

ORIGINAL ARTICLE

Clinicopathological Features of Carcinoma of Cervix

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ABSTRACT

Objective: To look at the age, stage at presentation, and morphology of cervix cancer patients.

Study Design: Single institutional study.

Place and Duration of Study: Department of Radiology, Peoples Medical College, Hospital, Nawabshah, Shaheed Benazirabad, and Sindh, Pakistan from January 1st 2018 to 31st December 2020.

Methodology: Five hundred biopsy proven cases of carcinoma cervical cancer were enrolled and age at the time of presentation, histology, and stage after diagnosis were included.

Results: 68.4% females with cervical carcinoma were between the age of 40 to 59 years and majority of patients were belonged to the rural area with (73.7%). 75.1% of the patients had squamous cell carcinomas, 3.3% had adenosquamous carcinomas, and 17.9% had adenocarcinomas. Female patients have been stratified by stage of the disease in which 46.2 % belongs to the stage II.

Conclusion: Majority of females have squamous cell carcinoma predominance over ardenosquamous carcinoma and adenocarcinoma and stage II was the most common in the females with carcinoma of cervix.

Key Word Carcinoma, Cervix, Squamous cell

INTRODUCTION

Cervical cancer is the second most frequent cancer in women and the third greatest cause of death from cancer in women worldwide. Cervical cancer affects 500,000 women worldwide annually, including 270,000 women dying from it, or one death every two minutes.¹ Around 80% of cervical cancer deaths occur in underdeveloped nations like Pakistan. In Pakistan, a woman is number of interrelated to this illness from the time she marries and has sexual interactions. However, studies suggest that in Pakistan, a low level of awareness - of both the disease and the availability of the preventive vaccine is rising exponentially the risk of cervical cancer.² Cervical cancer is still the most frequent genital cancer among women, and that it is the second leading cause of cancer in females after breast cancer.¹ Cervix carcinoma is the second most prevalent cancer in women under 50 years old, and the third most common cancer in young women following breast and small intestine cancers.^{3,4} Cervical cancer is a type of cancer that affects women. Every year, 273000 women are killed around the world Cervical cancer affects the majority of women in their forties and fifties.⁵ The actual rate of occurrence and the number of cases are unknown in developing nations. In Pakistan, the incidence of cervical cancer is unknown. Because it is a condition that is under-diagnosed and under-treated preventive.⁶ cervical cancer is listed among the top ten most prevalent cancers in many surveys. During 1977-1988, cervical cancer was ranked as the sixth most prevalent cancer in an earlier findings.⁵

MATERIALS AND METHODS

The single institutional study was conducted at Department of Radiology, Peoples Medical College, Hospital, Nawabshah, Shaheed Benazirabad Sindh Pakistan from 1st January 2018 to 31st December 2020 and comprised 500

cases of carcinoma cervical cancer. The International Federation of Gynecology and Obstetrics' clinical staging approach was used to assess the disease stage. Patient's age at the time of presentation, histology, and stage after diagnosis were included. The Statistical Package for Social Sciences (SPSS) version 15.was used to conduct the analysis.

RESULTS

Majority of females with cervical carcinoma (68.4%) are between the age of 40 to 59 years. The 500 females patients, which majority of patients were belong to the rural area 73.7%. Regarding stage of the disease, 46.2% belongs to the stage 2 of carcinoma of cervix (Table 1). 75.1 % of the patients had squamous cell carcinomas, 3.3% had adenosquamous carcinomas, and 17.9% had adenocarcinomas (Table 2).

Table1: Demographic information of the patients (n=500)

Variable	No.	%
Age (years)		
25 - 39	46	9.2
40 -59	346	69.2
60 - 79	96	19.2
80 – 100	12	2.4
Area of Residence		
Rural	373	74.6
Urban	127	25.4
Stages of the disease		
0	44	8.5
1	87	16.8
2	240	46.2
3	96	18.5
4	33	6.4

Table 2: Histopathological diagnosis of the patients with carcinoma of cervix (n = 500)

Diagnosis	No.	%
Squamous cell carcinoma	390	75.1
Adenosquamous carcinoma	17	3.3
Adenocarcinoma	93	17.9

DISCUSSION

Cervical cancer is a leading source of morbidity and mortality in women around the world, particularly in underdeveloped nations. In some poor countries, cervical cancer is the leading cause of death in the world. Females of child bearing age, invasive cervical malignancies account for 78% of all cases in economically disadvantaged and underdeveloped nations.¹¹

This cancer is responsible for 15% of all cancers in women. In such countries, the lifetime risk of invasive cervical cancer is approximately 3%. The condition accounts for 4.4% of all new malignancies in women in developed nations, and it is linked to a lifetime risk of roughly 1.1%.¹² Unusually the high pelvic relapse rates in individuals treated with surgery for adenocarcinomas and lower survival rates in patients treated with surgery or radiation for adenocarcinomas as first treatment in cases of adenocarcinoma. Only forty four patients were found in stage 0, the pre-invasive stage, among the 500 individuals. The question is whether this scenario also displays a lack of foresight. Women' understanding of the significance of for the purpose of detecting latent disease, a screening procedure is used. To broaden the scope of this discussion, In addition, it was discovered in a 72,613 patient study. In England, where a large percentage of documented nearly a third of South Asian women (nearly a third of those born outside of the country) were recorded as "never screened."¹³ Abnormal vaginal bleeding, such as postmenopausal bleeding, irregular menses, heavy monthly flow, painless metrorrhagia, or postcoital bleeding, affects 80-90 percent of cervical cancer patients.⁶

Postmenopausal bleeding is the most prevalent presenting sign of cervical cancer in several case series and geographic regions where endometrial cancer is uncommon. In roughly 10% of patients, abnormal vaginal discharge is a presenting symptom; the discharge can be watery, purulent, or mucoid. Advanced cases include pelvic or abdominal pain, as well as urinary or rectal symptoms. The most widely acknowledged staging system for cervical carcinomas was developed by FIGO.⁹ The FIGO stage is determined by a thorough clinical examination as well as the findings of particular radiologic investigations and procedures.

CONCLUSION

Majority of females have squamous cell carcinoma predominance over ardenosquamous carcinoma and adenocarcinoma and stage II was the most common in the females with carcinoma of cervix.

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