HPV AND THE RULE OF COLPOSCOPY FOR EARLY DETECTION OF CERVICAL CANCER AND FURTHER MANAGEMENT OF CERVICAL LESIONS

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Purpose: Cervical Screening declines the overall mortality of Cervical Cancer by approximately 50-80 percent. This presentation shows screening effects (early/late outcome) and the histological outcome of 1610 patients refereed to definitive diagnostics and asks for current consequences particular in relation to the increasing of Cervical Infections, especially HPV and the role of Colposcopy after presentations for further therapy due to repeat Pap-smear III or single Pap IV (Bethesda ASCUS, low grade SIL) and an estimated false negative ratio between 40 and 50 percent. Our CIN-Management and strategies for therapy will be introduced. Colposcopic features on viral associated abnormal and preinvasive lesions will be presented.

Method: Review of 1182 Conizations/Endocervical Curettage (ECC) from 1977-1995 and 428 Ectocervical Surface Scraping (ESS) and Endocervical Curettage (ECC) from 1985-1995 of our patients, all with preoperative Cytology Pap III or IV. Colpophotographies (slides) are done and related to histological results.

CIN I	%	CIN II	%	CIN III,	%	Ia ₂ , Ib	%	all
172	52,44	88	26,83	68	20,73			328
102	27,27	65	17,38	204	54,55	3	0,80	374
16	16,00	17	17,00	67	67,00			100
62	7,67	45	5,57	676	83,66	25	3,09	808
188	43,93	105	24,53	135	31,54			428
164	13,87	110	9,31	880	74,45	28	2,37	1182
	102 16 62 188	102 27,27 16 16,00 62 7,67 188 43,93	102 27,27 65 16 16,00 17 62 7,67 45 188 43,93 105	102 27,27 65 17,38 16 16,00 17 17,00 62 7,67 45 5,57 188 43,93 105 24,53	102 27,27 65 17,38 204 16 16,00 17 17,00 67 62 7,67 45 5,57 676 188 43,93 105 24,53 135	102 27,27 65 17,38 204 54,55 16 16,00 17 17,00 67 67,00 62 7,67 45 5,57 676 83,66 188 43,93 105 24,53 135 31,54	102 27,27 65 17,38 204 54,55 3 16 16,00 17 17,00 67 67,00 62 7,67 45 5,57 676 83,66 25 188 43,93 105 24,53 135 31,54	102 27,27 65 17,38 204 54,55 3 0,80 16 16,00 17 17,00 67 67,00 62 7,67 45 5,57 676 83,66 25 3,09 188 43,93 105 24,53 135 31,54

Conclusion: In addition to our results, the uncertain Cytology, if exclusive done and an increasing of cervical infections, especially HPV and his determination on Cervical Cancer Genesis, Colposcopy gets a more qualitative significant for diagnosis of intraepithelial lesions, their differentiation or association to viral infections and additional management of therapy. Colposcopy in this way will be more determining the diagnostics and therapy of Cervical lesions after a routine screening then Cytology will do.