



Università
degli Studi
di Ferrara

IUSS



Prof. JULIAN LITTLE

Professor and holder of the Distinguished Research Chair in
Chronic Disease Epidemiology and Control, School of Epidemiology and Public Health
Faculty of Medicine, [University of Ottawa](http://www.uottawa.ca)

IUSS Copernicus Visiting Scientist 2018/19

OCTOBER 1st, 2019

h. 15.30

Room D5, NIB (Mammut).
Via Luigi Borsari 46 – Ferrara

Official CVS AWARDING and LECTURE

“Research on the control of cervical neoplasia”



Dr. Little's expertise and experience lies in epidemiology in multi-disciplinary contexts, including maternal and child health, cancer epidemiology and prevention, nutrition, public health genetics and evidence synthesis

He has been a Professor in the School of Epidemiology and Public Health (Director 2006-2016) at the University of Ottawa since 2004, and holds a Distinguished Research Chair in Chronic Disease Epidemiology and Control.

His PhD, from Aberdeen University, was on problems of ascertainment of congenital anomalies. Subsequently, he worked for the EUROCAT Central Registry in Brussels (Belgium), as a lecturer in epidemiology in Nottingham University, as an epidemiologist in the International Agency for Research on Cancer in Lyon, and as Professor of Epidemiology at Aberdeen University, during which he spent a sabbatical year (2002-3) at the Office of Genomics and Disease Prevention, CDC, Atlanta. He is also a Visiting Professor in the Shanghai Jiao Tong University School of Medicine (China) and a Senior Research Fellow in the International Prevention Research Institute (iPRI, Lyon).

Research on the control of cervical neoplasia

Globally, more than 500,000 women are newly diagnosed with cervical cancer each year, the large majority of whom live in lower- and middle-income countries. Globally, it is the third most common type of cancer among women, but in areas such as East Africa, it is the most common, with an age-standardized incidence rate (ASIR) of over 30 per 100,000. In Canada, it is 13th most common cancer among females (ASIR 8.3 per 100,000) – however, in northern remote parts of Canada, high rates of incidence and mortality have been reported.

Persistent infection with certain types of human papillomavirus (HPV) is a necessary cause of cervical cancer. Vaccination against some strains of HPV reduces the frequency of cervical abnormalities that are considered to be pre-cancerous. It has been suggested that the combination of vaccination and screening may lead to the elimination of cervical cancer.

In many parts of Canada, HPV vaccination rates are low. I will describe a project which examined attitudes towards HPV vaccination. I will then present a trial of strategies to increase screening uptake in part of northern Canada, which particularly illustrates the challenges of doing research in a vulnerable population. In addition, I will present a trial of alternative methods of managing women with screen-detected cervical abnormalities, which incorporated psychological assessments and health economic evaluation, and also enabled investigation of genetic susceptibility and the association between HPV infection and measures of psychological distress. Finally, I will discuss work on women's preferences in cervical screening.

Students, Ph.D students, Post-doc, researchers, professors and all interested people are invited.
The participation could give credits for [disciplinary activities for Ph.D students](#).