COMPARATIVE ANALYSIS OF DIFFERENT DIAGNOSTIC METHODS FOR ENDOCERVICAL LESIONS

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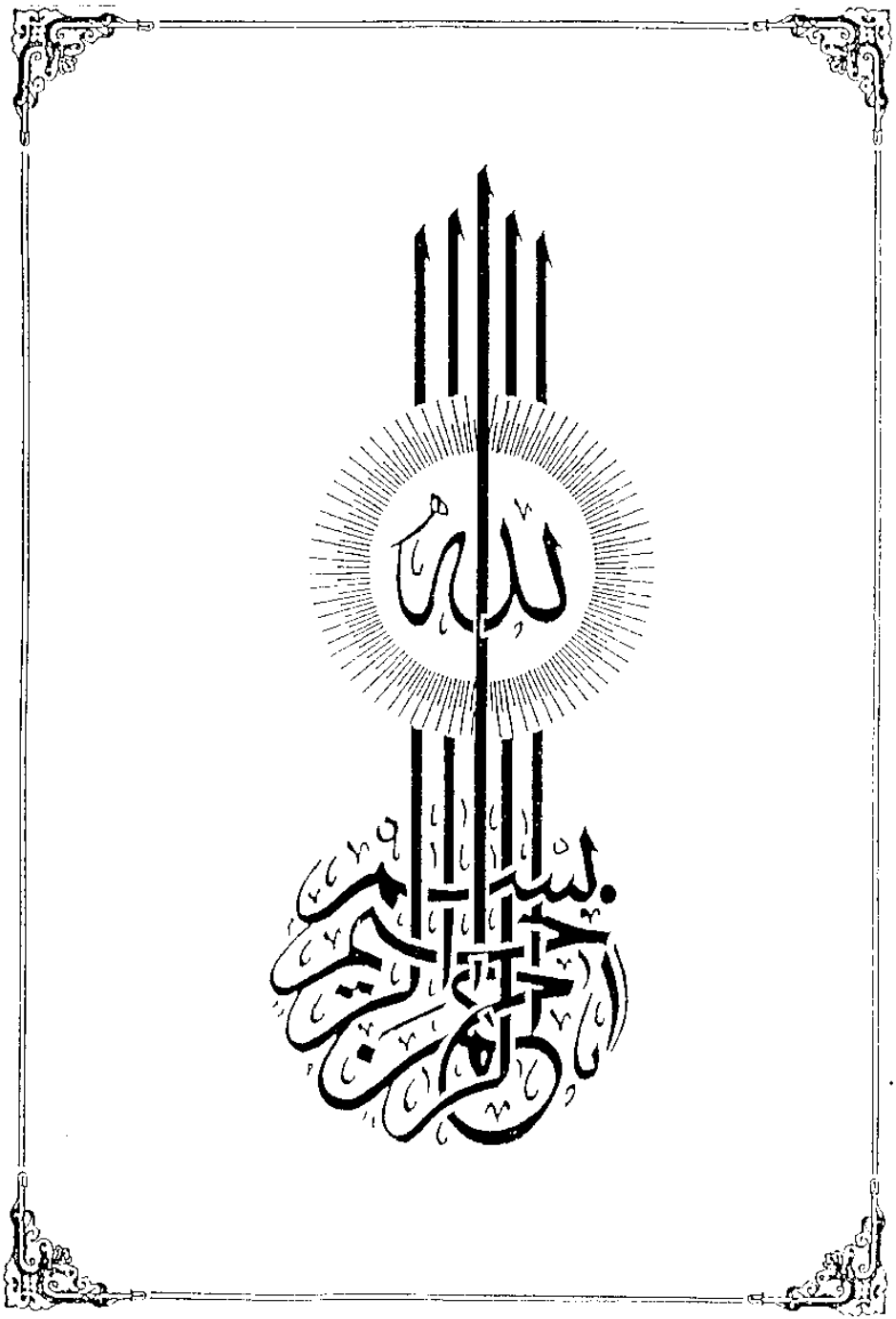

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Until recently, the combination of cytology, colposcopy, and histology has been the front line defence in the battle against cervical cancer. It has greatly improved the detection and early treatment of precancerous lesions.

This study is a trial to evaluate the new instrument, the microcolpohysteroscope, its capability for switching from panoramic to high power magnification and its role as a new weapon in the diagnostic armamentarium in conjunction with those classical methods.

INTRODUCTION

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Cervical carcinoma is the leading cause of morbidity and mortality among all cancers of the female genital tract.

Fortunately, it is a largely preventable disease, through diagnosis and treatment of early precancerous lesions.

Although the cervix is easily accessible for examination and screening, still the diagnosis of the early neoplastic processes in the endocervical canal virtually depends on blind methodology.

No subject has prompted discussion amongst those who deal with the cervix and its abnormalities like that of the cervical canal and its inherit difficulties in its full exposure.

Endocervical curettage, use of endocervical speculum during colposcopic examination and cervical conization have been advocated for better evaluation of the endocervical canal. None of these offers uncomplicated, direct or satisfactory visualization of the canal.

The place of the microcolpohysteroscope in the evaluation of the endocervical canal is just beginning to evolve. It offers a great improvement in the detection of the endocervical precancerous lesions through direct examination. It has multiple optical capacities which permit in vivo cellular observation.

Microcolpohysteroscopic examination is safe, atraumatic and reliable procedure in the diagnosis of endocervical lesions.

REVIEW OF LITERATURE