## Appendix A. Disease burden and cost inputs

2 Disease incidence

1

- 3 To estimate the vaccine-preventable HPV 16,18-related cervical cancer incidence in
- 4 Mozambique, we used data for Mozambique from the ICO Information Centre on HPV and
- 5 Cancer. 8 This entailed multiplying the Mozambique-specific crude incidence of cervical cancer
- 6 by the prevalence of HPV 16 and/or 18 among women with cervical cancer to arrive at an
- 7 incidence rate of 23 (16-30) per 100,000 at-risk individuals. Reported cases are not discounted.
- 8 DALYs
- 9 To estimate the average DALYs incurred per case of cervical cancer, we worked with results
- published by Goldie and colleagues on potential benefits of HPV 16,18 immunization in
- 11 Mozambique. 16 We divided the discounted cervical cancer-related DALYs averted by the
- number of cervical cancer cases averted for an average of 3.6 discounted DALYs per case. We
- present discounted DALYs to maintain consistency with the discounted economic benefits
- reported and thereby present the value of all benefits in 2015.
- 15 Disease costs
- Average discounted healthcare costs per case of cervical cancer (\$1,792 (\$896-\$3,584)) were
- derived by weighting the cost per case for various stages of cervical cancer by the relative
- proportions of people experiencing the different levels of severity, and adjusting costs to 2015
- 19 USD. We used data published by Goldie et al for the direct medical costs incurred for each case,
- as well as the relative proportions of each level of disease severity. <sup>16</sup> We used World Bank GDP
- 21 deflator estimates for Mozambique to adjust costs to 2015 USD. 17 Productivity losses were

- 22 estimated by multiplying DALYs by World Bank estimates of the 2015 Mozambique GNI per
- 23 capita.<sup>19</sup>