Original Research Paper



Pathology

ASSESSMENT OF UTERINE CERVICAL BIOPSY PATTERN IN FEMALES AT RIMS, RANCHI, JHARKHAND

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Aims & objectives - Assessment of uterine cervical biopsy pattern in females at RIMS, Ranchi, Jharkhand. Materials & Methods - Our study is composed of assessment of cervical biopsy specimen received from February 2021 to January 2022. A total of 176 cases of cervical biopsy specimen were examined. Results - Out of 176 cases, the most common diagnosis was Malignant Lesion of the cervix found in 82% cases. Conclusion - Tissue biopsy is a valuable diagnostic procedure. Aim of the study was to know the spectrum of disease and their frequency.

KEYWORDS: Uterine Cervical Biopsy, HPV, Keratinising Squamous Cell Carcinoma

INTRODUCTION

Cervical cancer is the fourth most common cancer among women globally and the second most common cancer among Indian women. Cervix is vulnerable to many pathological changes ranging from inflammation to malignancy. Uterine cervix is gateway to several nonneoplastic and neoplastic gynecological lesions. Non-neoplastic cervical lesions are seen in all age group but are more commonly seen in reproductive and sexually active women. These include inflammatory and tumour like non neoplastic lesions. Majority of nonneoplastic lesions are inflammatory in nature [1, 2]. Cervicitis caused by the human papilloma virus carries a high risk for condyloma acuminate, cervical intraepithelial neoplasia (CIN) and carcinoma [3]. It is the third most common cause of cancer deaths among women in the less developed regions. In India cervical cancer is the second most common cancer, with an estimated 1,32,314 new cases and 73,337 deaths in the year 2015 (4). In India, population based cervical cancer screening is largely non – existent in most regions due to competing health care priorities, insufficient financial resources and a limited number of trained health care providers. Hence most of the cases present in advanced stages of the disease, thus leading to increased mortality and reduced survival. Various screening and options like cytology, visual based screening and testing for high risk HPV are available. The pre-dominant risk factor of carcinoma cervix is a persistent human papilloma infection. Other risk factors are lack of awareness, early age at marriage, low socio – economic status, parity, race and tobacco smoking. Prognosis depends many on the stage of disease.

AIMS AND OBJECTIVE

To assess the histopathological pattern of uterine cervical biopsy specimens.

Material And Method

The present study is a retrospective study done over a period of 1 year carried out in the department of pathology in Rajendra Institute of Medical Sciences, Ranchi. Our study composed of assessment of cervical biopsy specimens received from February 2021 to January 2022. A total of 176 cervical biopsy specimen were examined.

DISCUSSION

In our study, majority of uterine cervical biopsies revealed malignant lesion (81.25%) 143 out of 176. Keratinising SCC (123 out of 176) was the commonest malignant lesion. Most of the cases were in 46-60 years of age group. Benign lesion (3.98%) 7 out of 176. Inflammatory lesion is 11.36% (20 out of 176), SIL (0.57%) 1 out of 176.4 cases adenocarcinoma, 18 cases nonkeratinising squamous cell carcinoma. keratinising squamous cell carcinoma are characterised by the presence of well differentiated squamous cell that are arranged in nests or cords that vary greatly in size and configuration. The defining feature of keratinising carcinoma is the presence of keratin pearls within the epithelium.

Table 1:- Distribution of histopathological diagnosis according to age.

| | | | | | | | |
|--------------------|----|------------------|------------------|-------------------|-------|--|--|
| DIAGNOSIS | | 31 - 45 YEARS | 46 - 60 YEARS | 60 YEARS ABOVE | TOTAL | | |
| INFLAMMATO | | | | | | | |
| RY | 5 | 11 | 3 | 1 | 20 | | |
| BENIGN | 0 | 1 | 5 | 1 | 7 | | |
| SIL | 0 | 1 | 0 | 0 | 1 | | |
| MALIGNANCY | 5 | 36 | 70 | 32 | 143 | | |
| UNSATISFACT ORY | 0 | 2 | 2 | 1 | 5 | | |
| TOTAL | 10 | 51 | 80 | 35 | 176 | | |

Figure 1:- Bar graph showing age distribution of the study population.

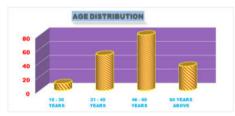
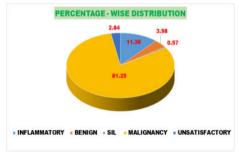


Figure 2:- Pie chart showing frequency of different lesions encountered in study population.



CONCLUSION

Tissue biopsy is a valuable diagnostic procedure. Aim of the study was to know the spectrum of diseases and their frequency. In our study neoplastic lesions were more common as compared to non—neoplastic lesion. Squamous cell carcinoma (SCC) is most common. Histopathological examination helps in early diagnosis of malignant and premalignant conditions and their prompt treatment. So every cervical biopsy specimen should be meticulously examined to diagnose the disease as early as possible. When it is in a benign state or

rather inflammatory phase (pre malignant stage), a sincere approach should be undertaken in treating the same. Also adequate amount of awareness should be instituted regarding cervical screening programme and vaccination against HPVs.

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