NEW APPROACH FOR CERVICAL CANCER AND REPRODUCTIVE DISORDERS PREVENTION IN WOMEN OUT OF TARGET SCREENING GROUP FOR HUMAN PAPILLOMA VIRUS

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Our goal was to find out the new approach for cervical cancer and reproductive disorders prevention in young women who are not included in the routine screening for HPV.

100 women 18-22 years old (19.7 ± 1.35) were included. 50 women with congenital transformation zone and cervical dysplasia II-III formed I group. Group II - 50 women with the congenital zone of transformation and cervical dysplasia I. All women mothers' pregnancy with miscarriage and preterm labor threat due to Progesterone level deficiency and natural progesterone treatment.

Group I lab tests: liquid cytology PAP-test: NILM - 13 women (26%), ASCUS - 21(42%), LSIL -12 (24%), HSIL- 4 patients (8%); detected HPV: 16-18 type -35 women (70%), other high oncogenic types -15 (30%); histological examination verified HSIL in all the patients: among them CIN II - 15 (30%), CIN II-III - 20 (40%), CIN III - 15 (30%).

II group PAP test detected: NILM - 12 women (24%), ASCUS - 24 (48%), LSIL - 14 patients (28%); HPV was not detected; histological examination verified parakeratosis, acanthosis in 38 women (76%), LSIL (CIN-I) - in 12 patients (24%). Due to the state HPV vaccination program absence in Ukraine, the compulsory vaccination of women with a congenital transformation zone is necessary.

Taking into account that CIN II-III recommended treatment methods are radical and destructive, timely biopsy in patients with a congenital transformation zone to detect acanthosis, parakeratosis and CIN I, would prevent CIN II-III (group I) treatment-following complications: infertility, miscarriage, preterm labor, cervix dystocia, cesarean section as well as increased perinatal mortality and morbidity.

Fig. 1. Cervical lesions distribution in 50 women with congenital transformation zone