Study of colposcopic evaluation of unhealthy cervix in rural population of Maharashtra

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Abstract

Background: Pap smear test is the primary screening to rule out cervical intra epithelial Neoplasia (CIN) and invasive cancer of uterine cervix but the accuracy of papsmear test varies from 75 to 90 hence colposcopy is better substitute to evaluate various pathogenesis of unhealthy cervix. **Method:** 150 patients having unhealthy cervix underwent colposcopic evaluation and findings were noted. Every patient underwent both acetic acid and schillrs test before they were subjected to colposcopic directed biopsies. The biopsies were taken from a ctowhite areas test before they were subjected to colposcopic directed biopsies. The biopsies were taken from a ctowhite areas and the iodine negative areas. **Results:** The clinical manifestations of patients were 82(54.6%) had white discharges per vagina, 29(19.3%) Irregular menses, 21(14%), lower back pain 7(4.66%) had post menopausal bleeding, 11(7.33%) post-coital bleeding. The colposcopic findings were 52(34.6%) had Aceto white areas, 48 (32%) had punctuations, 20(13.3%) had mosaic pattern, 8(5.33%) had abnormal vasculature 22(14.6%) had normal cervix. The age groups from 23 to 68 were studied and 85(56.6%) had cervicitis 27(18%) had mild, 19(12.6%) had moderate and 10 (6.6%) had CIN dysplasia and 9(6%) had CIN. Analysis colposcopic result was- colposcopic positive had- 41 (27.3%) Biopsy positive 52 (34.6%) biopsy negative, colposcopic Negative had 9(6%) had biopsy positive 48(32%) had Biopsy Negative **Conclusion:** Colposcopy evaluation plays vital role to rule out abnormal cervical smears because of its less sensitivity and false negative cytogens. In addition to papsmear test colposcopy evaluation will be useful for final diagnose.

Key Words: CIN, Papsmear, colposcopy, HPV, Biopsy

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INTRODUCTION

Every year about 12 to 13 lakh women are being diagnosed as cervical cancer and 6 to 7 lakh mortality due to cervical cancer in India, aged between 20 to 45 years of age¹. When the symptoms such as post coital bleeding troublesome vaginal discharge irregular menses lower abdominal pain or pelvin inflammatory diseases, the patients of rural area don't consider it as serious prognosis. This unhealthy cervix may lead to morbidity cervix may lead to morbidity

and mortality. Cervical erosion or ectropion is a condition in which endocervical columnar epithelium protrudes out through external of the cervix and into vaginal portion of cervix undergoes squamous meta plasia and transforms to stratified squamous epithelium². Although papanicolau (pap) smear has remained important tool in the screening of cervical cancer^{3,4}. Ideally all patients having the clinical anistations of unhealthy cervix must be evaluated with colonoscopy examination as differential diagnose⁵. Or confirmation cervical cancer.

MATERIAL AND METHODS

150 adult female aged between 23-68 regularly visiting to OPD of OBG and gynaecology Department of SSPM Medical College hospital At post-padave, kasal (Taluk) Sindudarga (Maharashtra) having unhealthy cervix were studied.

Inclusion criteria: Patients have white discharge per vagina irregular menses, lower abdomen pain low back ache, post- menopausal bleeding post-coital bleeding.

Exclusion criteria: pregnant puperal postorbital, bleeding PV at the time of examination cercaleisions Irmuno compromised patients

Methods: Every patient was subjected to colonoscopic evaluation and findings were noted. All the patients under went both acetic acid and schillers test before they were subjected to colposcopic directed biopsies. The biopsies were taken from acetowhite areas and the iodine negative areas. The duration of study was October 2018 to January 2020

Statistical analysis: The various finding age groups clinical manifestation were classified with percentage. The statistical analysis was done in 2007 SPSS software.

This research paper was approved by Ethical Committee of SSPM Medical College AP Padave Taluk-Kasal Dist-Sindudarga- Maharashtra

OBSERVATION AND RESULTS

Table 1: Clinical manifestations of patients underwent colposcopy evaluation

Sl.No	Clinical Manifestations	No of Patients	%
1	White discharge per vagina	82	54.6
2	Irregular Menses	29	19.3
3	Lower abdominal (lower backache) pain	21	14
4	Post-menopausal bleeding	07	4.66
5	Post-coital bleeding	11	7.33

Table-1: Clinical Manifestation of the patients underwent colposcopy examination 82(54.6%) had white discharges per vagina, 29(19.3%) Irregular menses, 21(14%), lower back pain 7(4.66%) had post menopausal bleeding, 11(7.33%) post-coital bleeding.

Table 2: Study of Colposcopy findings

Sl.No	Particulars	No of Patients	%
1	Aceto white area	52	34.6
2	Punctuations	48	32
3	Mosaic pattern	20	13.3
4	Abnormal vasculature	08	5.33
5	Normal cervix	22	14.6

Table-2- Study colposcopic findings 52(34.6%) had Aceto white areas, 48 (32%) had punctuations, 20(13.3%) had mosaic pattern, 8(5.33%) had abnormal vasculature 22(14.6%) had normal cervix (No abnormal finding)

Table 3: Study of Colposcopy at different age

Age group	Cervicitis	Mild dysplasia	Moderate dysplasia	Severe dysplasia	CIN
23-33	42	8	2	2	1
34-44	25	15	7	4	4
45-55	13	2	4	2	2
56-68	05	2	6	2	2
Total with percentage	85(56.6%)	27(18%)	19(12.6%)	10(6.6%)	9(6%)

Table-3- Study of colposcopic at different age groups. In 23 to 33 age 42 had cervicitis 15 had mild, 7 had moderate 4 had severe dysplasia and 4 had CIN. In 45-55 age group – 13 had cervicitis, 2 had mild 4 had moderate 2 had severe dysplasia and 2 had CIN. In 56-68 age group- 5 had cervicitis 2 had mild 6 had moderate 2 had severe 2 had CIN. In total study- 85 (56.6%) had cervicitis, 27(18%) had mild, 19(12.6%) had moderate and 10 (6.6%) had CIN dysplasia and 9(6%) had CIN

Table 4: Analysis colposcopic results

Sl.No	Particular	Biopsy positive	Biopsy positive	Total
1	Colposcopy positive	41(27.3%)	52(34.6%)	93(62%)
2	Colposcopy negative	9(6%)	48(32%)	57(38%)
3	Total	50(33.3%)	100(66.6%)	150(100%)

Table-4- Analysis of colposcopic results- In coposcopy positive had biosy positive 52(34.6%) had Biopsy test was negative. In colposcopy Negative test 9(6%) were positive, 48(32%) had negative biopsy results

DISCUSSION

In the present study of colposcopic evaluation of unhealthy cervix rural population of Mharashtra. The clinical manifestations were 82(54.6%) had white discharges per vagina, 29(19.3%) Irregular menses, 21(14%), lower back pain 7(4.66%) had post menopausal bleeding, 11(7.33%) post-coital bleeding (Table-1). Study colposcopic findings 52(34.6%) had Aceto white areas, 48 (32%) had punctuations, 20(13.3%) had mosaic pattern, 8(5.33%) had abnormal vasculature 22(14.6%) had normal cervix (No abnormal finding)(Table-2). In 23 to 33 age 42 had cervicitis 15 had mild, 7 had moderate 4 had severe dysplasia and 4 had CIN In 45-55 age group – 13 had cervicitis, 2 had mild 4 had moderate 2 had severe dysplasia and 2 had CIN. In 56-68 age group- 5 had cervicitis 2 had mild 6 had moderate 2 had severe 2 had CIN. In total study- 85 (56.6%) had carvcitis, 27(18%) had mild, 19(12.6%) had moderate and 10 (6.6%) had CIN dysplasia and 9(6%) had CIN (Table-3). Analysis of colposcopic results- In coposcopy positive had biosy positive 52(34.6%) had Biopsy test was negative. In colposcopy Negative test 9(6%) were positive, 48(32%) had negative biopsy results (Table-4). These findings were more or less in agreement with in previous studies^{6,7,8}. In the present study coloscopic evalution is considered outhetic than pop smear study but the value as screening tools effects cytological kscreening in kour country has long been disputed and constanty under trail⁹. Which results in to higher number of morbidity and mortality in India than abroad. Hence it was visual inspection and colposcopy should be used when screening for early stage

lesions¹⁰. But In underdeveloped countries including India, effective popsmear screening is not still successful and Human papilloma virus (HPV) testing is very costly hence colposcopy evolution plays vital role to diagnose unhealthy cervix including cervical Intra- epithelial Neoplasia (CIN)

SUMMARY AND CONCLUSION

The present colposcopic evaluation of unhealthy cervix will quite helpful to obstrecian and differentiate the various diseases of cervix. Moreover, HPV test is costlier than colposcopic test hence very Indian women can afford the colposcopic examination, But this demands further genetic, hormonal nutritional embryological immunological study because exact pathogenesis of un healthy cervix is still unclear.

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