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The HPV cervical infection and intraepithelial colorectal lesions in women

Olga Alyautdina

Moscow Medical Academy, Russia

Cervical cancer is a major healthcare problem. Prevention and treatment of precancerous changes in the cervix may decrease morbidity and mortality. At present, evidence suggests that infection by High-Risk Human Papilloma Virus Genotypes (HR-HPV) increase the potential risk of cervical cancer. Moreover, multiple evidence suggests that HPV to be a reason for cancer development in other organs. HPV-induced cervical cancer and colorectal cancer are closely linked diseases. Women with cervical HPV infection have a more than three-fold risk for anal infection. Few studies have shown that there is a strong association between HPV-induced colorectal cancer and analogous genotype of cervical cancer. A histological structure of anus epithelium shows obvious similarities with the structure of uterus neck epithelium including the presence of a transformed zone at the border between two types of epithelial cells. Anal benign tumor pathogenesis is similar to cervical cancer. The present study compared colorectal HPV infection in patients with cervix dysplasia and control group of patients without dysplasia using liquid cytology. The cytological investigation was performed using BD SurePath based on a system of automatized scanning of preparations BD FocalPoint. Identification of high oncogenic risk HPV genotypes (16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59 and 68) was made using a hybrid capture method (HPV digene-test hybrid capture II). Using cytological investigation of colon biopsy, we identified intraepithelial damages of colon most probably associated with HPV infection in 24% of high-risk patients. However, there were no similar changes in the control group. Our results show that HPV infection of cervix is a risk factor for colon intraepithelial HPV-associated damages. These patients are at a higher risk for colorectal cancer development and they must undergo a regular medical examination.

alyautdin@mail.ru

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