IMPORTANCE OF PAP SMEAR IN STD CLINIC
PIONEER STUDY FROM INDIA
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ABSTRACT

OBJECTIVE: The objective of this study was to analyse the associations between sexually transmitted disease (STD) diagnosis/clinical syndromes and abnormal PAP smears.

MATERIAL & METHODS: A study of cervical cytology was carried out on 300 new patients at STD clinic at Rajindra Hospital, Patiala. Diagnosis was made on the basis of history and clinical examination. Serological test for syphilis (STS) and PAP smear, fasting blood sugar (FBS) and urine complete examination were done in all the cases. Human immunodeficiency virus (HIV) testing could be done in 112 cases only. Smears for candida, trichomonas and gonorrhea were taken in all vulvovaginitis patients. Results were recorded in a STD case file.

RESULTS: Patients with various genital infections visiting the outpatients in decreasing order of frequency were vulvovaginitis 151/300 (50.3 per cent); molluscum contagiosum 60/300 (20 per cent); herpes simplex 41/300 (13.7 per cent); syphilis 33/300 (11 per cent); genital warts 12/300 (4 per cent) and chancroid 3/300 (1 per cent) respectively. Previous PAP smear was not taken in any case. PAP smear showed normal cytology in 131/300 (43.7 per cent); inflammatory cytology 159/300 (53 per cent) and dysplastic (cervical intraepithelial neoplasia (CIN-1 to CIN-3)) changes in 11/300 (3.6 per cent) cases.

CONCLUSION: Higher proportions of abnormal than normal smears were also found in women with chancroid herpes simplex, genital warts and HIV infected individuals. These findings suggest a serious need for cervical cytology screening in STD clinics.

KEYWORDS
PAP smear (Papanicolaou smear), STD (Sexually Transmitted Disease), Clinic.

INTRODUCTION
Women attending STD clinics are at high risk for cervical cancer, most STD programmes do not include Papanicolaou (PAP) smears in their routine screening procedures. The presence of cytological abnormalities considered to be precursors to cervical cancer among sexually active young women demonstrates the importance of PAP's smear testing of STD clinic populations. The objective of this study was to analyse the associations between STD diagnosis/clinical syndromes and abnormal PAP's smears.

MATERIAL & METHOD
A study of cervical cytology was carried out on 300 patients at the sexually transmitted disease (STD) clinic at Rajindra Hospital, Patiala. The aim was to discover the incidence of abnormal smears in order to gauge the worth of cervical cytology as a routine clinic procedure. Information was also gathered on each patient's age, sexual history, method of contraception used, previous smears, and genital infection clinical, diagnosis was made on the basis of history and clinical examination. Serological test for syphilis (STS) and PAP smear, fasting blood sugar (FBS) and urine complete examination were done in all the cases. Human immunodeficiency

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virus (HIV) testing could be done in 112 cases only. Smears for candida, trichomonas and gonorrhea were taken in all vaginal discharge syndrome. Results were recorded in a STD case file.

RESULTS
Patients with various genital infections visiting the outpatients in decreasing order of frequency were vulvovaginitis 151/300 (50.3 per cent); molluscum contagiosum 60/300 (20 per cent); herpes simplex 41/300 (13.7 per cent); syphilis 33/300 (11 per cent); genital warts 12/300 (4 per cent) and chancreoid 3/300 (1 per cent) respectively. Maximum patients in vulvovaginitis, chancreoid, herpes simplex, genital warts, molluscum contagiosum and syphilis had onset in 21-30 years age group. History of extramarital contact was positive in 24 per cent of all the patients. Maximum patients in all the cases did not use any contraception. Maximum patients in all the genital infections were in the 3-5 group. Maximum patients in all the cases were housewives 74 per cent genital infections showed chronicity (3 - 6 months) whereas 26 per cent showed all patients of genital infection were chronic patients (3 month - 1 year). Only vulvovaginitis herpes simplex, genital warts and molluscum contagiosum showed recurrence. History in spouse was positive in 33 per cent cases. VDRL positivity was observed in 24.6 per cent cases. HIV testing was done in 115 cases out of which 20/115 (17.4 per cent) were positive. Smears for candida, trichomonas and gonorrhea were found to be positive in 3 cases in gonorrhea, 6 cases in chlamydia and 10 cases in case of trichomonas respectively. Previous PAP smear was not taken in any case. PAP smear showed normal cytology in 131/300 (43.7 per cent); inflammatory cytology 159/300 (53 per cent) and dysplastic (cervical intraepithelial neoplasia (CIN-1 to CIN-3)) changes in 11/300 (3.6 per cent) cases.

DISCUSSION
Women who had five or more pregnancies, compared with those who fewer pregnancies and women with chronic vulvovaginitis compared with no genital infection, had significantly higher incidences of abnormal than normal smears. Higher proportions of abnormal than normal smears were also found in women with chancreoid, herpes simplex, genital wart and HIV infected individuals. Similar interferences were drawn out from our study. These findings suggest a serious need for cervical cytology screening in STD clinics throughout the nation.

REFERENCES