

UNIT 5: NEOPLASIA

Educational Topic 52: Cervical Disease and Neoplasia

Rationale: Early recognition and proper evaluation of pre-invasive cervical disease and cancer can reduce morbidity and mortality.

Intended Learning Outcomes:

A student should be able to:

- Describe the pathogenesis of cervical cancer
- Identify the risk factors for cervical neoplasia and cancer
- List the guidelines for cervical cancer screening
- Describe the initial management of a patient with an abnormal Pap smear
- Describe the symptoms and physical findings of a patient with cervical cancer

TEACHING CASE

CASE: A generally healthy 26 year-old G1P0 woman with a last menstrual period approximately 16 weeks ago is referred for the management of an abnormal Pap test showing High Grade Squamous Intraepithelial Lesion (HGSIL). This Pap test was obtained 10 weeks ago when she underwent an elective termination of an unplanned pregnancy at approximately six weeks of gestation. She has not had any prior Pap tests. She has never been tested for sexually transmitted infections. The combination of the undesired pregnancy and the abnormal Pap test, however, has been a “wake-up call” and today she requests testing for “everything.” She received Depo-Provera at the time of the termination, and has not had a period yet. She reports a history of normal, regular menses and has used oral contraceptives inconsistently in the past. She began having sexual intercourse at the age of 17, and has had 4 lifetime partners. She is on no other medications and has no known drug allergies. Her family history is notable for a grandmother with breast cancer. She smokes ½ pack of cigarettes per day, does clerical work for a moving company, and is engaged to be married in 6 months.

COMPETENCY-BASED DISCUSSION & KEY TEACHING POINTS:

Competencies addressed:

- Patient Care
- Medical Knowledge
- Systems-based practice

1. According to recent guidelines published by the American College of Obstetricians and Gynecologists (2012), how many Pap tests should this patient have had given her age and clinical history?
2. Which historical risk factors does this patient have for having cervical dysplasia or for having cervical dysplasia progress to cervical cancer?
3. What are other possible risk factors for development of cervical dysplasia?
4. What is meant by the term "high-grade squamous intraepithelial lesion"?
5. What would you recommend as the next step in the evaluation of this patient's abnormal Pap test?
6. Would typing for the human papilloma virus (HPV) aid in the management of this patient?

REFERENCES

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