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MODERN APPROACHES TO THE TREATMENT AND PREVENTION OF CERVICAL CANCER IN PATIENTS WITH PAPILLOMAVIRUS DISEASE

Resume: The article presents the epidemiological features of different types of human papillomavirus (HPV) and their relationship with cervical cancer. The most important factors determining the progression of squamous intraepithelial neoplasia are presented. The article analyzes the literature data on primary and secondary prevention of cervical cancer. The activities necessary for the widespread use of vaccine prophylaxis and improving the effectiveness of screening are highlighted.

Keywords: cervical cancer, comparative treatment and diagnosis, gynecological and oncological gynecological diseases.

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СОВРЕМЕННЫЕ ПОДХОДЫ К ЛЕЧЕНИЮ И ПРОФИЛАКТИКЕ РАКА ШЕЙКИ МАТКИ ПРИ НАБЛЮДЕНИИ С ПАПИЛЛОМАВИРУСНОЙ БОЛЕЗНЬЮ

Аннотация: В представленном обзоре рассмотрены эпидемиологические особенности разных типов вируса папилломы человека (ВПЧ) и их взаимосвязь с раком шейки матки. Представлены наиболее важные факторы, определяющие прогрессирование плоскоклеточных интраэпителиальных неоплазий. В статье проанализированы данные литературы по первичной и вторичной профилактике рака шейки матки.

Освещены мероприятия необходимые для широкого применения вакцинопрофилактики и повышение эффективности скрининга.

Ключевые слова: рак шейки матки, сравнительное лечение и диагностика, гинекологические и онкологические гинекологические заболевания.

Relevance. In the world, 12,000 cases of breast cancer are registered annually (2nd place after uterine body cancer), 40% of them are diagnosed with the disease in stages III — IV. In a number of territories, a high incidence of breast cancer is constantly observed[4].

Human papillomavirus (HPV) is the most common viral infection of the genital tract. Most sexually active women and men acquire the infection at some point in their lives, and some may be re-infected[8].

The peak period of infection for both women and men begins shortly after they become sexually active. HPV is transmitted sexually, but penetrative sex is not required for transmission of the virus. Bodily genital contact is a well-established route of transmission of infection[3].

Many types of HPV do not cause problems. HPV infections usually go away by themselves, without any intervention, a few months after infection, and about 90% go away within 2 years. A small proportion of infections caused by certain types of HPV can continue and lead to the development of cervical cancer [2,6].

To date, cervical cancer is the most common HPV-related disease. Almost all cases of cervical cancer can be caused by HPV infections.

Infection caused by certain types of HPV can also lead to the development of cancer of the anus, vulva, vagina, penis and oropharynx, which can be prevented by using the same primary prevention strategies as for cervical cancer.

HPV types that do not cause cancer (especially types 6 and 11) can lead to the development of genital warts and respiratory papillomatosis (a disease in which tumors grow in the airways leading from the nose and mouth to the lungs). And although these conditions very rarely lead to death, they can often lead to diseases.

Genital warts are widespread, extremely infectious and negatively affect sexual life.

The occurrence of breast cancer can be prevented by detecting and treating precancerous diseases. There are primary and secondary prevention of breast cancer. Primary prevention consists in the prevention of sexually transmitted diseases, abstinence from early sexual activity, the use of mechanical barrier means for the purpose of contraception, in the full restoration of the integrity of the cervix in case of its injuries during abortion or childbirth, smoking cessation[5].

Secondary prevention of the disease consists in identifying and eliminating precancerous changes through systematic examination of women and their adequate treatment.

It follows from the above that the issues of prevention of cancer and diagnosis of the initial stages of carcinogenesis are still the most important medical and social problem.

In the Republic of North Ossetia-Alania (RSO-A), the problem of cervical cancer has not been studied by anyone. The standardized incidence rate of breast cancer is 13.04 higher than the national average of 10.8 per 100 thousand women, and the neglect of breast cancer is also higher than 12.9 and 11.7, respectively. In addition, the highest mortality rate in the Southern Federal District in the Republic of Alania is 7.8 per 100 thousand female population[3].

These facts convincingly testify to the relevance and necessity of improving the methods of screening for breast cancer in the conditions of RSO-Alania, the search for new simple, economically affordable and at the same time effective methods of prevention and early diagnosis of breast cancer, in order to ensure timely treatment of this serious and dangerous disease.

The purpose of the study. Improving the effectiveness of organizational, diagnostic and therapeutic measures aimed at early detection of background, precancerous diseases and cervical cancer.

Materials and methods of research. To accomplish this task, we selected 65 women with cervical cancer who underwent special treatment courses.

The results of the study. The incidence of cervical cancer in RSO-Alania has increased 1.3 times in 15 years (from 10.87 in 1989 to 14.5 in 2003). The incidence rate among rural residents (14.54) is slightly lower than the incidence of cervical cancer among urban residents (16.87). Mortality from cervical cancer during this period decreased by 1.2 times (12.3 and 14.9, respectively).

The formation of groups at increased risk of cervical cancer with a high and medium degree of its probability is carried out on the basis of the subjective factors of probable detection established by us (pulling pains in the lower abdomen, mucopurulent discharge from the genital tract, spotting) and objective factors of probable detection (degree of anemia, vaginal flora, changes in the mucous membrane of the cervix).

We have established risk factors for the development of cervical cancer: age over 50 years, overweight, tall, living in the city, early onset of sexual activity, sexually transmitted diseases in the anamnesis, cervical pathology in the anamnesis, cervical trauma during childbirth, a large number of abortions.

Improved with the help of a tool developed by us, the method of taking material for cytological examination during colposcopic examination allowed to increase the detection of cervical cancer by 1.5 times.

The system of organizational forms of screening developed by us made it possible to increase the active detection of early forms of cancer and precancerous diseases of the cervix by 2.3 times and 2.1 times, respectively.

Conclusion. The developed method of forming groups of patients with a high probability of developing and detecting breast cancer contributes to improving early diagnosis, adequate treatment and prevention of cervical cancer in the conditions of the polyclinic service of the general medical network RSO-Alania.

Simplicity, accessibility and minimization of costs in the implementation of the developed system of organizational forms of screening allows specialists of outpatient polyclinic services to increase the detection of background and precancerous diseases of the cervix by 1.4 times.

The development of a tool for taking material for cytological examination in patients with background diseases of the cervix made it possible to increase the detection of cervical cancer by 1.5 times.

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