

**EVALUATION OF THE RECENTLY SET-UP  
COLPOSCOPY SERVICE IN MALTA IN  
RELATION TO CERVICAL CANCER**

Louise Farrugia

## **Introduction**

Colposcopy is a complementary technique to exfoliative cytology in the detection of cervical disease. The colposcope is a stereoscopic binocular magnifying instrument that provides a three-dimensional image of the tissue surface of the vulva, vagina and cervix.

Colposcopy service in Malta was commenced in May 1960. It was then believed that colposcopy is not cost effective for the Maltese population. But this is short sighted thinking for a number of reasons:

1. our service does not only cater for the Maltese population,
2. there is an increase in diseases which are sexually transmissible,
3. Cervical Intraepithelial Neoplasia (CIN) is also increasing.

If colposcopy is not available seriously disturbed smear tests are required for examination by cone biopsy which requires for examination by cone biopsy which requires the amputation of part of the cervix. This may cause problems later on in life, if the woman is of child bearing age and will later be pregnant.

Also colposcopy is not simply limited to the study of precancerous or cancerous conditions of the cervix but it also has a major role to play in the management of benign conditions not only of the cervix but also of the vulva and vagina.

## **Method**

Four surveys were carried out at St Luke's Hospital:

1. Survey 1 was carried out to find the age distribution of women being colposcoped. The information was taken from the files of 100 patients who were studied by cytology, colposcopy and colposcopically directed biopsies.
2. Survey 2 was carried out to evaluate the use of the colposcopy service in Malta. At the colposcopic clinic the following information was gathered:
  - a. names of patients who were colposcoped;
  - b. date when the patients were colposcoped.

3. Survey 3 was carried out to find out the incidence of Human Papillomavirus and cervical intraepithelial neoplasia in a general colposcopic population of 100 patients. This survey was carried out at the pathology laboratory.
4. The last survey was carried out at the Medical Records where data regarding the mortality due to cervical cancer was obtained.

## Results

### Survey 1

**Table 1:** Percentage of people being colposcoped Vs Age distribution

Age (Years)	Percentage (%)
18-23	68
23-28	12
28-33	7
33-38	6
38-43	5
43-48	2

### Survey 2

The number of patients being colposcoped was relatively low till August 1990 (about 3 patients every month) BUT then the number of patients suddenly increased (21 patients in November, 1990).

### Survey 3

The following colposcopic results were obtained -

25% had Human Papilloma Viral Infection  
 28% had Cervical Intraepithelial Neoplasia of which -

14 patients had CIN grade 3  
 7 patients had CIN grade 2

This shows that this Pathology was not detected under a generalised PAP II which, in current gynaecological practice, is not given so much importance.

#### Survey 4

Table 2: Mortality due to Cervical Cancer

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Year	Mortality Due to Cervical Cancer
1986	5
1987	5
1988	5
1989	4
1990	6

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#### Discussion

1. Colposcopy has a major role to play in the detection of stages which may precede to cancer of the cervix. In some cases it detected high risk cases which were actually missed by the smear test.
2. The high percentage (20%) of infectivity of Human Papillomavirus in Maltese females need to be given its due importance both regarding its own direct morbidity and also as a helper virus in its oncogenic potential in Cancer of the Cervix.
3. As was observed in Survey 1 there is a high percentage (68%) of patients being colposcoped at a young age. This is due to patients being more promiscuous at young age.
4. Points 1, 2 and 3 lead us to the inevitable conclusion that not only is the recent set up colposcopy service necessary but it must also be complemented with necessary equipment. This avoids the very expensive and problematic Laser systems which are not cost effective for local use.

## Conclusion

The Pharmacist has a very important role to play in disease prevention, health promotion and treatment of cervical diseases. This can be done by pointing out the causes (which are all related to sexual behaviour) and the symptoms related to cervical disease.

Most of all it is very important for the pharmacist to stress on the importance of regular cervical smears among those women who are sexually active and point out the benefits of the use of the colposcopy service.

The use of leaflets help in promoting education about cervical diseases.

## References

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