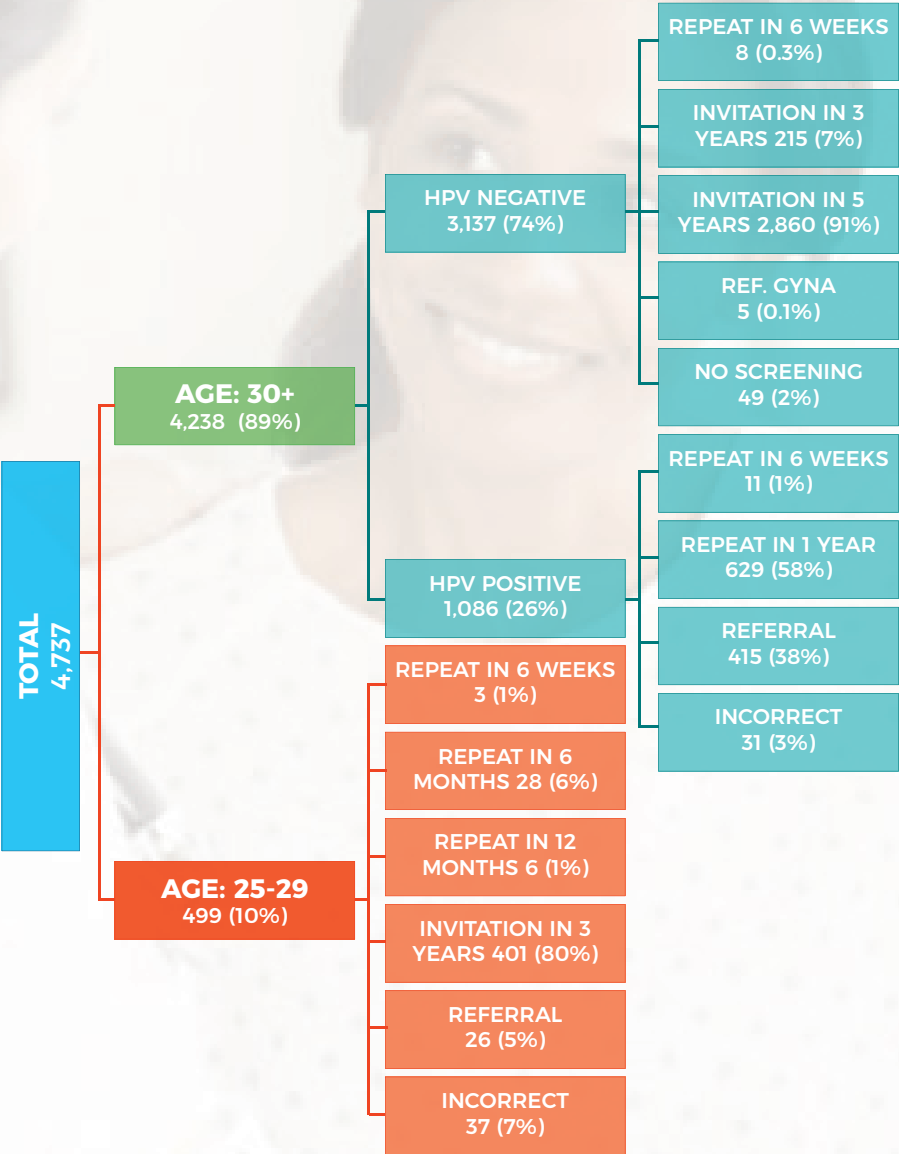


Figure 2: Number of women who participated in the cervical cancer screening, and follow-up recommendations per age group. Incomplete refers to women whose samples have not been analyzed according to the screening protocol.

CHALLENGES

The current results shown on the previous page are received through the Medical Laboratory Services. The results must be known within 3 weeks but cytology testing may have a delay in the pathology department. Screening according to the protocol after treatment.

The current cervical cancer screening guideline does not include women returning to the population screening after treatment. Conversations are on their way with our advisor, Dr. Gomes Bravio to determine the agreements after treatment.

These results are based on the number of samples that were analyzed at Medical Laboratory Services (MLS). We need to take into consideration that these numbers do not provide a complete overview of all women screened in 2018. We noted that samples collected by GP's or Gynecologists have also been sent to be analyzed at other laboratories and that samples are not always marked as Population Screening (PS). Unfortunately, Fundashon Prevension is not aware of the number of samples that were collected and send to other laboratories.

5. 2018 AT A GLANCE

5.1 CORPORATE IDENTITY

In 2018, we took the first step to define a marketing plan. However, it soon became evident that prior to developing a strategy to deliver information to our target groups, it was essential to define a corporate identity. The corporate identity is not only defined by a recognizable logo and slogan, but also by the way we communicate internally and externally. We need to determine our objectives and develop a specific set of guidelines as part of our corporate identity, thereby guaranteeing consistency in providing information. This will be an ongoing process.

5.2 AWARENESS ACTIVITIES

One of the main goals of Fundashon Prevension is to raise awareness of prevention. Therefore, Fundashon Prevension has organized multiple activities for health care professionals and the community throughout the year. In the list below, we highlight some of the main activities during 2018. In our efforts to promote the yearlong activities, we use social media platforms, newspapers, radio and television programs.

CLINICAL CONFERENCES

Fundashon Prevension invited Prof. R. Pijnappel, Professor of breast Radiology at UMC Utrecht and CEO at the University Medical Centre Utrecht, and Dr. Ljumanovic, Screening radiologist at Fundashon Prevension, to give a presentation on the new developments in breast cancer screening and local guidelines on breast cancer screening. These presentations were given during the Clinical Conferences at St. Elisabeth Hospital, as part of the quality promotion of NASKHO, for General Physicians, Oncologists and other Specialists, Resident Doctors and Nursing Staff.

KONFERENSHA KÒMBERSÁ SALÚ

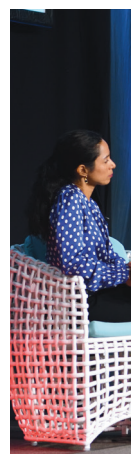
The main objective of the newly established Kòmbersá Salú, Healthy Conversations, is to engage the community, by encouraging discussions about personal health issues and offering the opportunity to raise questions and seek answers from health care professionals participating in the conferences.

The first Healthy Conversations conference was held on May 29 at the World Trade Center. Dr. Gomes Bravio, Dr. Calor and Professor Pinedo discussed with moderators the topics of breast cancer and cervical cancer. Kimberly Gario, a cervical cancer survivor, shared her powerful and touching life story and experience with cervical cancer. She urged all women to participate in cervical cancer screening.

A panel consisting of Eurllyne Konket, nutritionist, Frieda Geller, President of Princess Wilhelmina Foundation, and Curd Evertsz, Vice President of the Ride for the Roses, held discussions on Wellness, Nutrition, and Exercise.

During this interactive conference, the attending public asked the speakers and panelists questions on personal health issues.

The second Healthy Conversations conference took place on September 22nd at the World Trade Center. The local promotion of this conference was quite different from the above-mentioned first conference. Twenty individuals, with a large following on social media from diverse backgrounds, invited the community in a screened film to attend the conference. Approximately 1200 people attended.







Professor Pinedo opened the conference with a brief introduction. Professor Olopade, MD, Professor at the University of Chicago, and an expert in cancer risk assessment and individualized treatment, gave a presentation entitled "Bridging Continents to get to the 'Root' of Breast Cancer." Professor Ferris, MD, Professor of Obstetrics and Gynecology at Augusta University, gave a presentation entitled, "Why screening is important for the population of Curaçao." Dr. Hooi, Ph.D, a post graduate at Fundashon Prevenshon, gave a presentation entitled "Scientific research on HPV and cervical cancer on Curaçao; the study, results, and solutions." Dr. Rach, an ENT specialist, gave a presentation entitled "HPV related throat and mouth cancer cases in Curaçao."

We conclude that Kòmbersá Salú was a very successful concept and we plan to continue these Healthy Conversations on health prevention in the future.



PATIENT ORGANIZATION FAIR

Fundashon Prevension organized the first Annual Health Fair in Curaçao on July 28 at Sambil. It was held in collaboration with many of the Patient Organizations in Curaçao. The purpose of the event was to raise awareness of different diseases in our local population, while also empowering our community to take personal responsibility for their health. A total of 19 Patient Organizations participated with an informative booth. A representative of each Patient Organization gave a short presentation. As a result of our First Annual Health Fair, we now have strong collaborative partnerships with many local Patient Organizations. Volunteers from Banko di Boluntario (Volunteer Bank) helped us with the set up for the event, guided visitors in the mall to our Health Fair, and assisted with cleanup. We hope to continue the collaboration with these local organizations in the future.



In February 2018, during the Carnival Parades, Fundashon Prevension handed out a newly designed flyer to promote cancer screening.

Fundashon Prevension organized and also participated in forty-eight information sessions, radio and television interviews, and health fairs, with the objective to increase the awareness of the importance of breast cancer and cervical cancer screening.



5.3 CONTINUOUS IMPROVEMENTS

In an effort to guarantee the continuation of the screening activities, Fundashon Prevenshon must continue with the innovation and improvement of our operations.

3D mammography. Our first mammograph was donated by the late Mr. Lionel Capriles and has been in use for eight years, from 2010 to 2018. There was a growing need for a new and improved device to guarantee continuity of the breast cancer screening program, since the previous mammograph malfunctioned on multiple occasions. Fundashon Prevenshon received a donation from Rotary Curaçao for the purchase of the new digital 3D mammograph. Breast tomosynthesis produces 3-dimensional images that are intended to reveal the inner architecture of the breast, unlike the prior generation of mammography systems, which generated 2-dimensional images.

Medimax-RSI Corporation was in charge of dismantling the old mammography and the installation of the 3D mammograph and the corresponding software. The physics group of LRCB performed an acceptance test prior to the first use, examining the system to assure it meets the specifications established during the type test. A new doctor station (monitor) compatible with the 3D mammography was also installed.

Radiographers and Radiologists received specialized training from Hologic to acquaint them with the new 3D mammography and software.

Fundashon Prevenshon is the only organization in the Dutch Caribbean to apply this new technique.

CERVIX INFORMATION SYSTEM (CIS)

CIS is the software designed by RADventure specifically for the cervical cancer screening program in Curacao. The test version was released to determine whether all functionalities worked appropriately and to also detect possible errors. Our nurses work with the test version to get acquainted with the different features of the new program.

The updated database from the Civil Registry, including the information on our target population and the screening results from the Laboratory, has been uploaded in the software. The aim is to switch completely to the CIS program in February 2019.

De-registration Process Fundashon Prevenshon officially introduced the de-registration form. This form allows our participants to de-register if they do not wish to participate in a screening round, or, if they wish to terminate participation indefinitely. Participants who wish to de-register are required to specify the reason for the de-registration. Only those participants who complete and return the form will be de-registered.

5.4 NEW PERMIT APPLICATION

The Board has applied with the Ministry of Health for a permit to screen colorectal cancer and glaucoma. Pre-diabetic screening is in the definition phase and consultation is taking place with local partners and medical authorities regarding the infrastructure of this specific screening program.

5.5 10TH ANNIVERSARY CELEBRATION

The 10th Anniversary of Fundashon Prevenshon was celebrated on December 14th. The celebratory cocktail reception was held in the street in front of our main office in Otrobanda, on Klipstraat. The many guests who supported Fundashon Prevenshon's mission from the start were present to participate in our Anniversary celebration. They included the Acting Governor of Curaçao, former and current Board Members, former and current Employers and Employees, and Friends of Fundashon Prevenshon.

Professor Dr. H. Pinedo opened the celebration with a heart-felt Thank You for the support, collaboration, and hard work by all present during the past ten years. Ms. Pardo, MD, MBA, announced during her speech that she will hand over her position as President of the Board to Professor H.M. Pinedo. She will remain on the Board as a Member.

Professor Dr. H. Pinedo and Ms. Elstak, Managing Director, celebrated the momentous occasion by cutting of the festive cake.



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6. HPV AND CERVICAL CANCER ON CURAÇAO

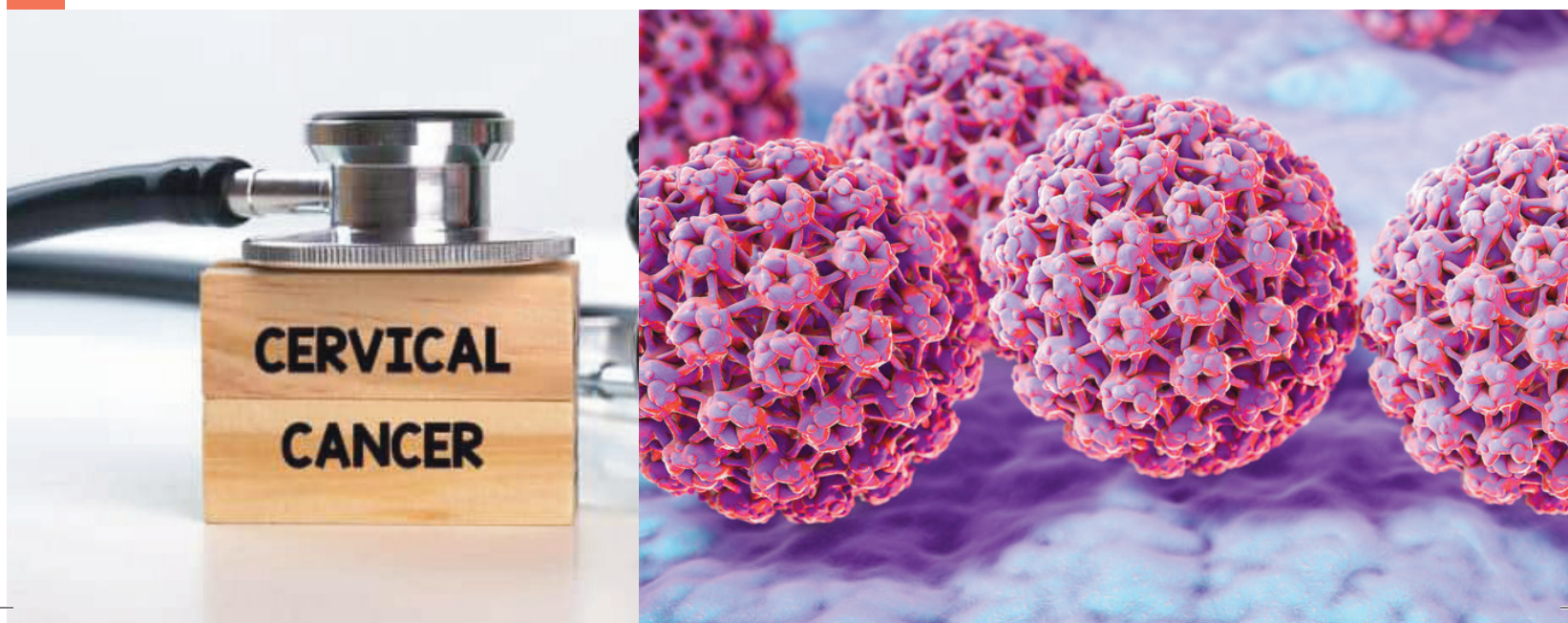
Towards implementation of an integrated prevention program

Desiree Hooi was approached by Fundashon Prevenshon in June 2013 to conduct the research on HPV and cervical cancer in Curaçao. The main purpose of this scientific research was to analyze HPV genotypes prevalence in the population of Curaçao.

The study focused on the following aspects:

- The HPV genotype and prevalence of 104 paraffin-embedded cervical cancer blocks were determined to investigate the prevalence of HPV genotypes in invasive cervical cancers and cervical intraepithelial neoplasia (CIN) grade 1, 2 and 3 in Curaçao.
- Samples were collected from 1,075 randomly selected women aged 25 to 65 aiming to determine HPV-prevalence, HPV-genotype distribution and associated risk factors in women from Curaçao.
- Cervical and oral samples were collected from 76 female sex workers and 228 women not working in the sex industry to compare the HPV genotype prevalence between these two groups of women.
- Data from all hysterectomies performed between 2003 and 2013 on Curaçao (4,184) were collected aiming to get an insight into the proportion of supravaginal hysterectomies and the level of awareness on the necessity to continue with cervical cancer screening in case of retained cervix.
- Determine the effectivity of the self-sampling device, Evalyn Brush in 500 individuals.

Conducting a scientific study prior to the start of the screening program was essential as the results provide evidence-based advice for the development of guidelines for primary and secondary prevention of cervical cancer in Curaçao. This is essential as most countries adopt protocols and guidelines without prior scientific research.



The government announced that the HPV vaccination program will start in the new school year.

There are currently three HPV vaccines on the market. Cervarix and Gardasil protect against two (16, 18) and four (6, 11, 16, 18) cancer-causing HPV genotypes respectively, while Gardasil 9 protects against five additional HPV genotypes (31, 33, 45, 52, and 58). The government will have to choose between one of these vaccines.

The findings of this study are an important contribution to public health of Curaçao and should be taken into account by the Government when considering the choice for the most effective vaccine for the population of Curaçao.

This research is unique to the Caribbean region and is an extremely valuable contribution to the public health of Curaçao. This study was the largest study conducted in the Caribbean among people of African Caribbean descent. Fundashon hopes to serve as a reference center for other countries in the Caribbean region who wish to conduct similar research. We are willing to share our current protocol with other Caribbean countries.

Desiree Hooi successfully defended her thesis on October 23rd, 2018 at the Vrije Universiteit Amsterdam in the presence of her family, friends, and colleagues. Fundashon Prevashon is proud and thankful to Desiree Hooi for her perseverance during her research and her contribution to the community of Curaçao.

We express our gratitude to Dr. I. Gomes Bravio, DDL laboratory Rijswijk (Netherlands), the Management of laboratory ADC, Dr. C. Coronel and the pathology department. This scientific study was made possible by the contribution of Mr. and Mrs. Kramer Lems and ORCO Bank.



7. THANK YOU FOR YOUR SUPPORT

We have been able to reach our goals and objectives in large part thanks to the partnership and collaborative support and commitment from the Government, our Board Members, Professional Staff, Donors and Volunteers.

THE DRIVING FORCES BEHIND THE FIRST HOURS

The late Mr. Lionel Capriles, Founder
 Professor H.M. Pinedo, Founder and President of the Board
 Mr. Bernard van Liemt, Project Manager
 Dr. Carmen Coronel, Project Manager and General Director
 Dr. Victor Maduro, Radiologist and Advisor to the Board

GOVERNMENT FUNDING

Fundashon Prevenshon is dependent on Government funding to continue the current screening programs. We are grateful to the Government for allowing the community of Curaçao to benefit from the existing prevention programs.

SCIENTIFIC RESEARCH FUNDING

Desiree Hooi, MD, carried out the scientific research into cervical cancer at the VUmc in Amsterdam and is the first Ph.D graduate at Fundashon Prevenshon. The scientific study was financially supported by Mr. and Mrs. Kramer Lems (Netherlands) and ORCO bank, among others. Professor Pinedo, a Board Member of Fundashon Prevenshon, offered Mr. and Mrs. Kramer Lems his heartfelt gratitude for their financial contributions during a dinner in Curaçao.

ROTARY GRANT

Rotary Curaçao, later also joined by Rotary Willemstad, offered Fundashon Prevenshon a financial donation through a Global Grant Project, for a new 3D digital mammograph, also known as Breast Tomosynthesis. Rotary International ensured the donation request of the Curaçao Rotary Clubs be included in the International Global Grant Applications of 2016. Rotary Curaçao and Rotary Willemstad have approached many international Rotary organizations, as well as companies and individuals, willing to contribute to the successful completion of the project.

Additionally, the Rotary Clubs of Curaçao are committed to increase awareness of the benefits of breast cancer screening and the participation of target groups. The Rotary Foundations in Curaçao will support the Fundashon in organizing awareness campaigns aimed at prevention.



Curaçao should be applauded for obtaining the 3D mammograph. It is currently the most advanced medical equipment, with improved accuracy in breast cancer detection, in which relatively small breast tumors can be detected at an early stage. The purchase of the 3D mammograph guarantees the continuity and sustainability of Breast Cancer Screening in Curaçao.

On behalf of the Women of Curaçao, we offer a sincere Thank You to every single Donor for their financial contribution towards the purchase of the 3D mammograph.

SPECIAL THANKS:

Professor Olguita Rojer

Mr. Carlos Tramm (Tramm Imaging)

We would like to thank Banko di Boluntario Kòrsou, particularly Ms. Liliana Rivera from Unidat di Bario, and her team of volunteers for helping us during our events.



VOLUNTEERS

"The world is hugged by faithful arms of volunteers"

– Terri Guillemets-

8. A VISION OF THE FUTURE

As mentioned before, Continuity and Sustainability remain the main focus of this Annual Report. In its long-term plan, the Fundashon briefly mentions two population surveys that will begin in the coming year, focusing on innovation and expansion.

In conversations with stakeholders involved, the question arose whether scientific research would be performed first, prior to population screening, and what research questions would then be selected.

The collaboration with local and international Universities offers the Fundashon the opportunity to invite students to assist in conducting scientific surveys.

8.1 NEW SCREENING PROGRAMS

COLORECTAL CANCER SCREENING

Colon cancer is the most common cancer in men and women in Curaçao. The estimated incidence of colon cancer in 2015 was 77 out of 100,000 people per year. The causes of colon cancer are varied, and lifestyle factors may increase the risk of colon cancer. However familial risk for colorectal cancer and polyps are well known factors. The chance of survival depends on detecting colon cancer as early as possible, the stage of diagnosis and improved diagnosis and treatment.

Population screening on colorectal cancer can occur through conventional colonoscopy or virtual colonoscopy. During the preparatory phase for population screening, discussions took place with the local oncologist J.J. Schnog MD Ph.D, gastroenterologists R. Schotborgh MD, A. Saleh MD Ph.D and other specialists in order to determine the most suitable technique for screening, selection of the target group and guidelines for screening on colorectal cancer in Curaçao.

GLAUCOMA SCREENING

Glaucoma is the third most common medical disease in Curaçao, with blindness as the most feared outcome. Ethnicity, gender, and age are risk factors associated with open-angle glaucoma.

Glaucoma is called “silent thief of sight” because the person generally feels nothing, and symptoms occur when the disease is at an advanced stage. Early detection and treatment minimize the risk of visual impairment. Family members of a glaucoma patient are eligible to undergo the screening with no minimum age. If the measured pressure is higher than the maximum pressure of 21 mmHg, the family member is referred to an ophthalmologist for further examination and treatment. A database will be kept of all data, including gender, ethnicity, family history of glaucoma and the photo recordings of the fundus.

Conversations with local ophthalmologists are ongoing to develop screening guidelines.

8.2 NEW LOCATION

In the short term, Fundashon Prevenshon will move into a new, larger building on Molenplein, to allocate the new mammography and an additional mammography. Renovations of the new building started in the second half of 2018. The move into the new building will take place in 2019.

8.3 OTHER IMPROVEMENTS

- Design and launch of a new website;
- Develop and introduce a mobile application for our clients;
- Improvement of our activities and services;
- Establish collaboration with more organizations.



ANNUAL REPORT 2018

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