

## DIFFICULTIES IN THE DIAGNOSIS OF PREMALIGNANT CHANGES IN MENOPAUSAL WOMEN

Ganovska A., Kovachev S.
Department of Gynecology - Military Medical Academy, Sofia, **BULGARIA** 

INTRODUCTION. According to the World Health Organization classification, cervical intraepithelial neoplasia (CIN) is a premalignant condition that subdivides into a low-grade (LSIL) and high-grade squamous intraepithelial lesion (HSIL), depending on the degree of involvement of the multi-layer epithelium of the cervix. HSIL progression in invasive cervical cancer is seen in 10% to 40% of patients, which determines the need for accurate diagnosis and subsequent treatment.

**RESULTS.** The treatment of premalignant cervical conditions is determined by various factors such as age, parity, lesion size. Histological verification is a gold standard in the diagnosis of cervical dysplasia. There are a number of benign cervical changes such as atrophy and immaturity of the flat epithelium that can mimic cervical intraepithelial dysplasia. This necessitates the detection of additional diagnostic markers for the differentiation of high-grade intraepithelial changes from benign cervical changes.

Differential differentiation resulting from age-induced atrophic processes uses immunohistochemical markers such as p16 and Ki67. Immunohistochemical expression of p16 is associated with dysplastic/neoplastic cells and is not detected in normal cervical epithelium. The extent of expression is dependent on the severity of cervical dysplasia. It is characterized by high sensitivity in the diagnosis of CIN 2 and CIN 3, but not of CIN 1.

Quantitation of Ki-67 in the cells located in the two-thirds of the epithelium is specific in the detection of CIN. At atrophic changes affecting the uterine cervix Ki-67 only show sporadic staining of the basal/parabasal cells.

**CONCLUSION.** Morphological analysis remains the gold standard in the diagnosis and determination of the degree of CIN. Concomitant use of the immunohistochemical marker along with the morphological assessment of biopsy material from the cervix increases the diagnostic value and thus the efficacy of the treatment.