Editorial

VIA: A Simple Way to Cancer Cervix Screening

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Cervical Cancer is the most important cause of malignant deaths in females of Bangladesh. Every year about 12,000 new cases appear¹. The scenario is alike that of other developing countries where effective screening program is not established². Among the total global cancer cervix (4, 68000) 80% occurs in developing countries^{1, 3}. Cancer Cervix is usually preceded by cytological changes, known as Cervical Intra Epithelial Neoplasia (CIN) & takes a long period of 15-20 years before the invasive cancer develops^{4, 5}. Thus cancer cervix can be prevented if cellular changes are detected & treated in early stage. In developed countries females are rescued only by adequate screening program. The disparity between developed & developing countries remains in the fact that cytological screening with pap's smear is costly, needs technical supports & good number of cytopathologists, so by no means it could be a screening method in low resource setting. Thus in the search of a easy, low cost & effective method-VIA, which means 'visual inspection of cervix with acetic acid' come up. Up to now good number of study has been carried out & now it is well recognized that VIA is the best way of cancer cervix screening in low resource settings^{2, 6, 7, 8}. Some study put one step forward claiming that – VIA has a positive predictive value comparable to the conventional Paps' smear. Jose et al showed in their study that VIA is useful for detection of precursor lesions & cervical cancer not only in low resource settings but also in well-equipped health centers & cancer centers³. The specificity of VIA

found from different study is $74\%^8$ to $99\%^2$. & sensitivity is $71\%^8$ to $95\%^2$.

During VIA test cervix is exposed by an adequate sized Cuscos self retaining speculum. As malignant change occur in transformation zone (TZ), so it is important to identify the squamo-columnar junction & TZ. Then 5% acetic acid soaked cotton ball is placed over the TZ for at least 1 minute. After removing the cotton, the area is looked for to have any aceto whitening with well defined margin. The aceto whitening means VIA positive, which needs further evaluation with colposcope. If there is no aceto white area it means VIA negative. Of course it needs proper training to find out significant aceto whitening because VIA positive does not necessarily indicate cancer.

In our country the risk factors of cancer cervix is prevailing, like – early marriage, early conception, multiparity, low socio economic condition, STI's etc. Many a cases without proper diagnosis total Abdominal Hysterectomy (TAH) has been done in very early age of a female only for the fair of cancer cervix. These sorts of management could never stands as favorable treatment; rather it creates a lot of hazards to the patient & her family. So it is the best way to have VIA at least 3 yearly in a woman of active sexual life.

We are very much fortunate that Government of Bangladesh in collaboration with UNFPA has taken the strategy for cancer cervix screening in a large scale. Initially pilot project was carried out in 16 selected districts and step wise this program

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will reach to every corner of Bangladesh. If it becomes successful, cancer cervix and death from it will sharply come down. Our gynecologists, pathologists, administrators, supporting agencies & concerned peoples should take the challenge to cut down the sufferings of our females and families from cancer cervix & to have a steady step towards millennium goal of good health.

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