

УДК: 618.146-006-007.17

Yuldasheva A.Z.

*Department of Obstetrics and Gynecology No. 2*

*Andijan State Medical Institute*

**NEW OPPORTUNITIES FOR EARLY DIAGNOSIS AND  
PREVENTION OF HPV-ASSOCIATED PRECANCEROUS CERVICAL  
DISEASES**

**Resume:** In this article, we will focus on the diagnosis, comparative diagnosis and treatment of cases of cervical cancer associated with HPV, which have become a widespread problem among women in recent years and have led to their death.

**Key words:** cervical cancer, comparative treatment and diagnosis, gynecological and oncological gynecological diseases.

*Юлдашева А.З.*

*Кафедра акушерства и гинекологии №2*

*Андижанский государственный медицинский институт*

**НОВЫЕ ВОЗМОЖНОСТИ РАННЕЙ ДИАГНОСТИКИ И  
ПРОФИЛАКТИКИ ВПЧ АССОЦИИРОВАННЫХ ПРЕДРЕКОВИХ  
ЗАБОЛЕВАНИЙ ШЕЙКИ МАТКИ**

**Резюме,:** В этой статье мы сосредоточимся на диагностике, сравнительной диагностике и лечении случаев рака шейки матки ассоциированные ВПЧ, которые стали широко распространенной проблемой среди женщин в последние годы и привели к их смерти.

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

**Relevance.** There are 12,000 cases of breast cancer registered annually in the world (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 resolve themselves, without any intervention, a few months after infection, and about 90% pass 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. 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 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.

## LIST OF LITERATURE:

1. Autandilov G.G., Glukhova Yu.K., Shabalova I.P. Ploidometric diagnostics of precancerous processes and cervical cancer by cytological preparations // Clinical laboratory diagnostics.- 2004.- No.11.- pp.45-47.

2. Dudik Yu.E., Mavrodi T.V. Age as a risk factor in the occurrence of female genital cancer in the Krasnodar Territory // Russian Oncol. journal,- 2002.- No. 1.- pp. 40-41.

3. Novik V.I., Vishnevsky A.S., Safronnikov N.R., Ivanchenko O.G. evaluation of the informative value of cervical smears when obtaining material by different methods // News of klin, cytology of Russia.-2000.- 4,- 3-4.- pp.86-87.

4. Polonskaya N.Yu., Yurasova I.V., Sokolskaya T.Yu. Advantages and effectiveness of standardization of cytological studies in gynecology.- Clinical laboratory diagnostics.- 2004.- No. 11.-pp.47-49.

5. Shabalova I.P. Cytological atlas. Criteria for diagnosing cervical diseases: A manual for doctors.- Tver, 2001. 35с.

6. Yakovleva I.A., Cherny A.P., Bontar E.R. Cervical epithelium in the process of malignancy.- Chisinau, 1981.193p.

7. Kagan A., Hussbaum H., Gilbert H. et al. A new staging system for irradiation injuries following treatment for cancer of the cervix uteri // Gynecol. Oncol.- 1979.-№7.-P. 166-175.

8. Zarcone R., Tartaglia E., Cardone G., Voto R.I. Adenocarcinoma dell'endocer-vice // Minerva Ginecol.- 1994.- Vol. 46, N1-2.- P. 45-48.