

Colposcopy

When Why and How

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Geneva University Hospital

Dept Ob-Gyn



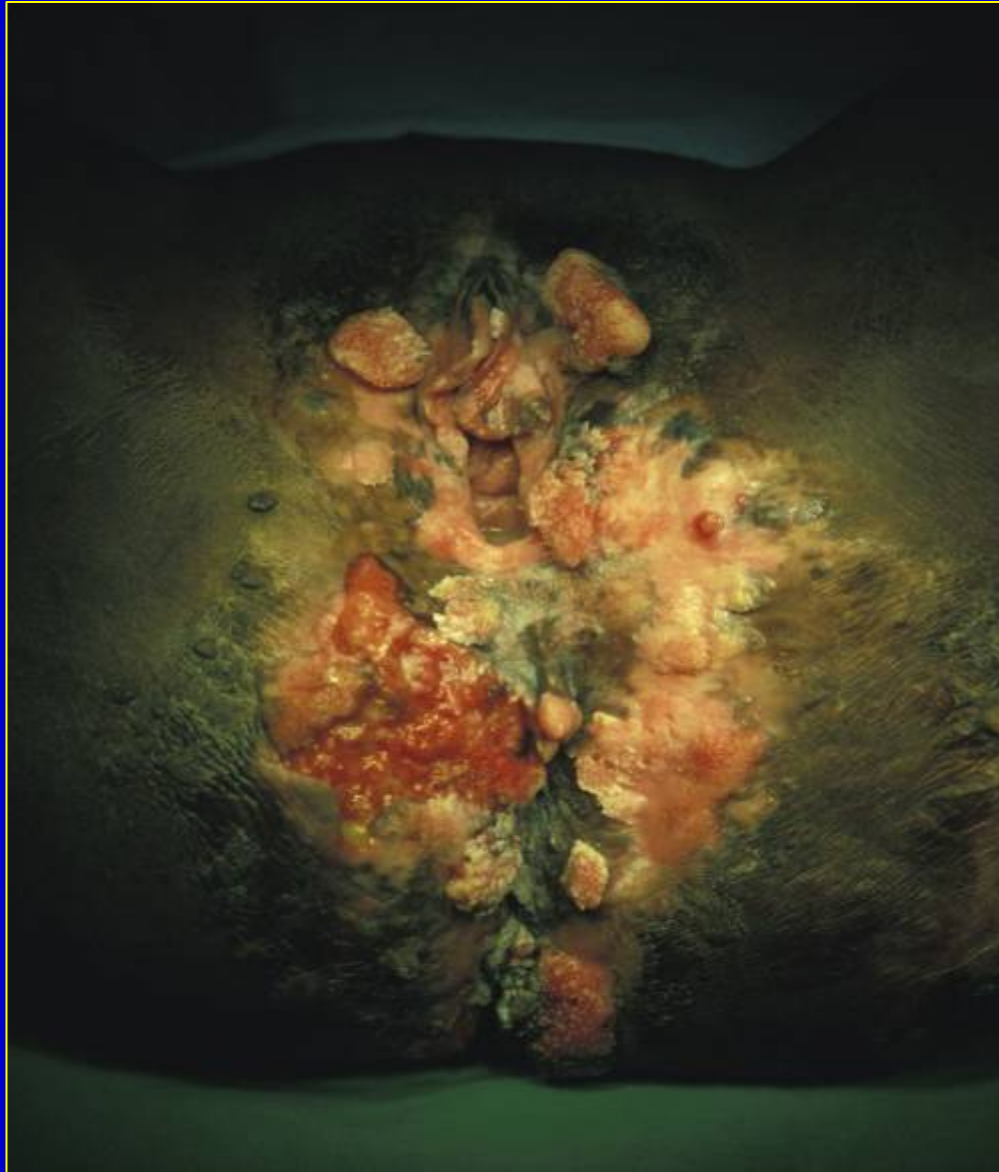
Invasive Ovarian Carcinoma stage IIIc



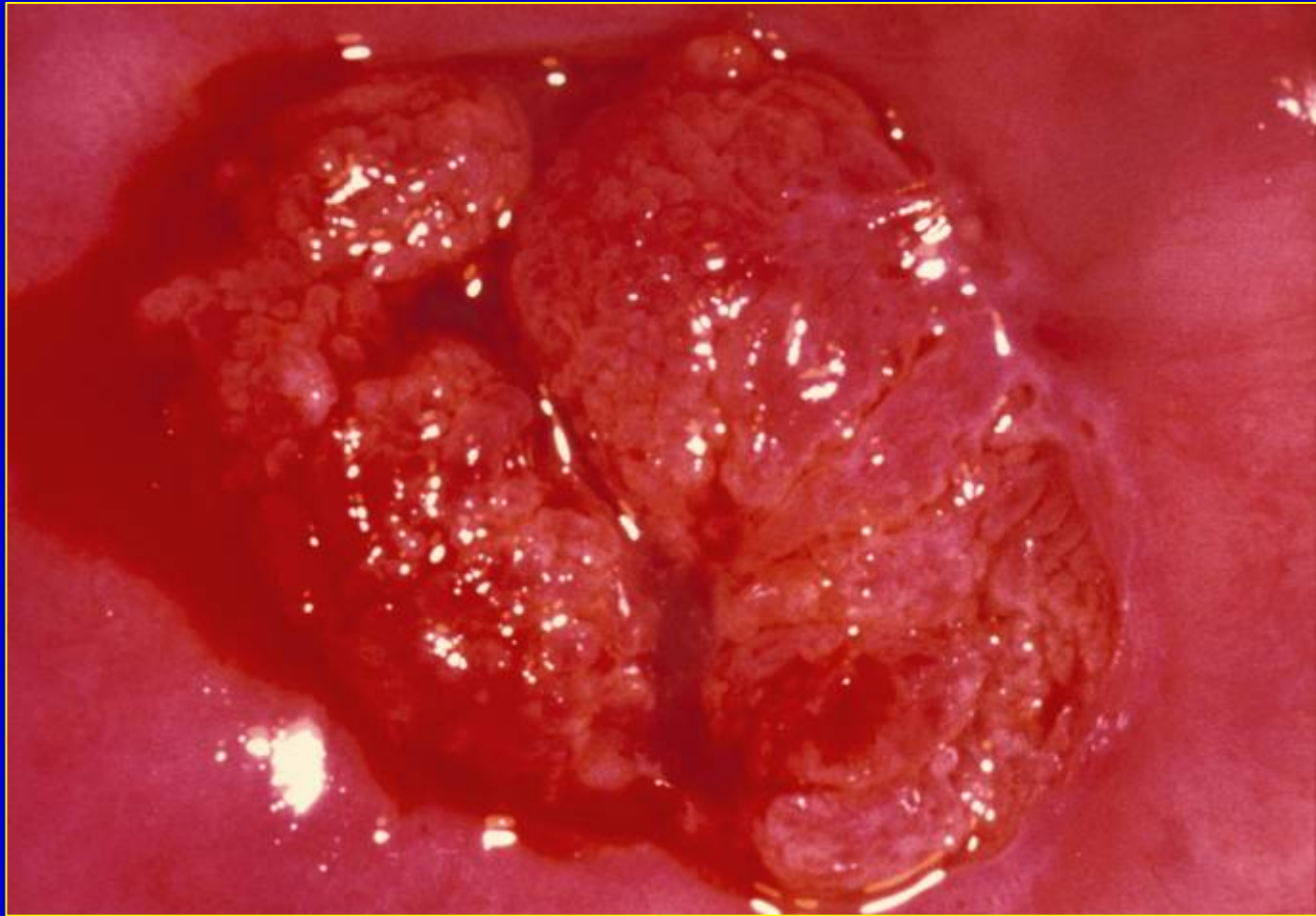
Invasive Ovarian Carcinoma stage IIIc



Invasive Vulvar Carcinoma stage III N1



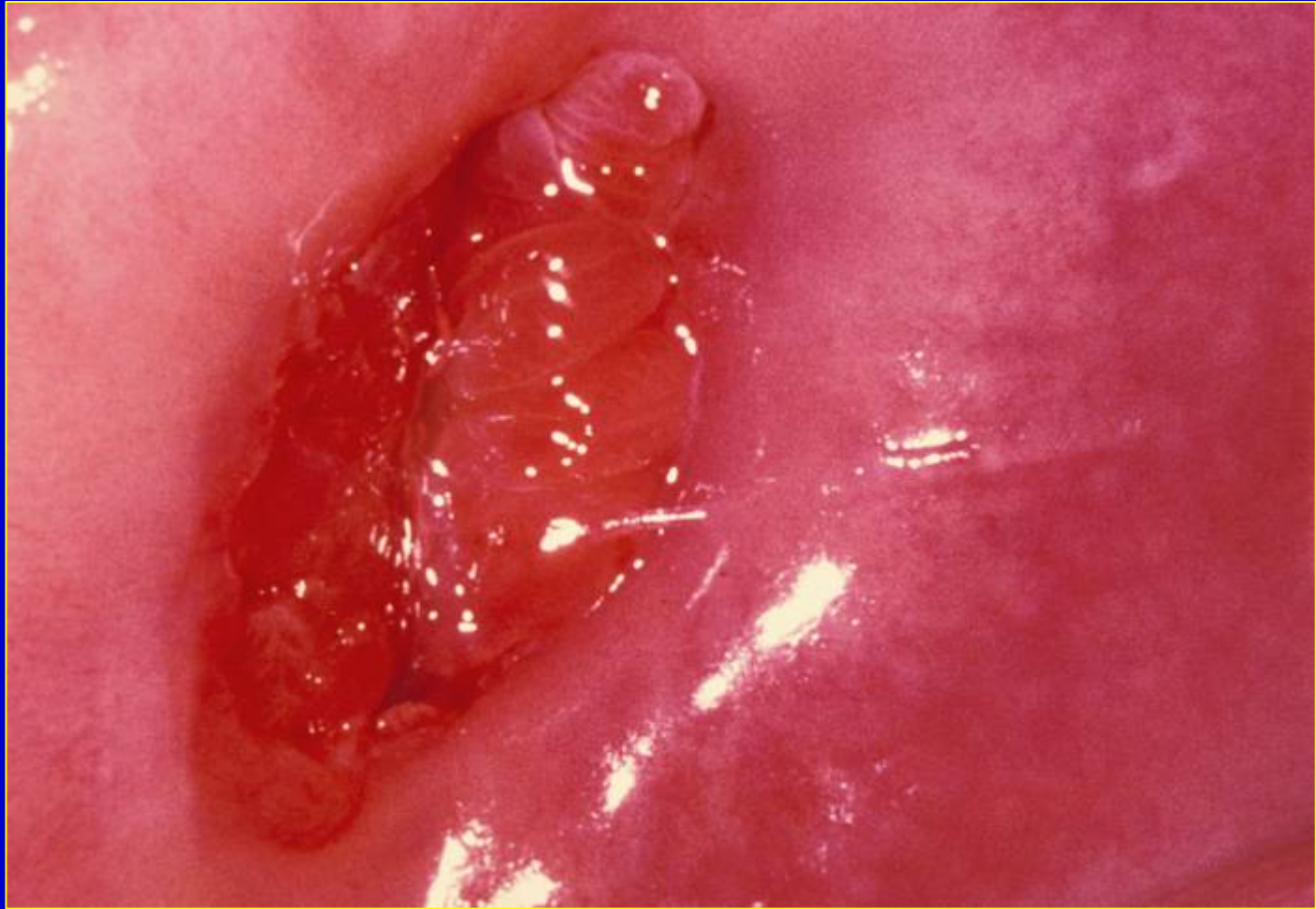
Invasive Vulvar Carcinoma stage IV



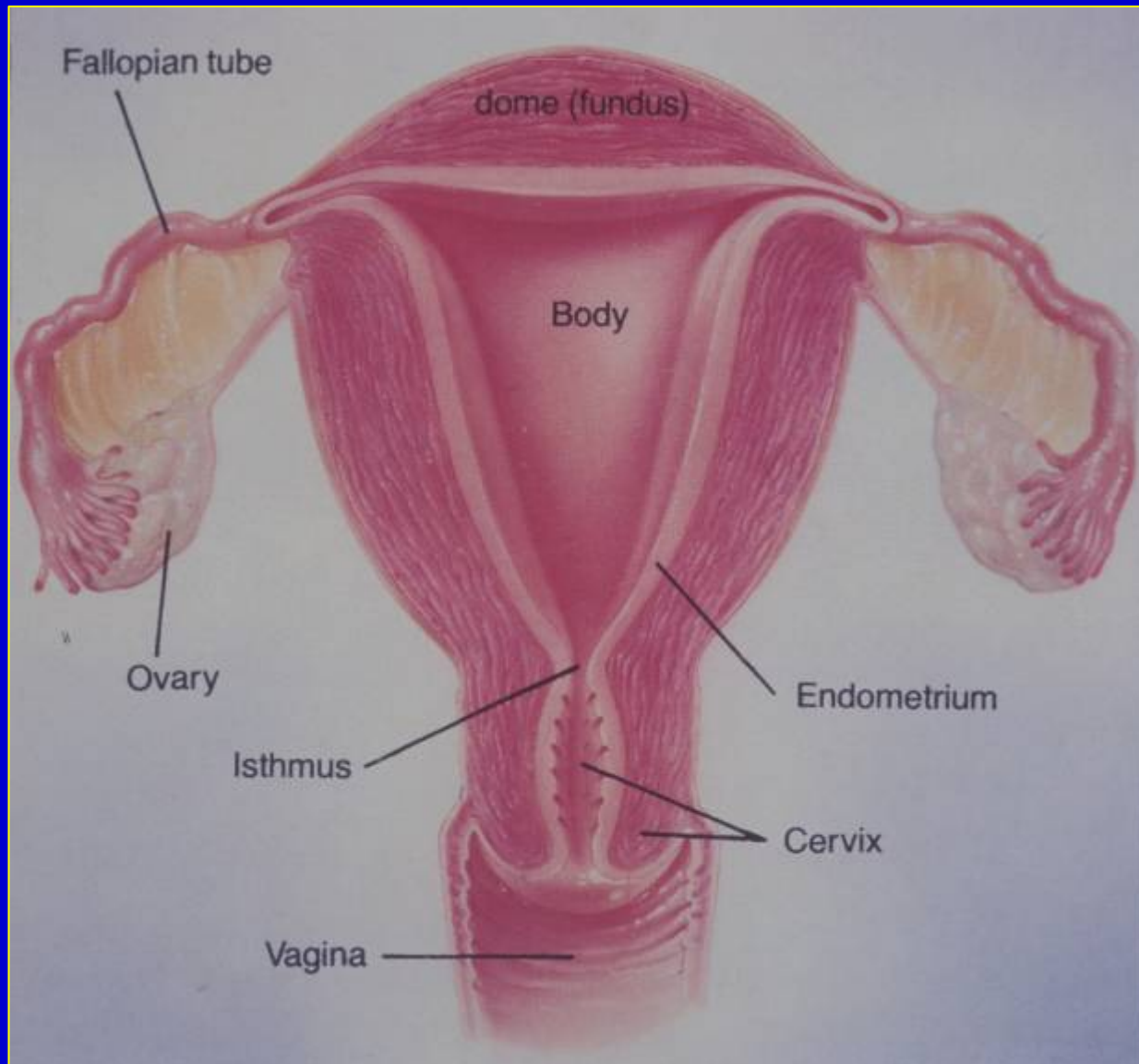
Invasive cervical Carcinoma stage IIb

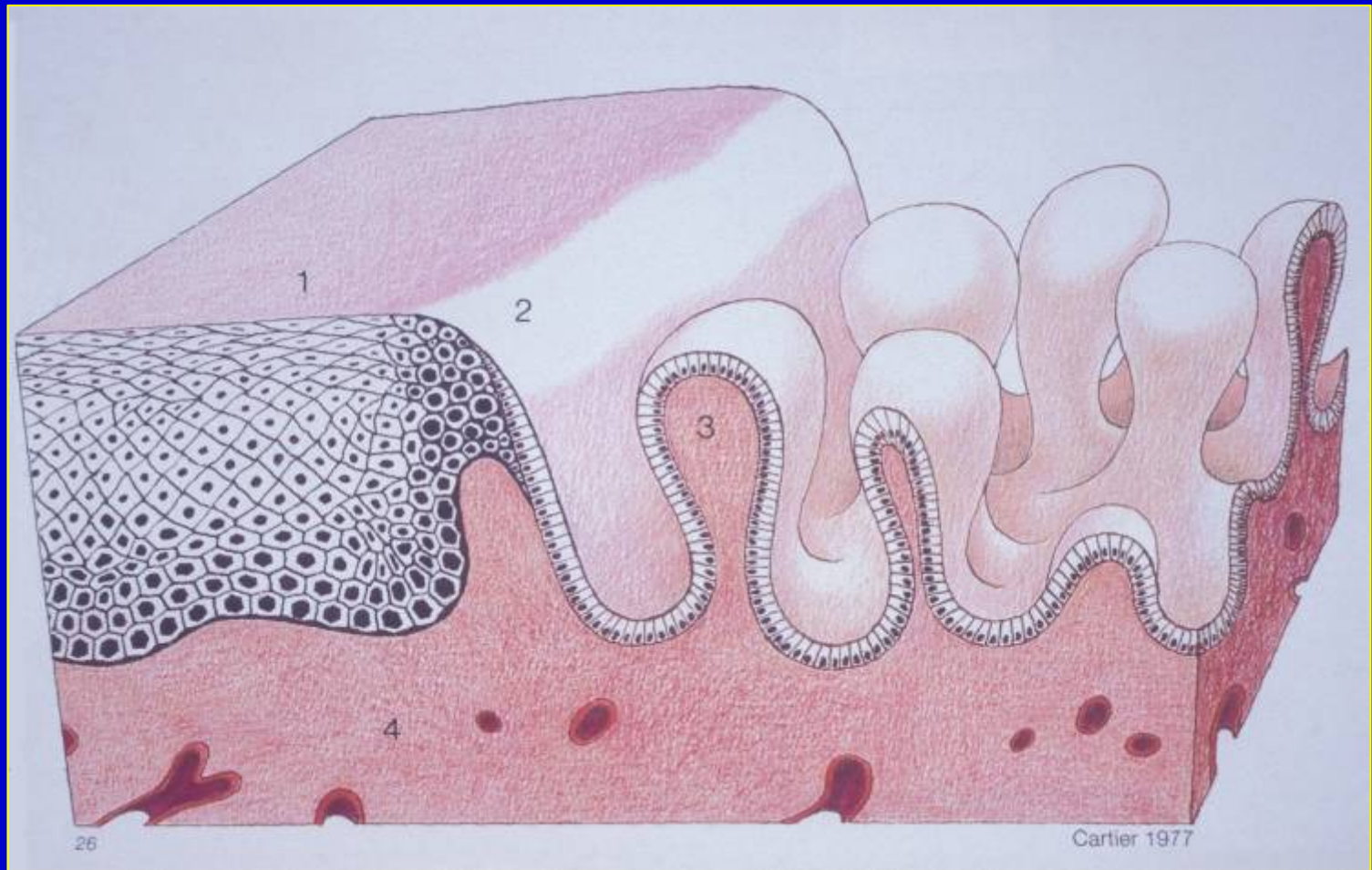


Normal cervix



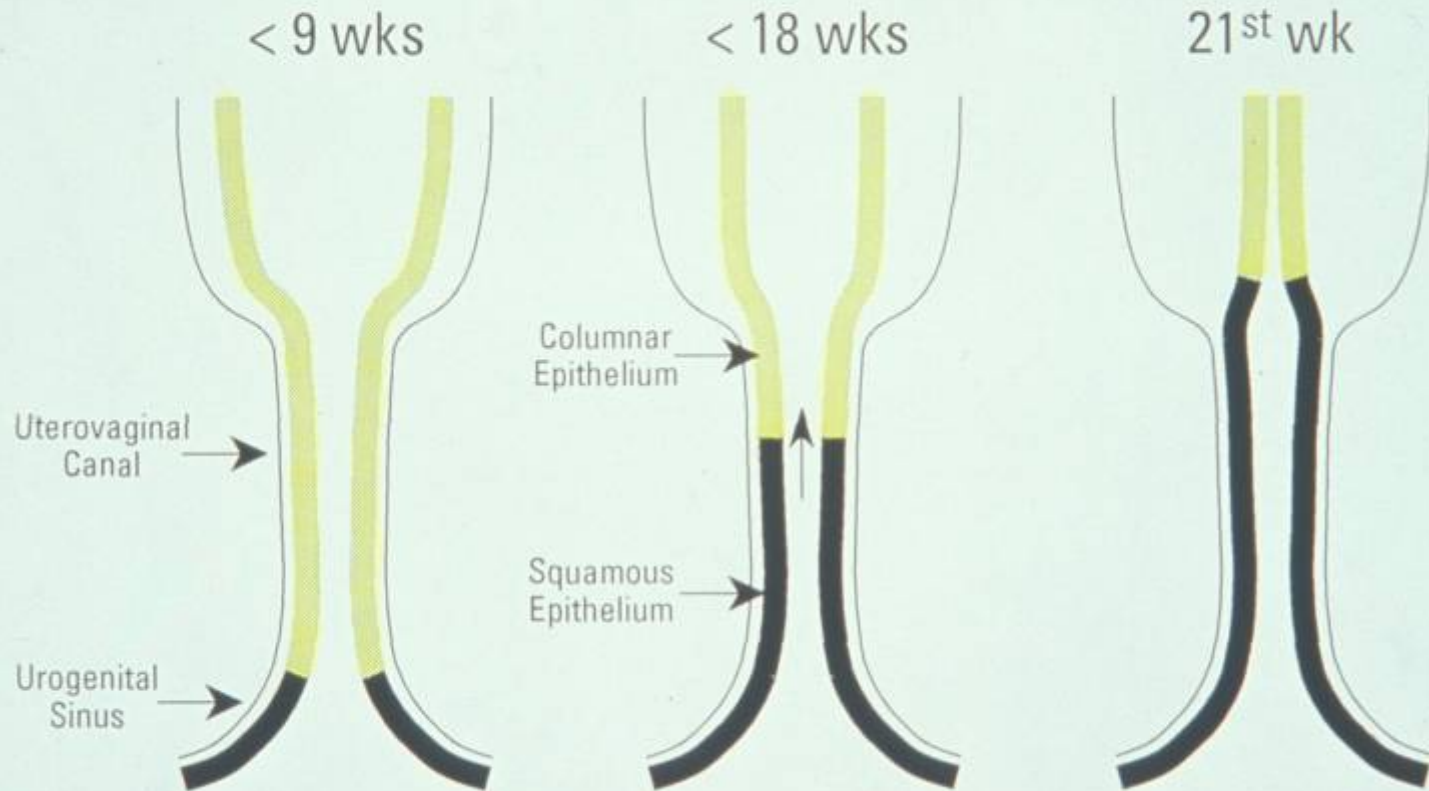
Normal cervix





Squamo-columnar junction

Embryology of the Transformation Zone (TZ)

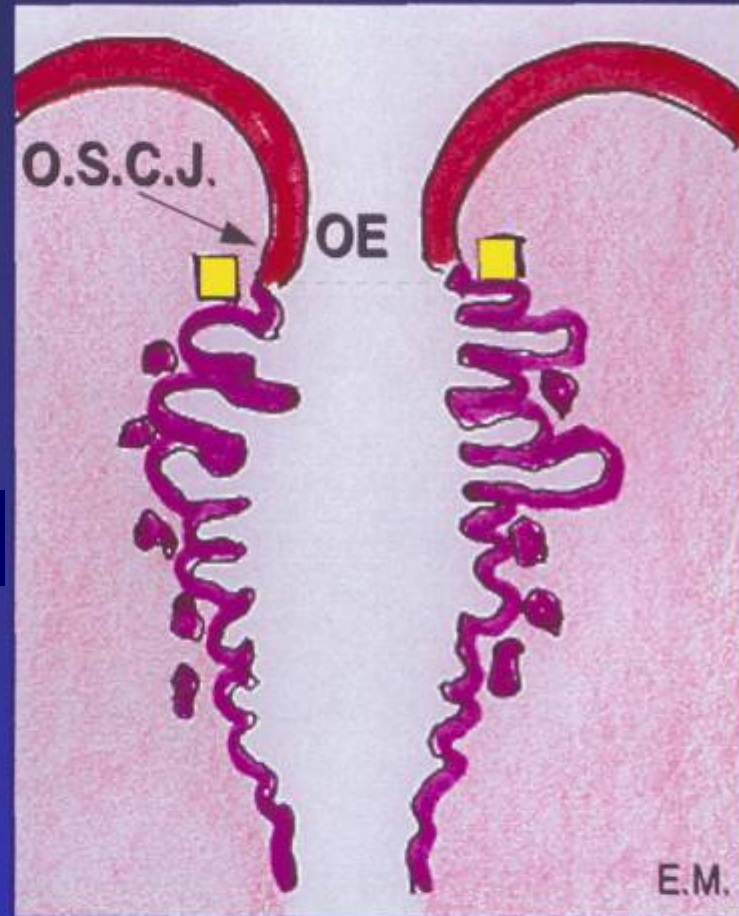


Cervical Epithelium

Squamous epithelium

Columnar epithelium

Last stromal gland

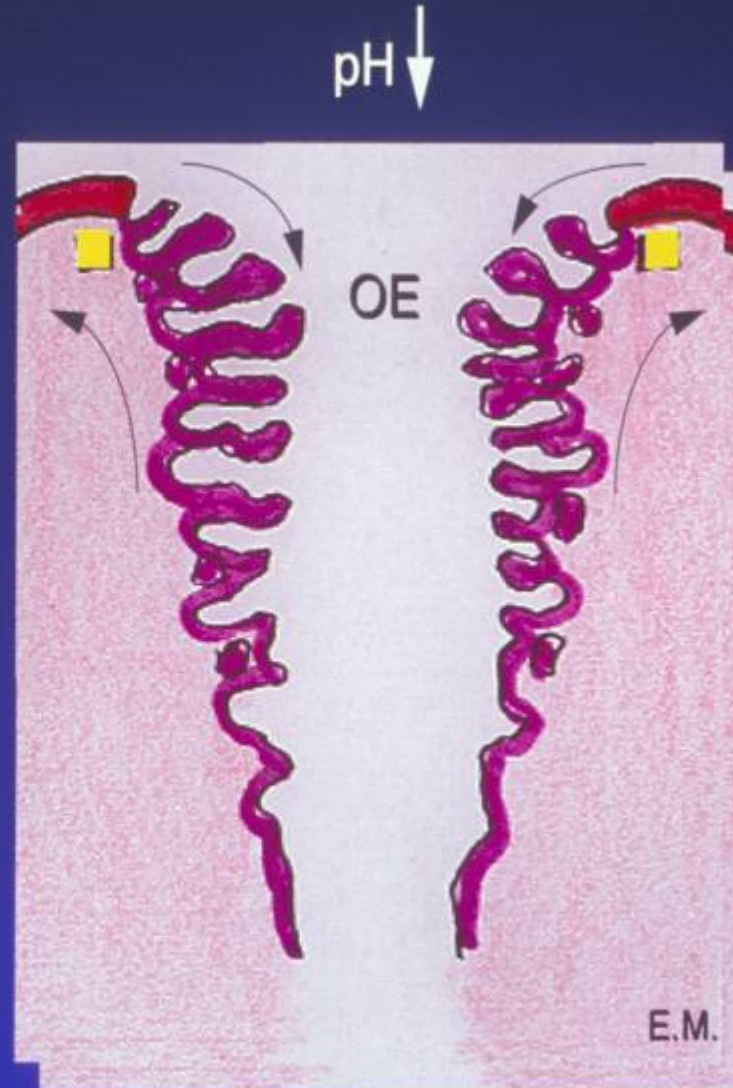


Situation at birth

Squamous Metaplasia

Estrogenous Exposure

- Intra-uterine
- Puberty
- Pregnancy



Ectropion

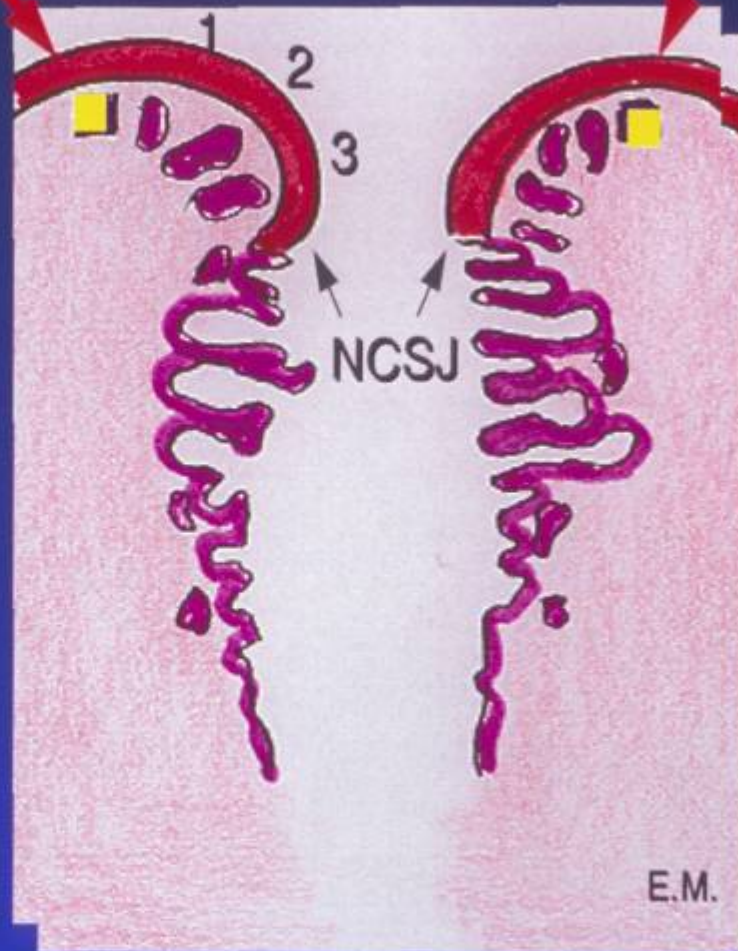
Squamous Metaplasia

Estrogenous Exposure

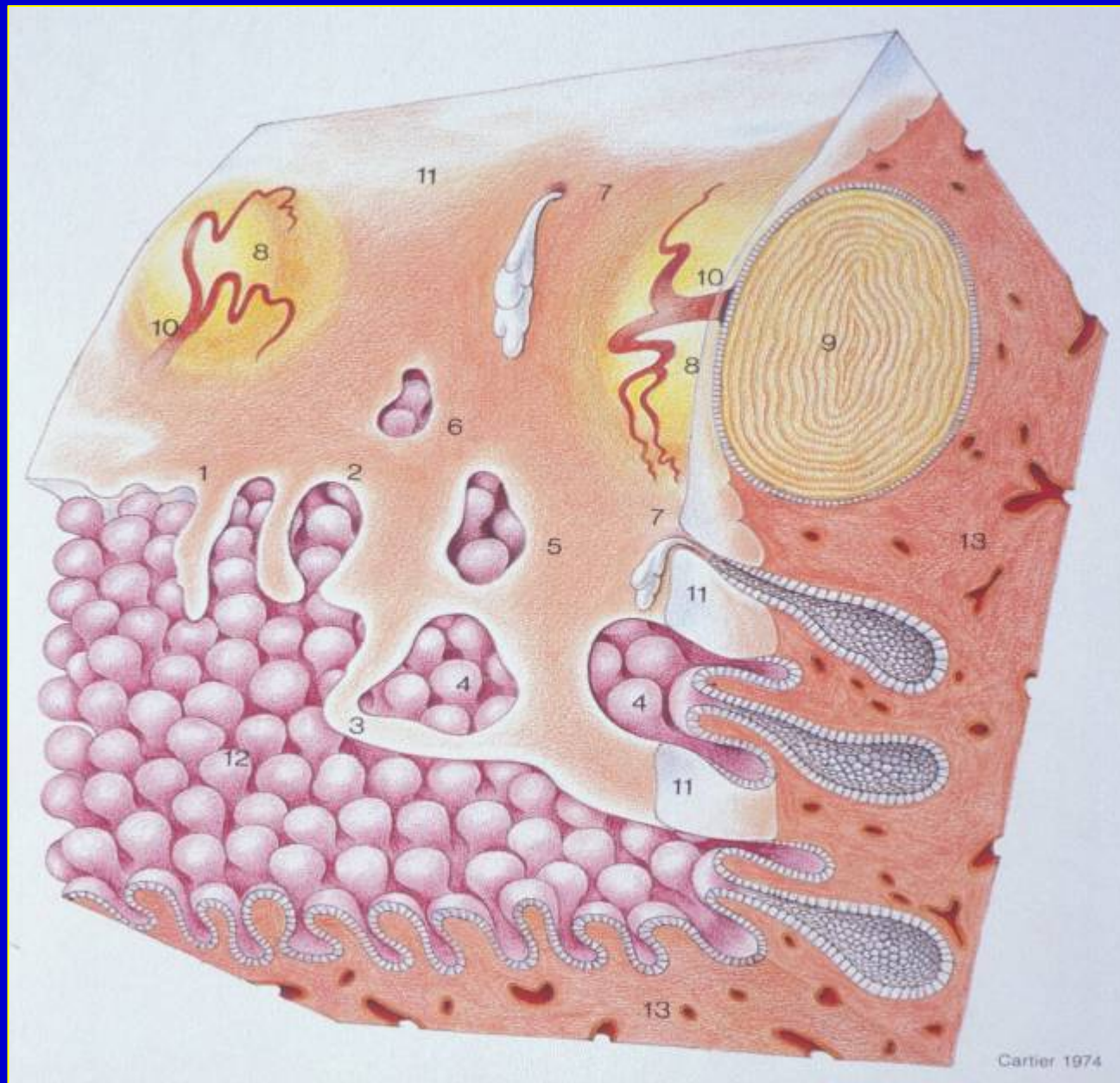
- Intra-uterine
- Puberty
- Pregnancy

O.S.C.J.

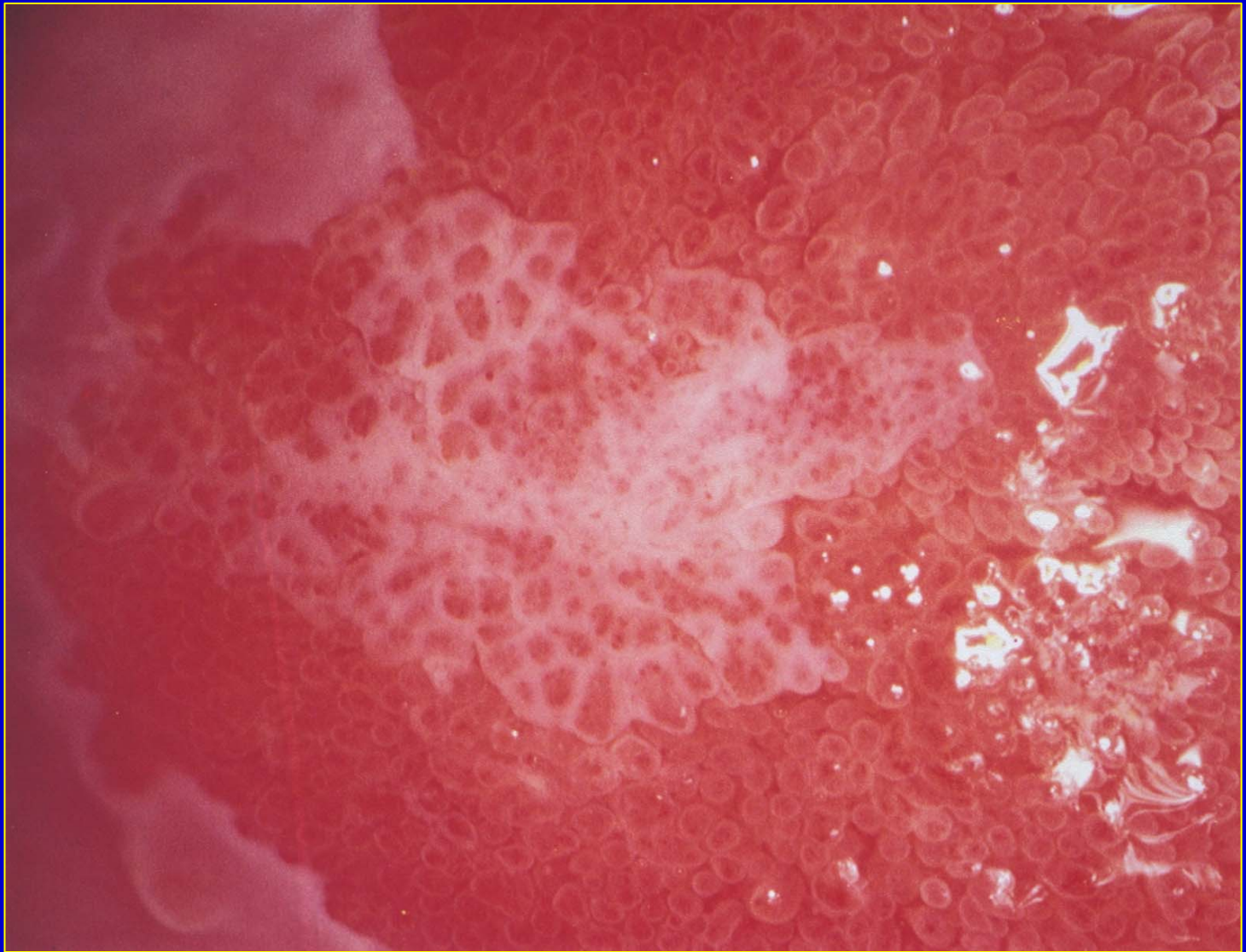
O.S.C.J.



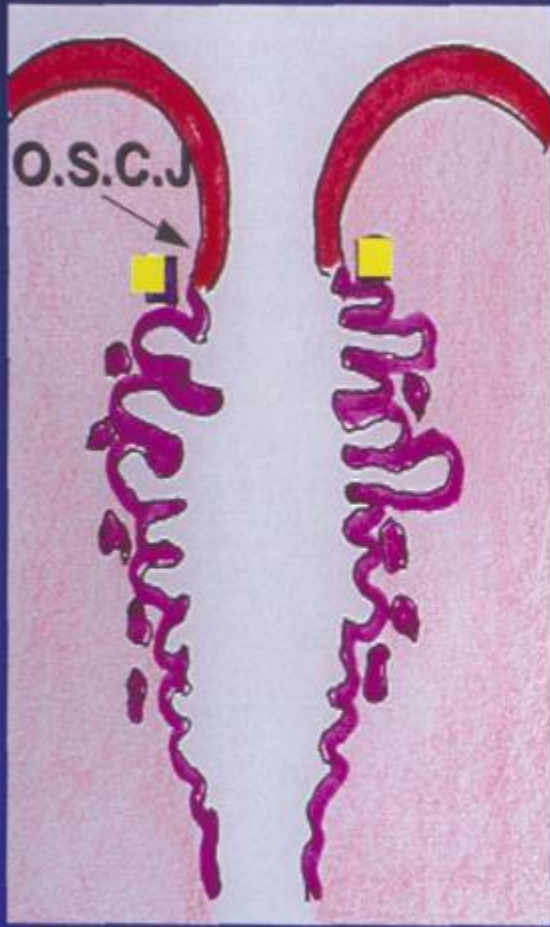
Metaplasia



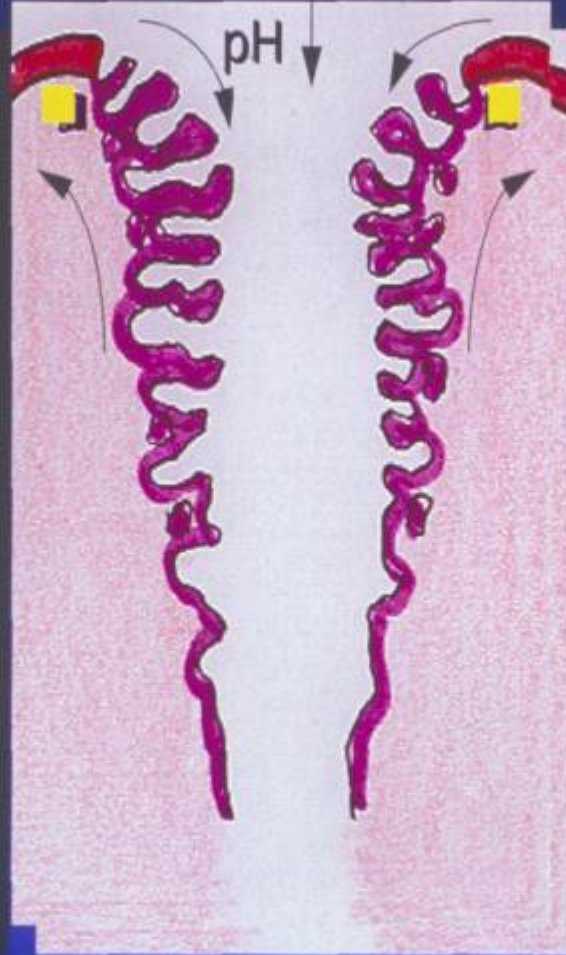




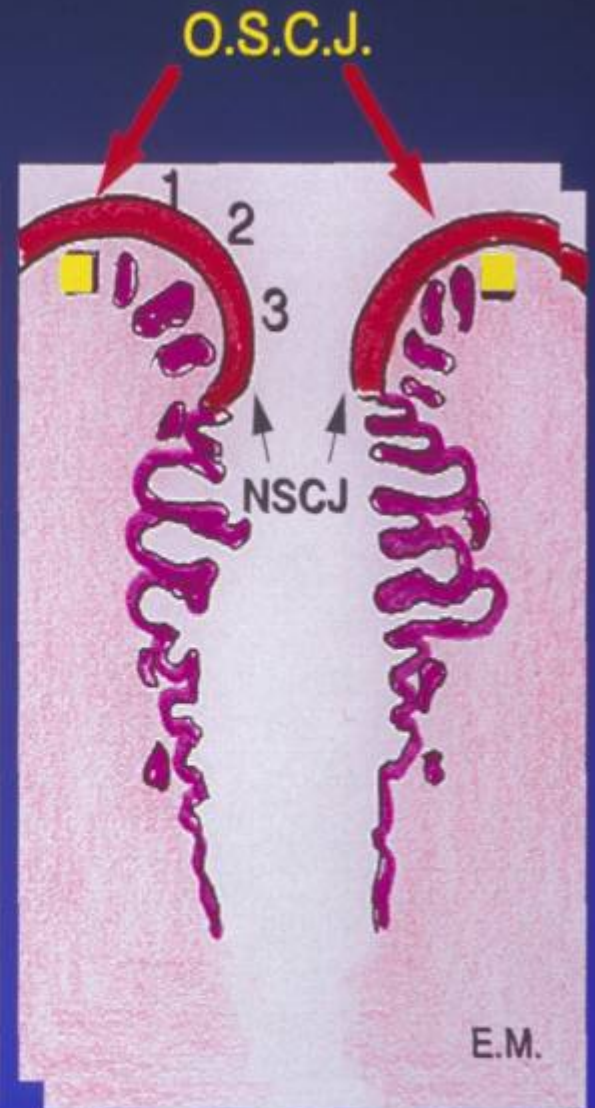
Squamous Metaplasia



Intra-uterine



Ectropion



Metaplasia

■ Last stromal gland

The Zur Hausen Model

Human Papillomavirus



Other initiating co-factors ?

Herpes simplex virus

Cigarette smoking

Sperm

Basic proteins

NORMAL
CELLS

CIN I

CIN II

CIN III

INVASIVE CARCINOMA



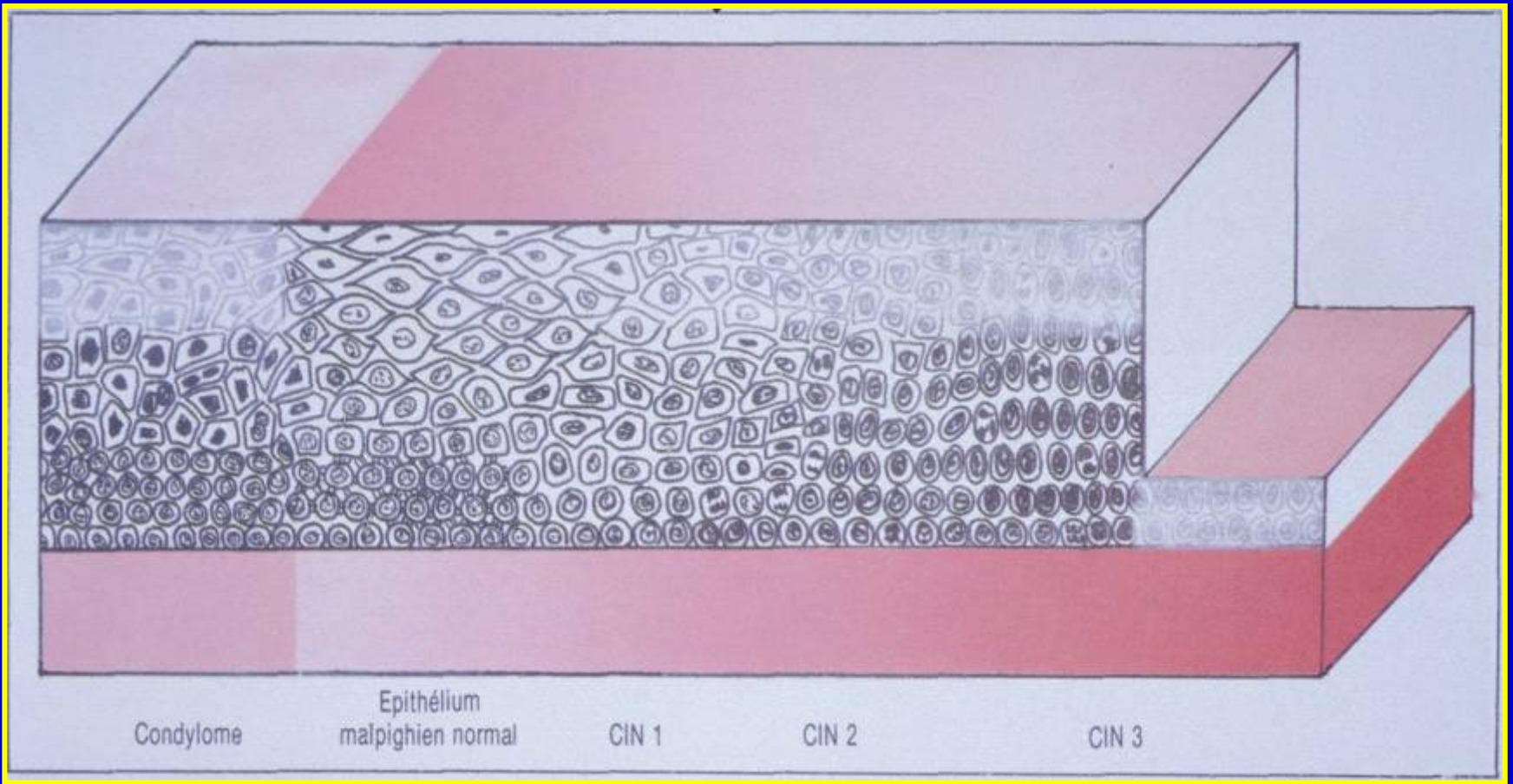
Immune system

The Lancet Dec 1984

Classifications Intra-epithelial cervical lesions

HINSELMANN (1927)	MORICARD (1952)	WHO (1952-1973)	RICHART (1968)	PRACTICAL COLPOSCOPY (1984)	RICHART (1989)	PRACTICAL COLPOSCOPY (1993)
Simple atypical epithelium	Dysplasia with regular nuclei	-	-	Dystrophic states	-	Dystrophic states
Highly atypical epithelium	Dysplasia with irregular nuclei	Mild dysplasia	CIN I	Mild dysplasia	Low-grade CIN	Low-grade dysplasia
		Moderate dysplasia	CIN II	Moderate dysplasia	High-grade CIN	High-grade dysplasia
		Severe dysplasia	CIN III	Severe dysplasia		
	Intra-epithelial carcinoma	Carcinoma <i>in situ</i>				

Comparative table of the principal classifications of lesions of the cervical squamous epithelium.



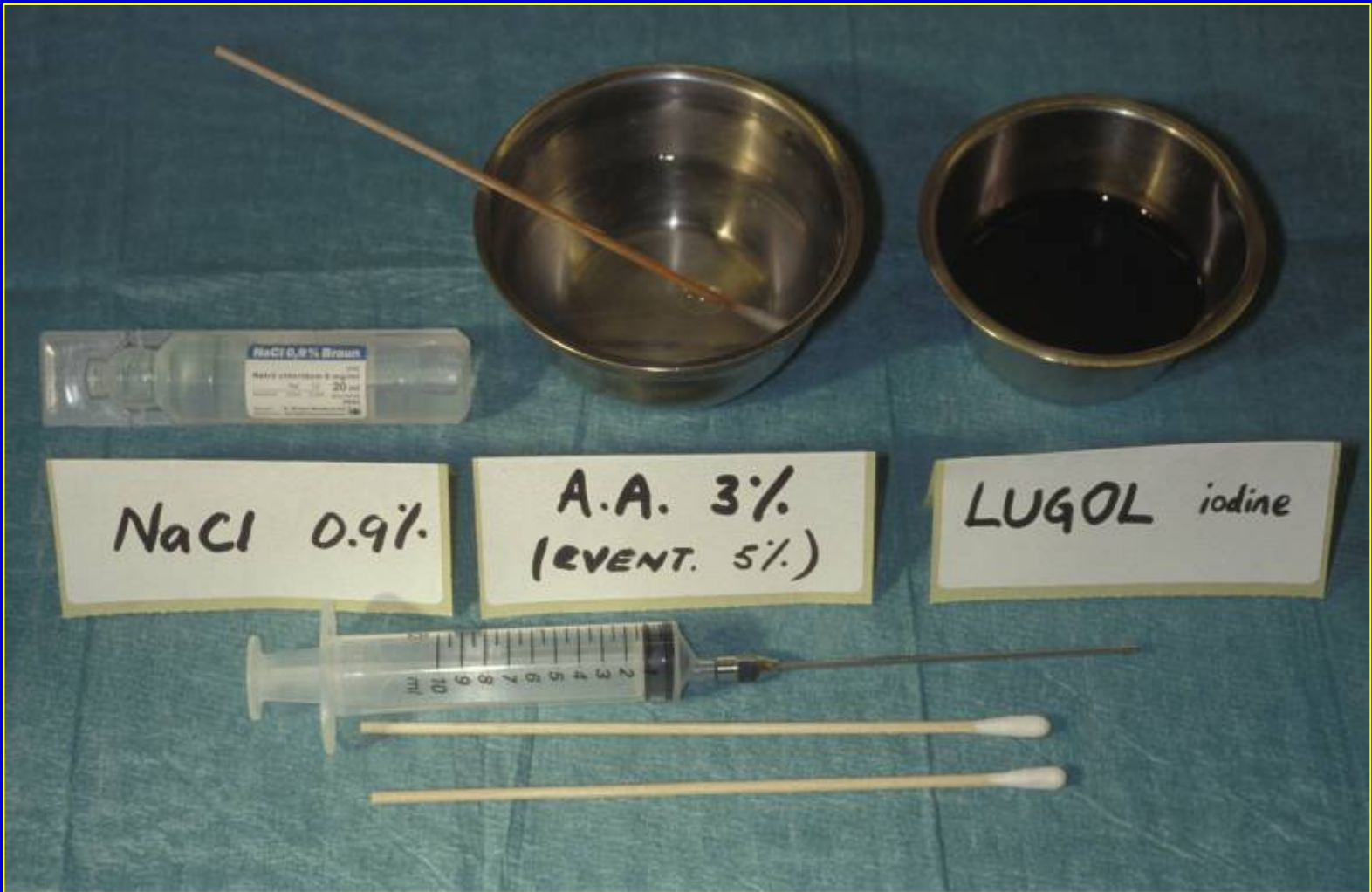


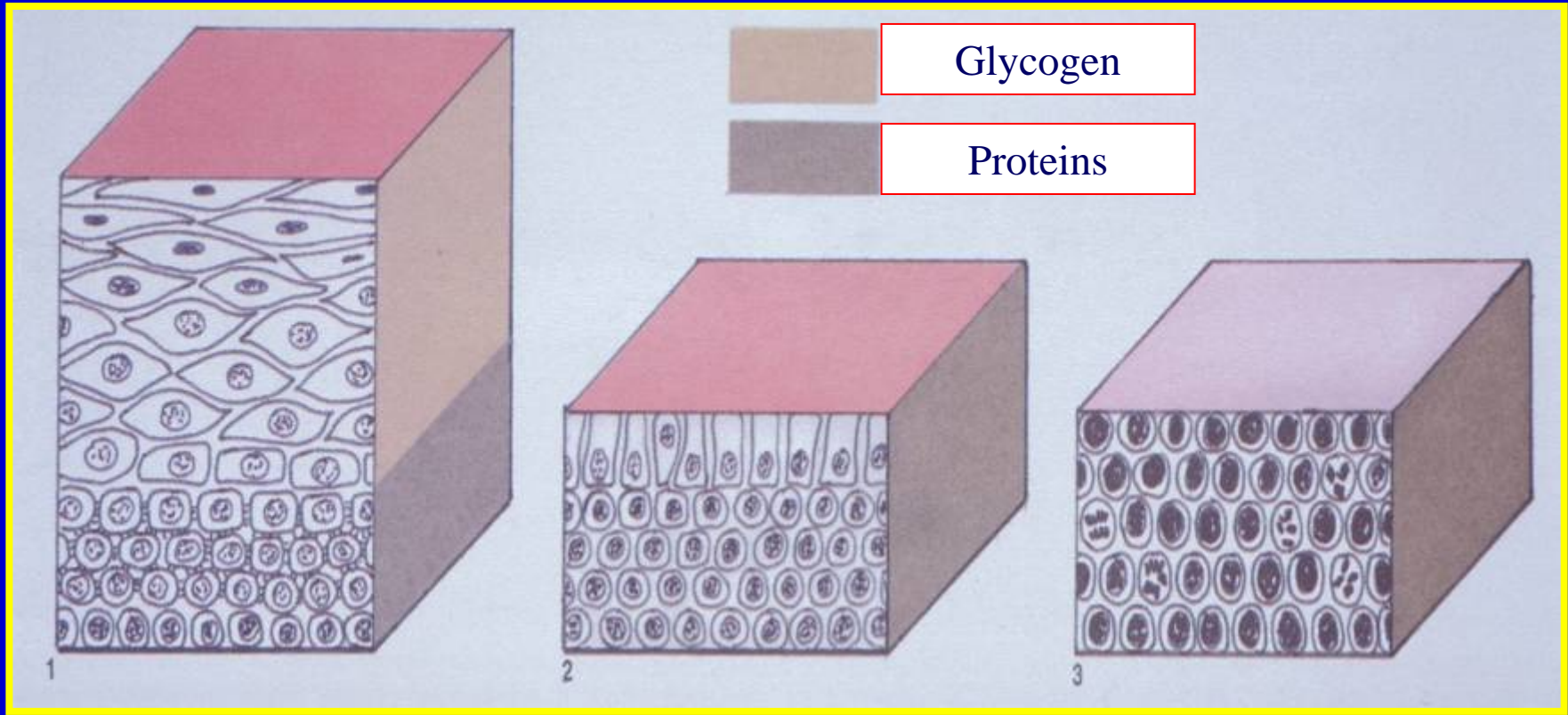


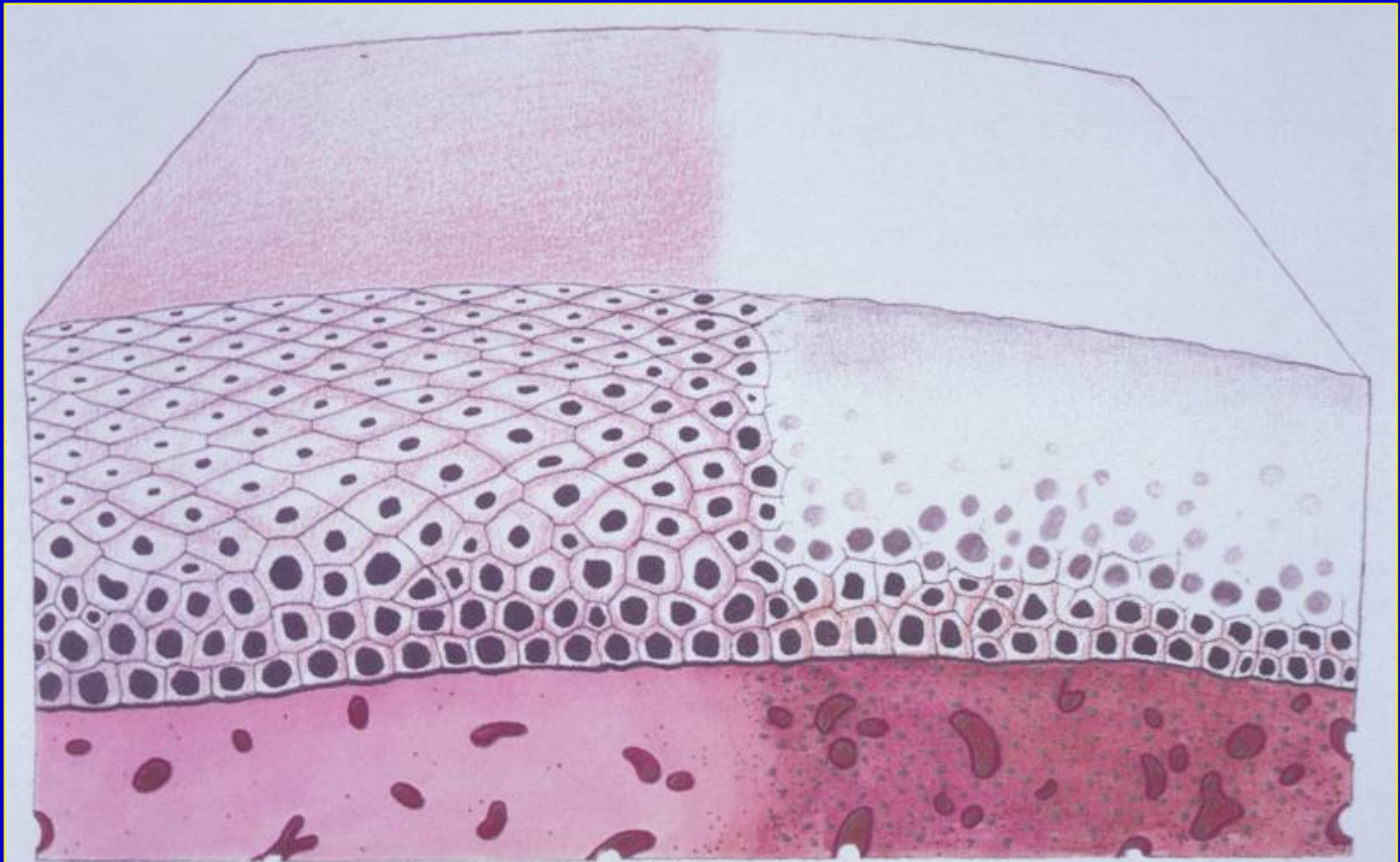
NaCl 0.9%

A.A. 3%
(REVENT. 5%)

LUGOL iodine







291B

Cartier 1977



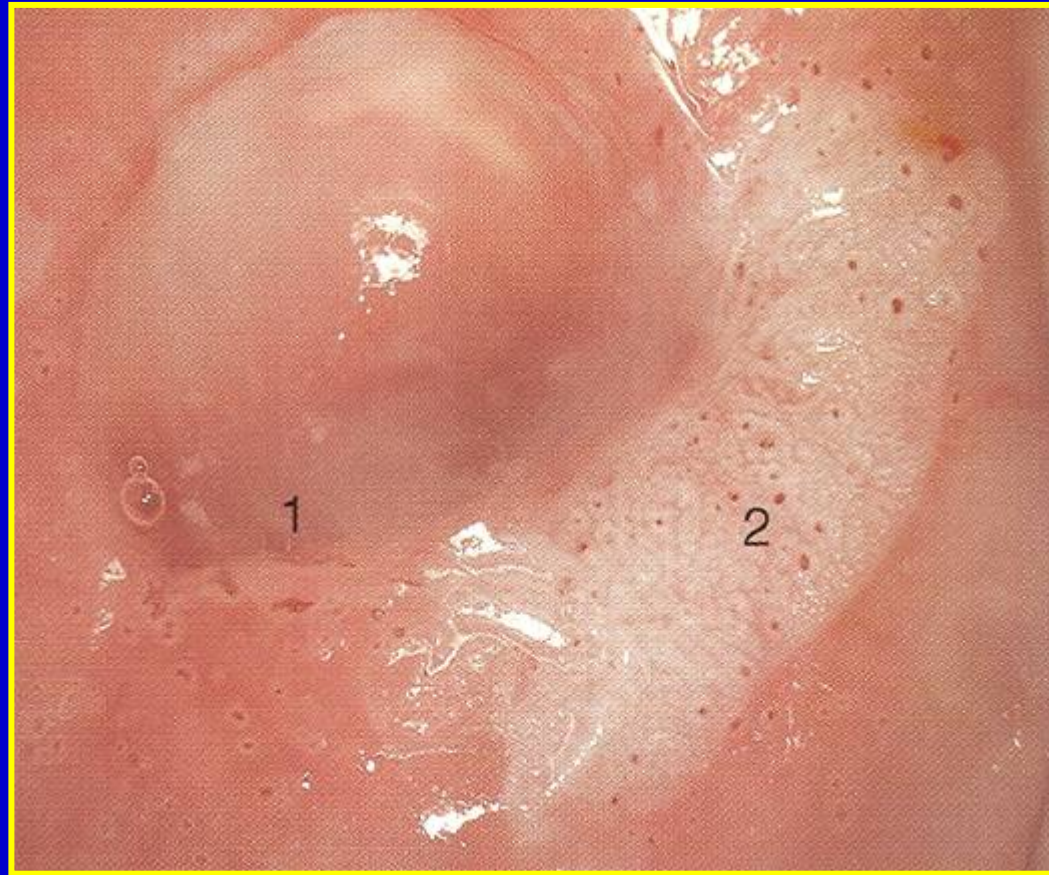
147

Cartier 1984

Condyloma



Condylomata accuminata



Flat condyloma



Immature Squamous Metaplasia



Condyloma

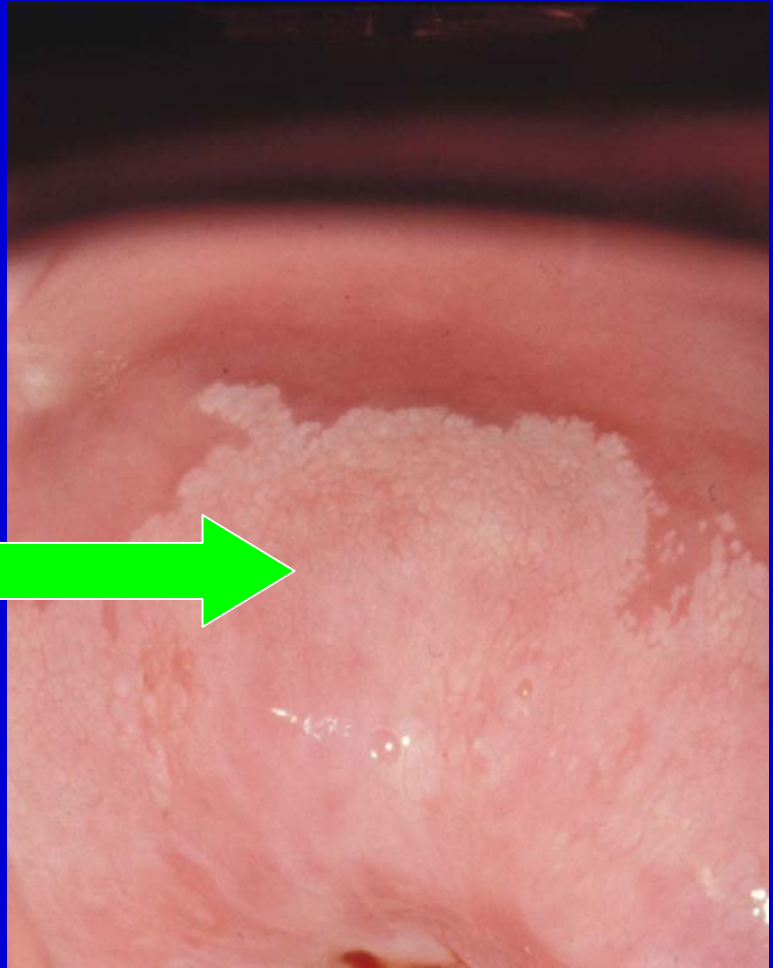
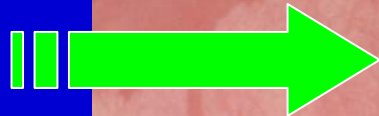


Immature squamous metaplasia

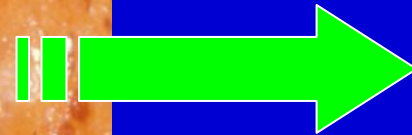
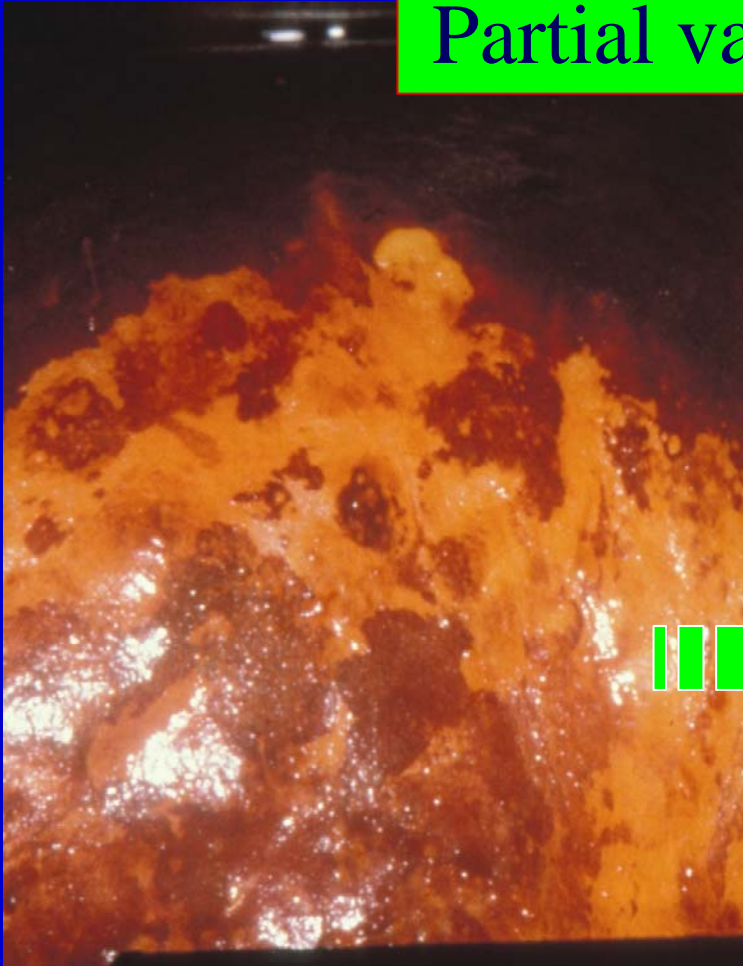


Immature squamous metaplasia

CIN ? ISM ?



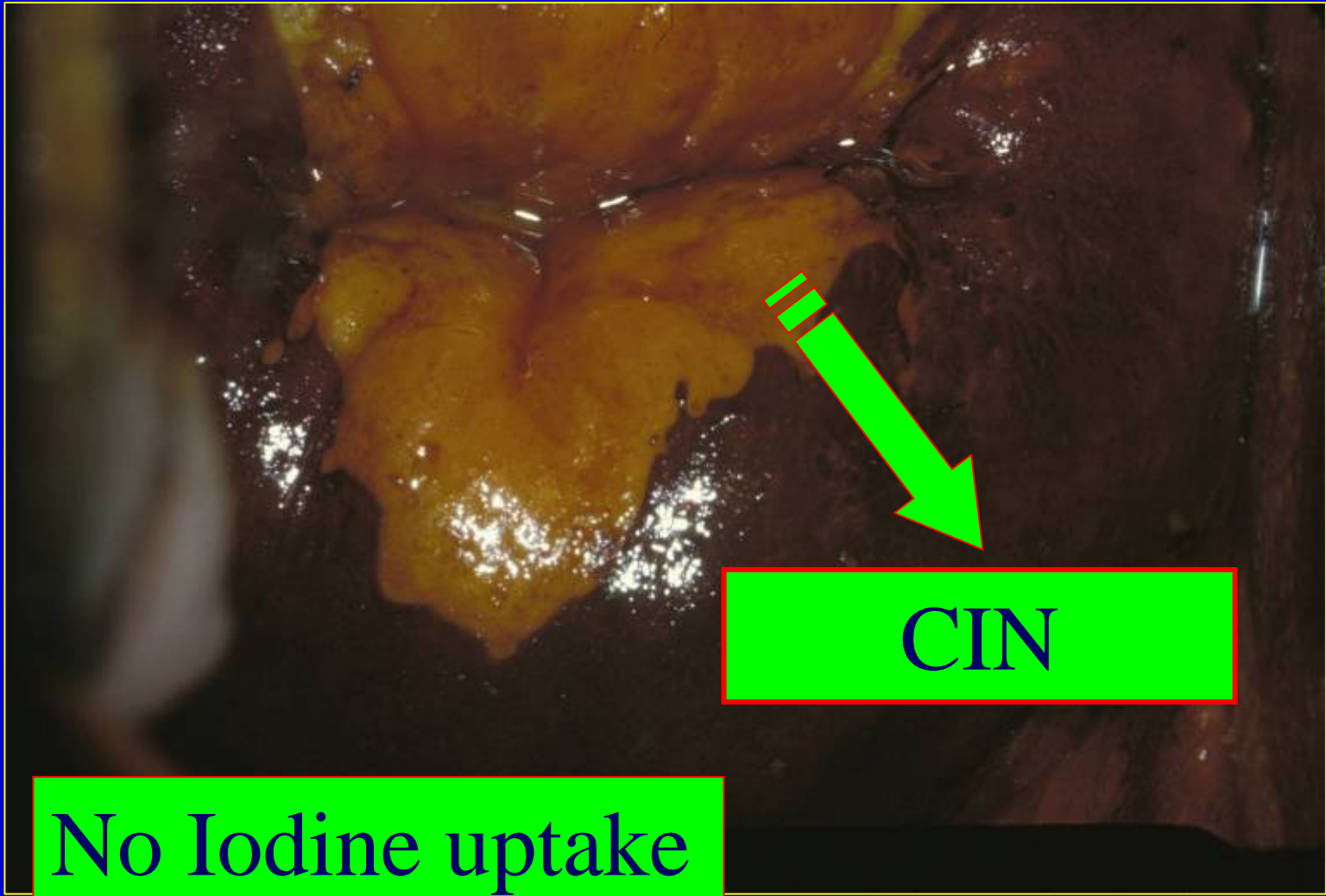
Partial variegated iodine uptake



ISM



CIN ? ISM?



CIN

No Iodine uptake



« White Tyres »: surrounded and elevated gland openings

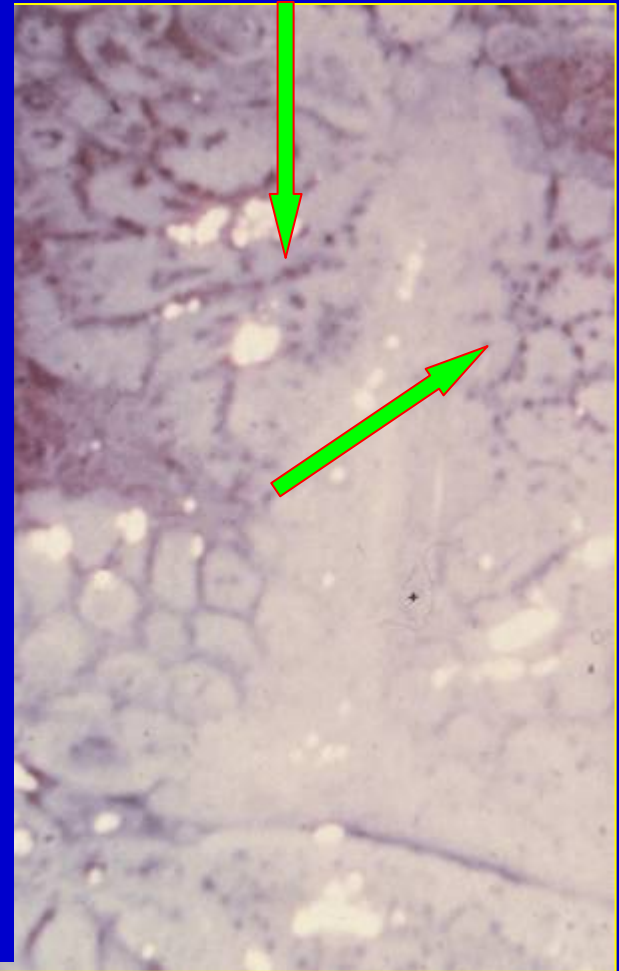
« White Tyres »

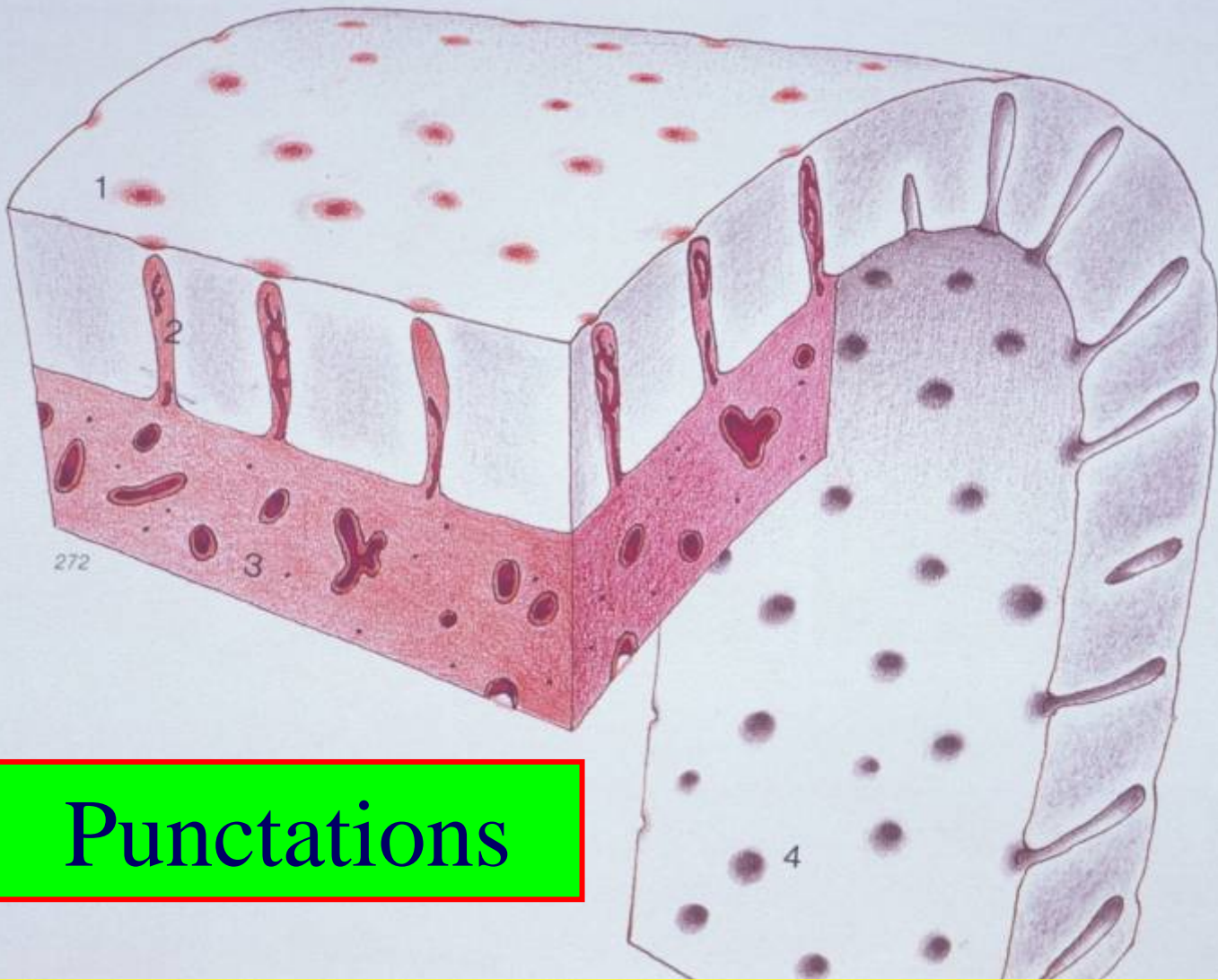


Punctations

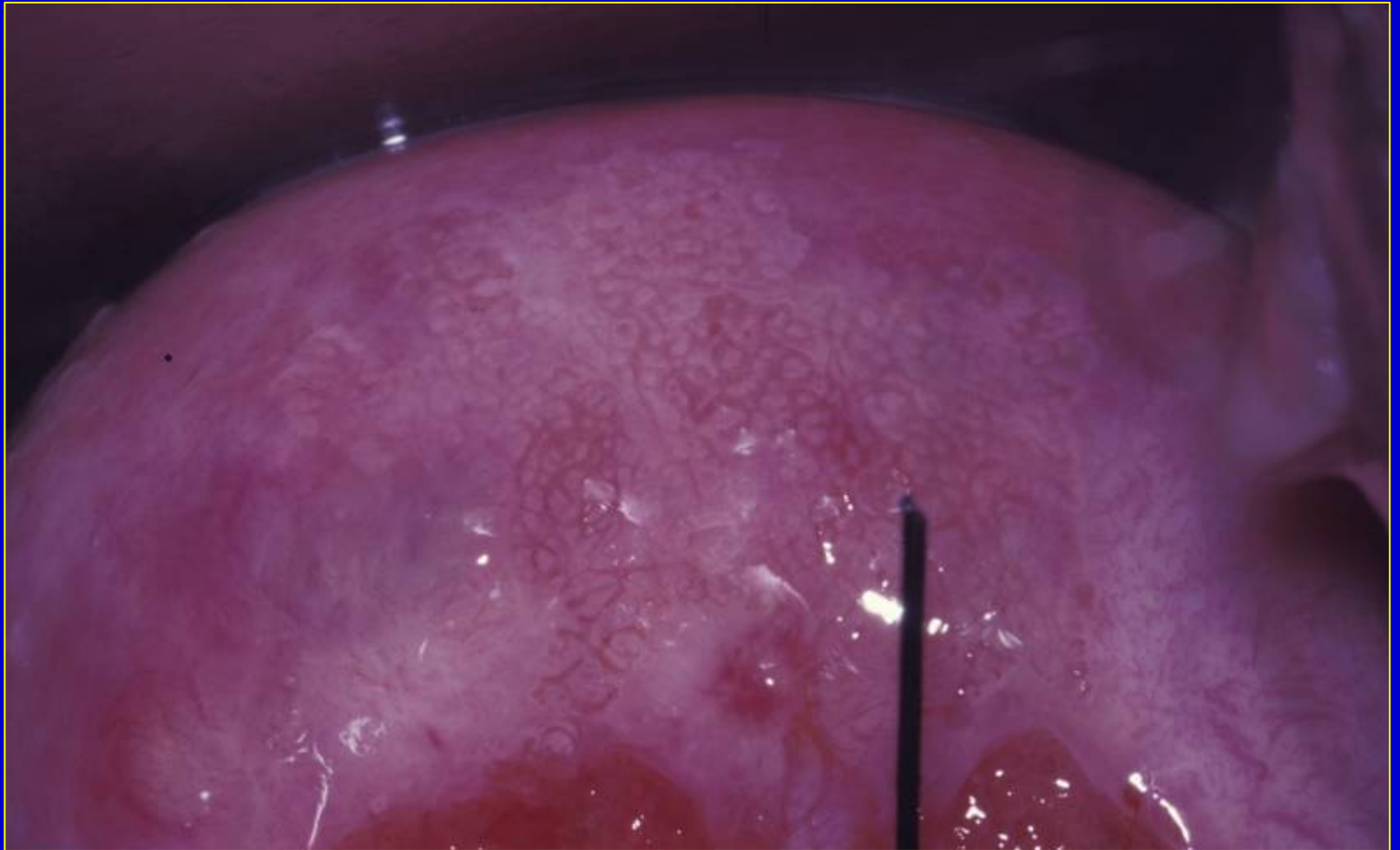


Mosaicism

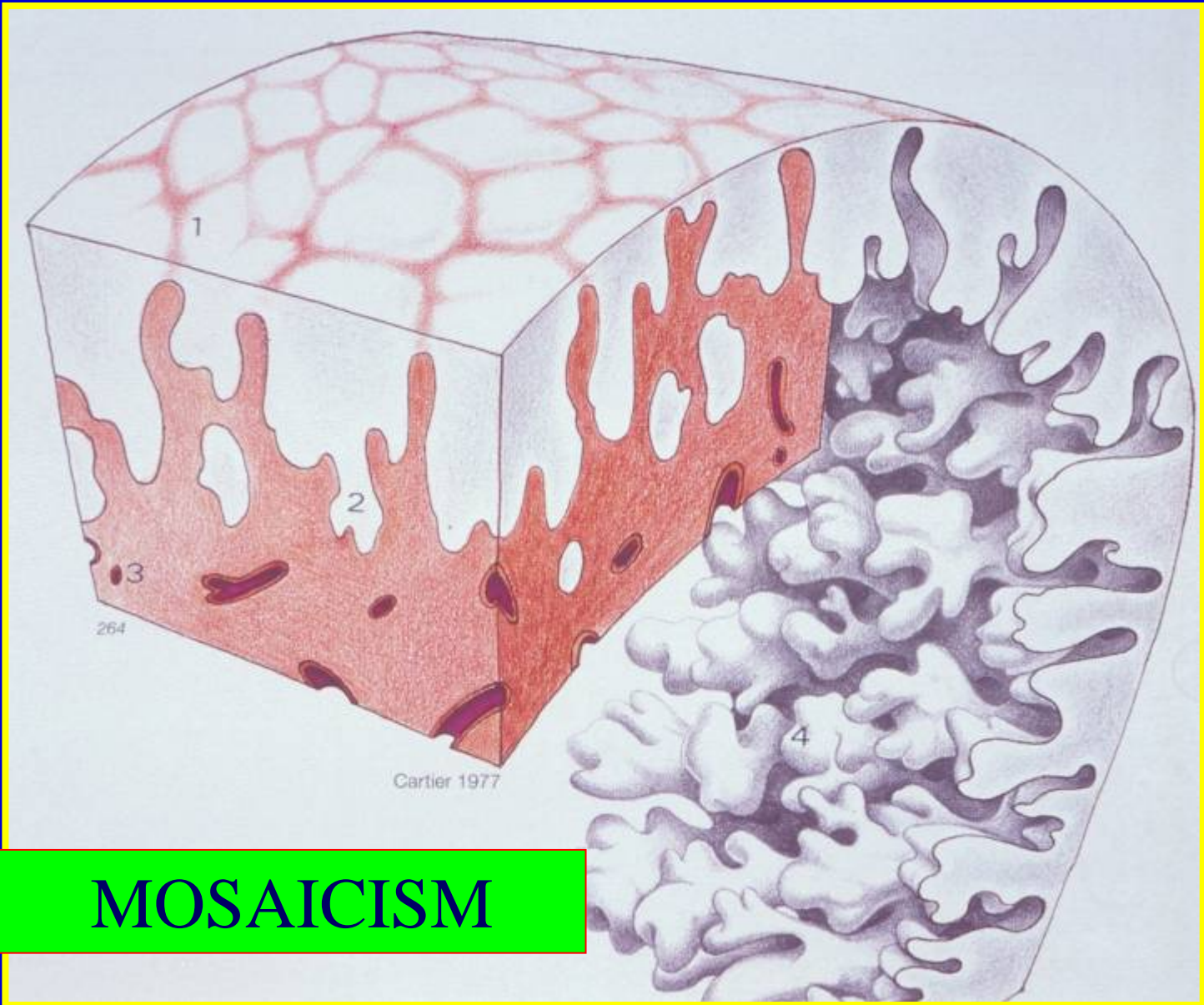




Punctations

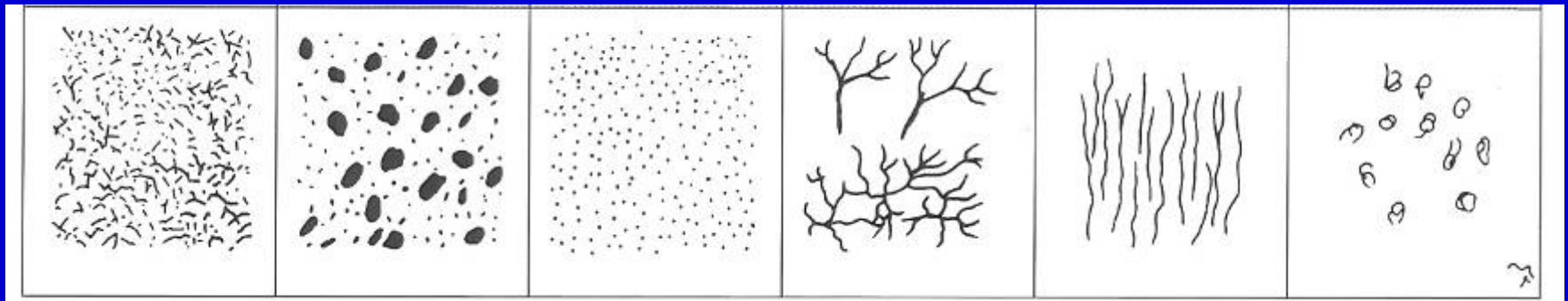


Mosaicism



MOSAICISM

Vascular pattern: non malignant



Network-like

Red-dotted

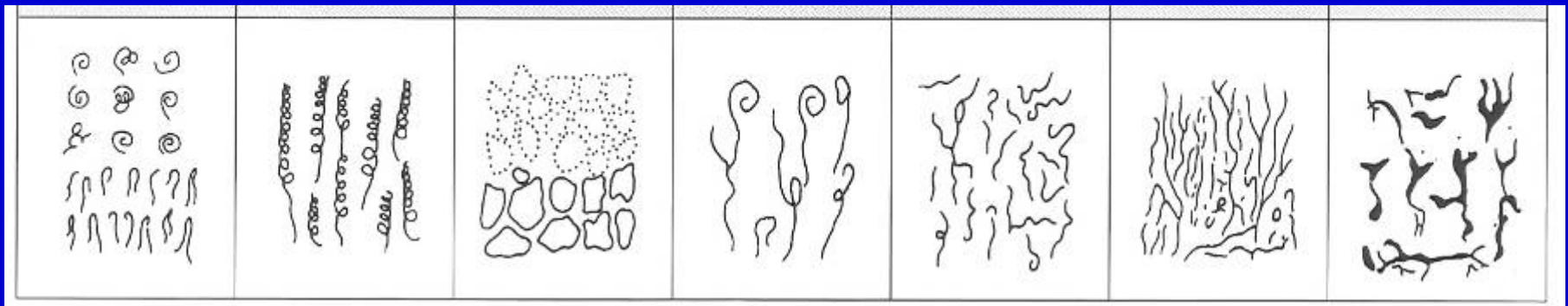
Red-spotted

Branch-like

lineal

loop-like

Vascular pattern: malignant



Hairpin

corkscrew

mosaic

tendril

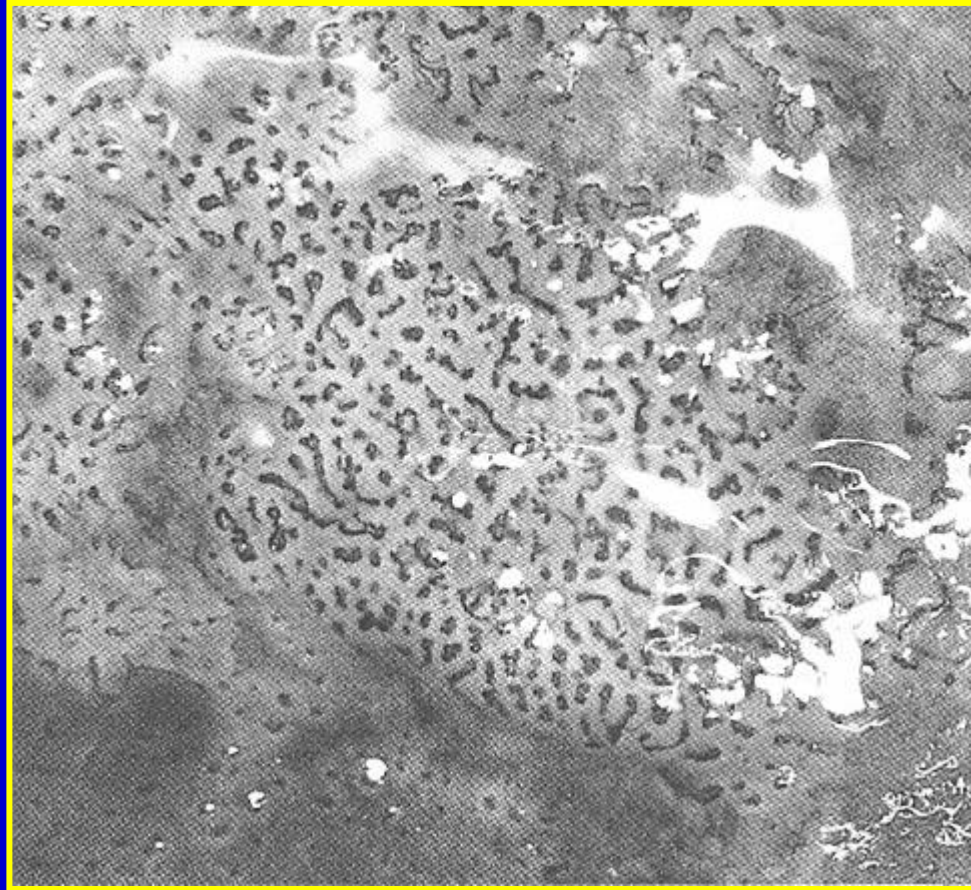
waste-thread

branches

root-like



Vascular pattern

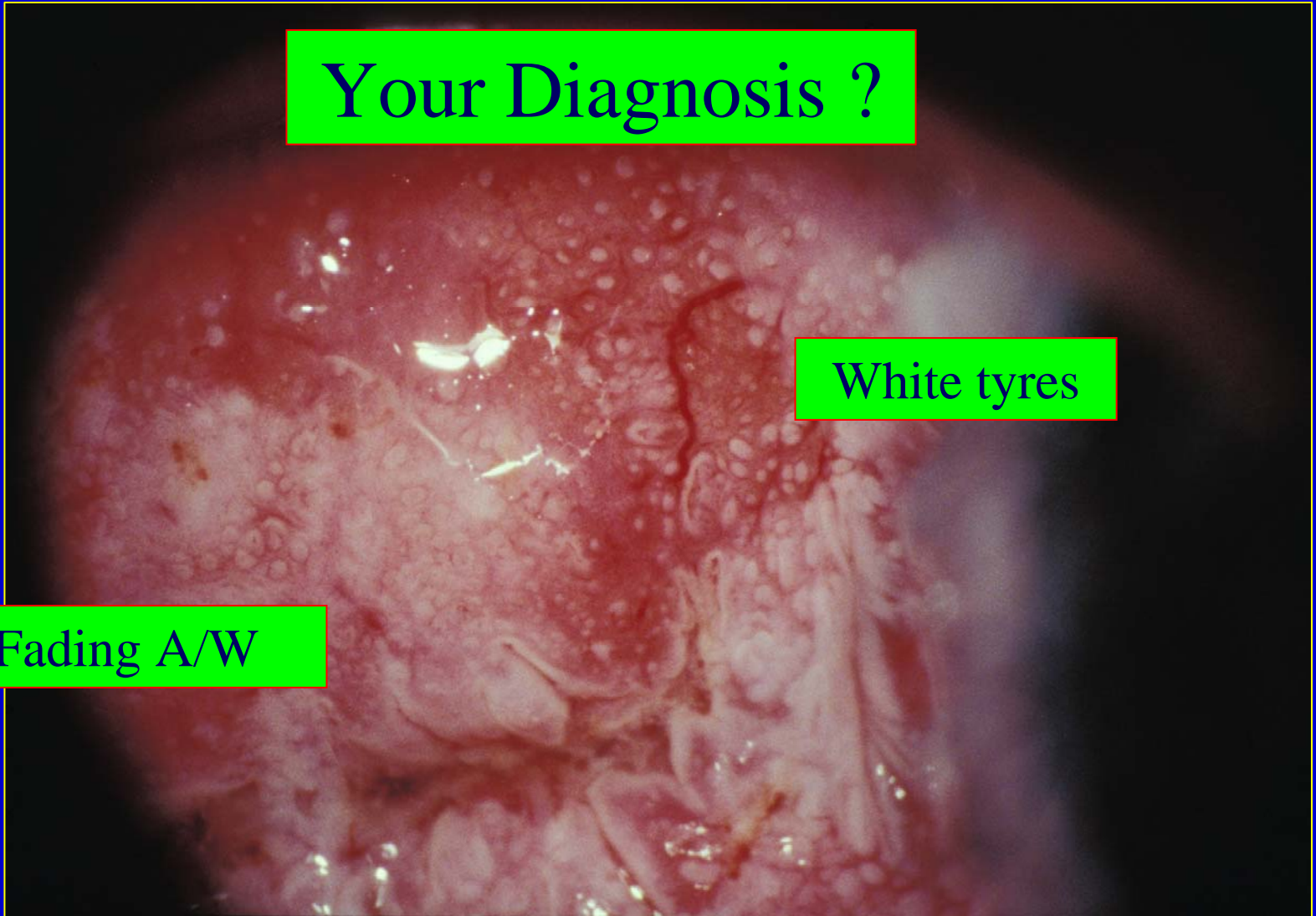


Vascular pattern

Your Diagnosis ?

White tyres

Fading A/W

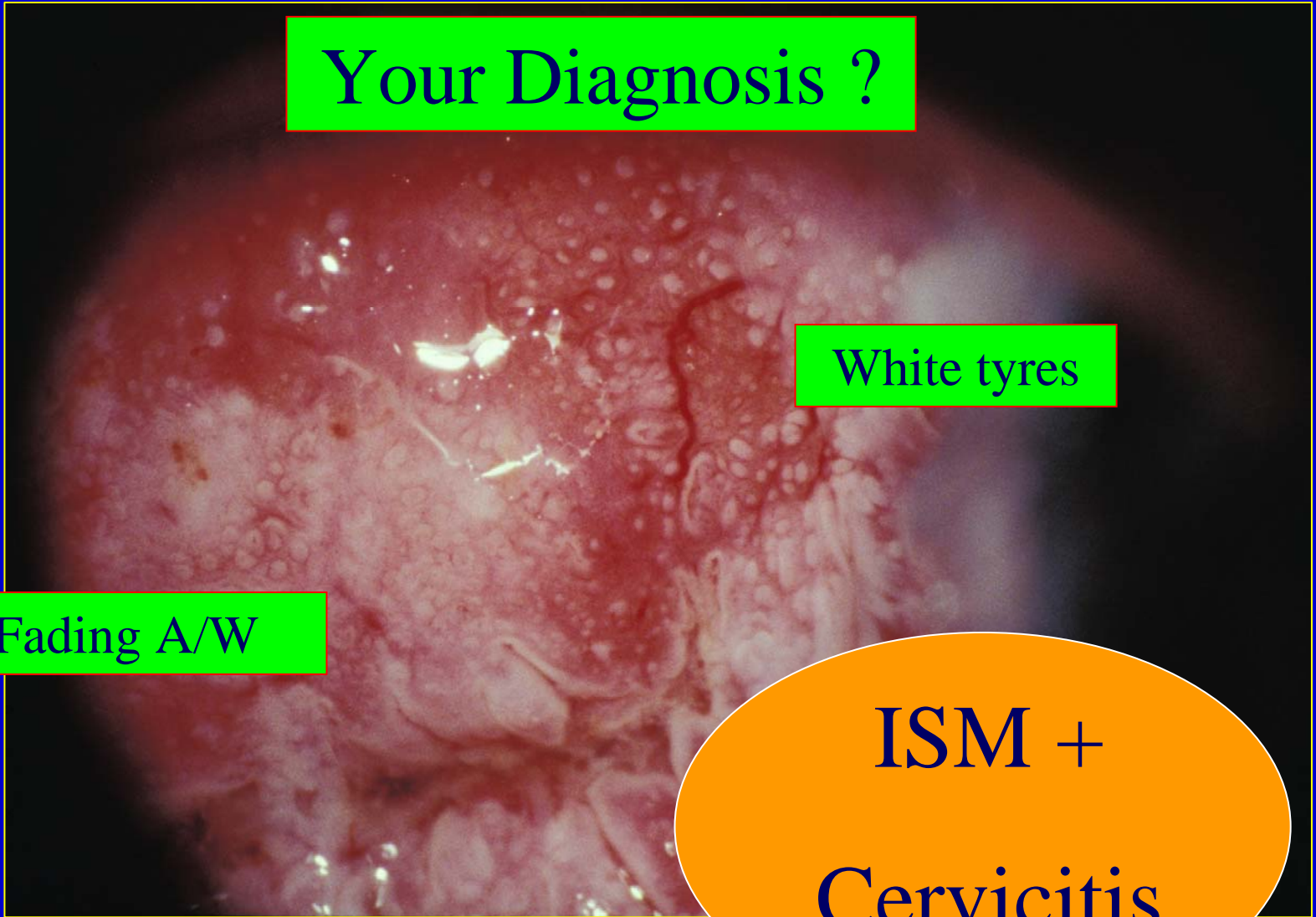


Your Diagnosis ?

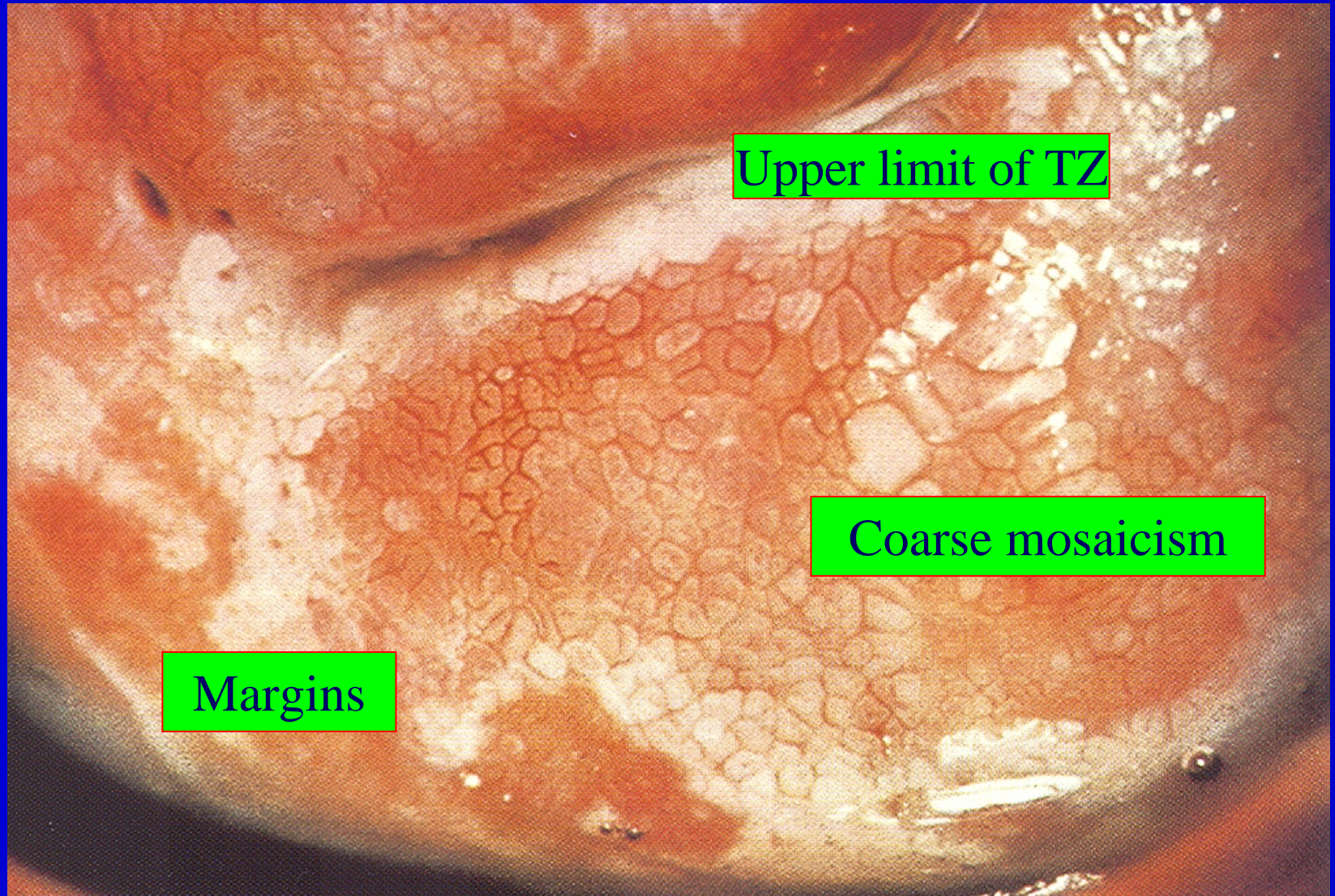
White tyres

Fading A/W

ISM +
Cervicitis



Your diagnosis ?



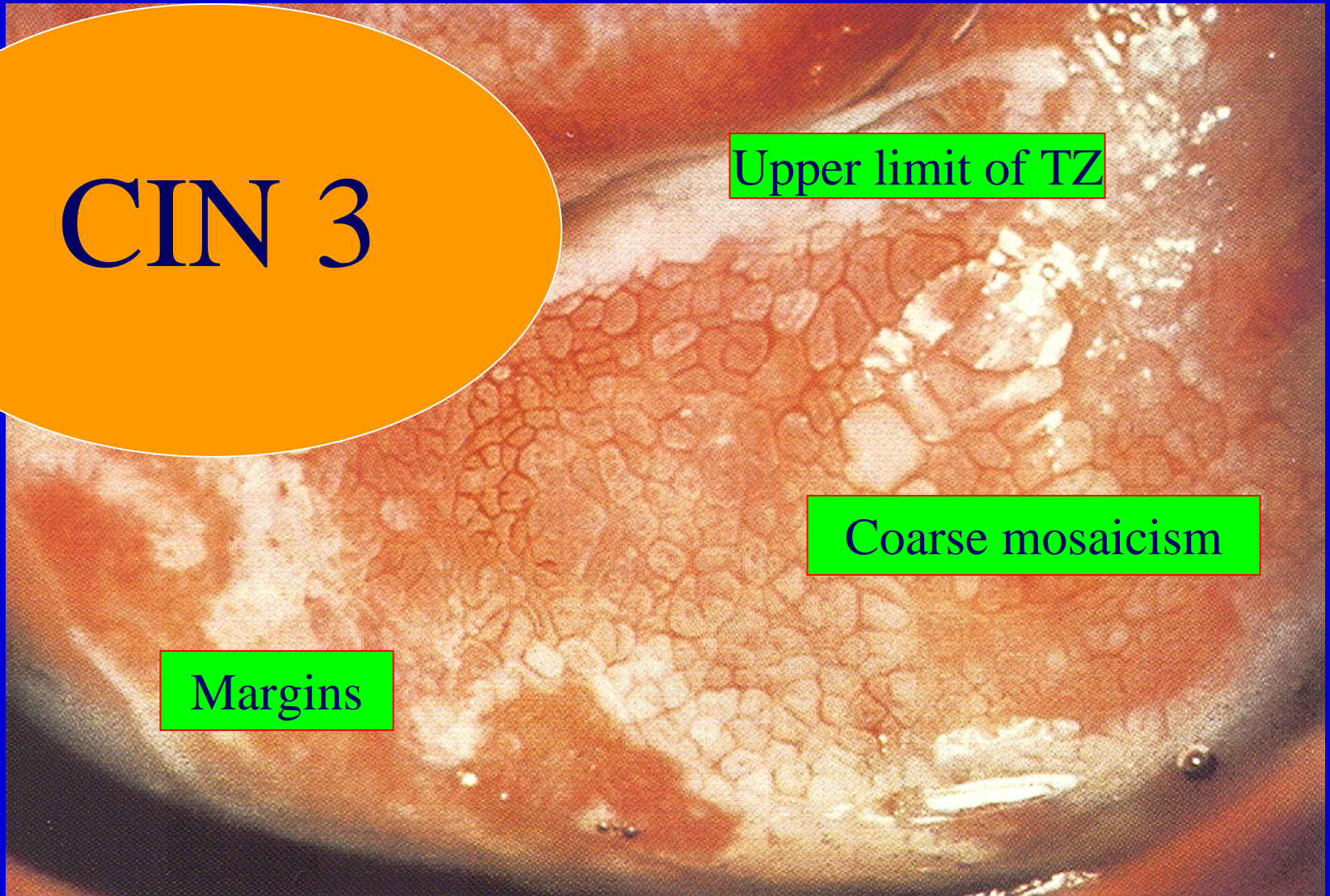
Your diagnosis ?

CIN 3

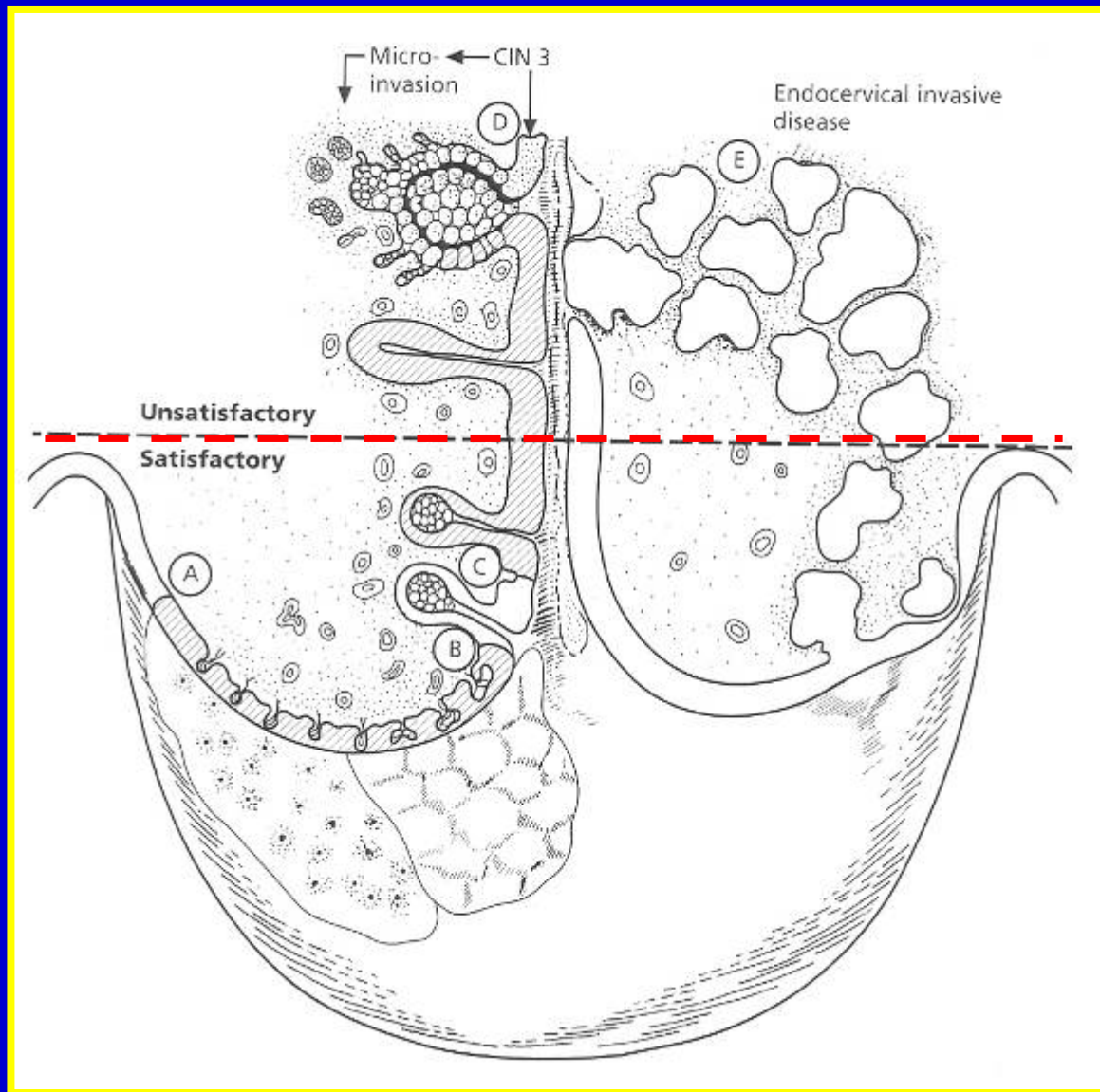
Upper limit of TZ

Coarse mosaicism

Margins

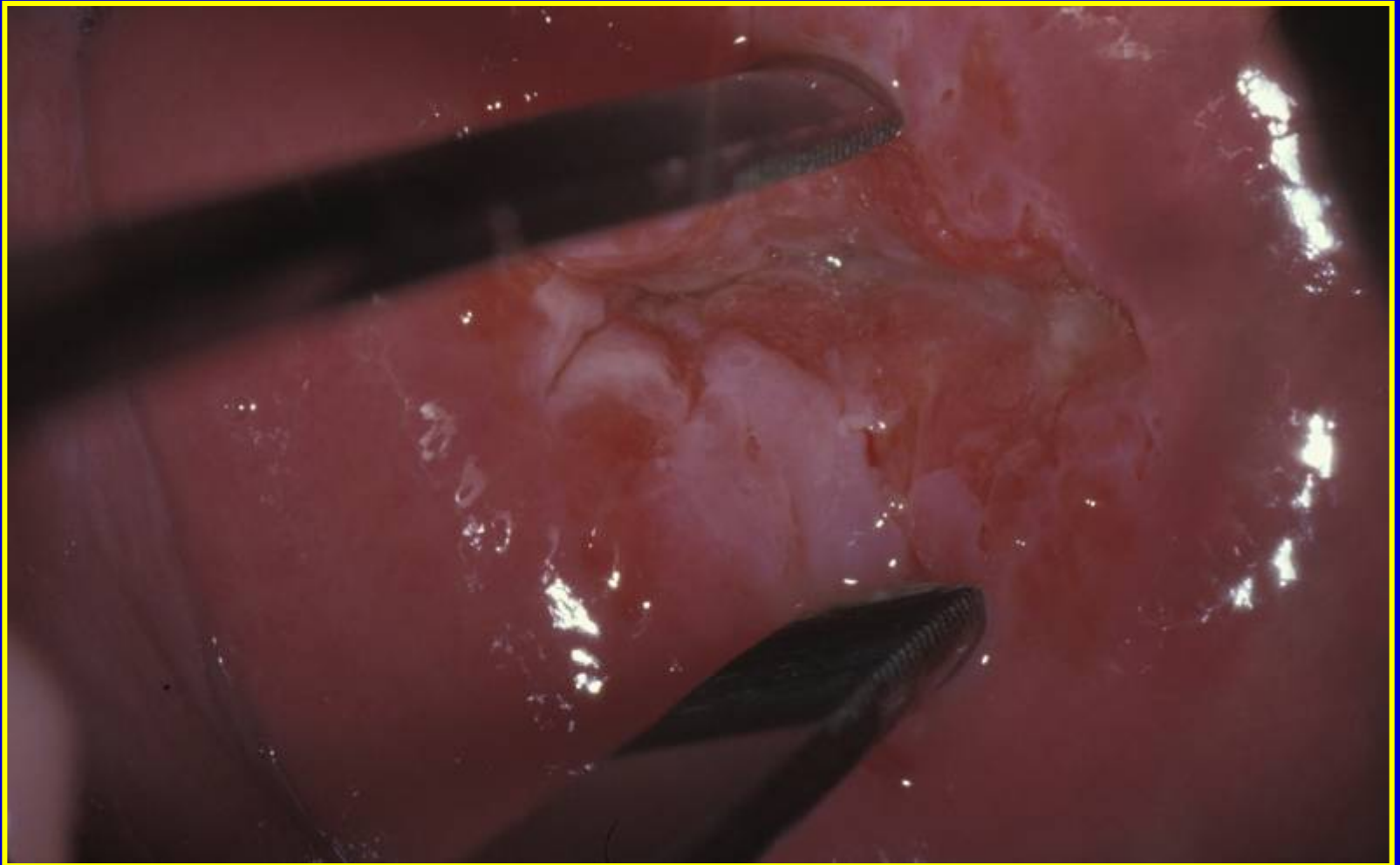


Adequacy of colposcopy

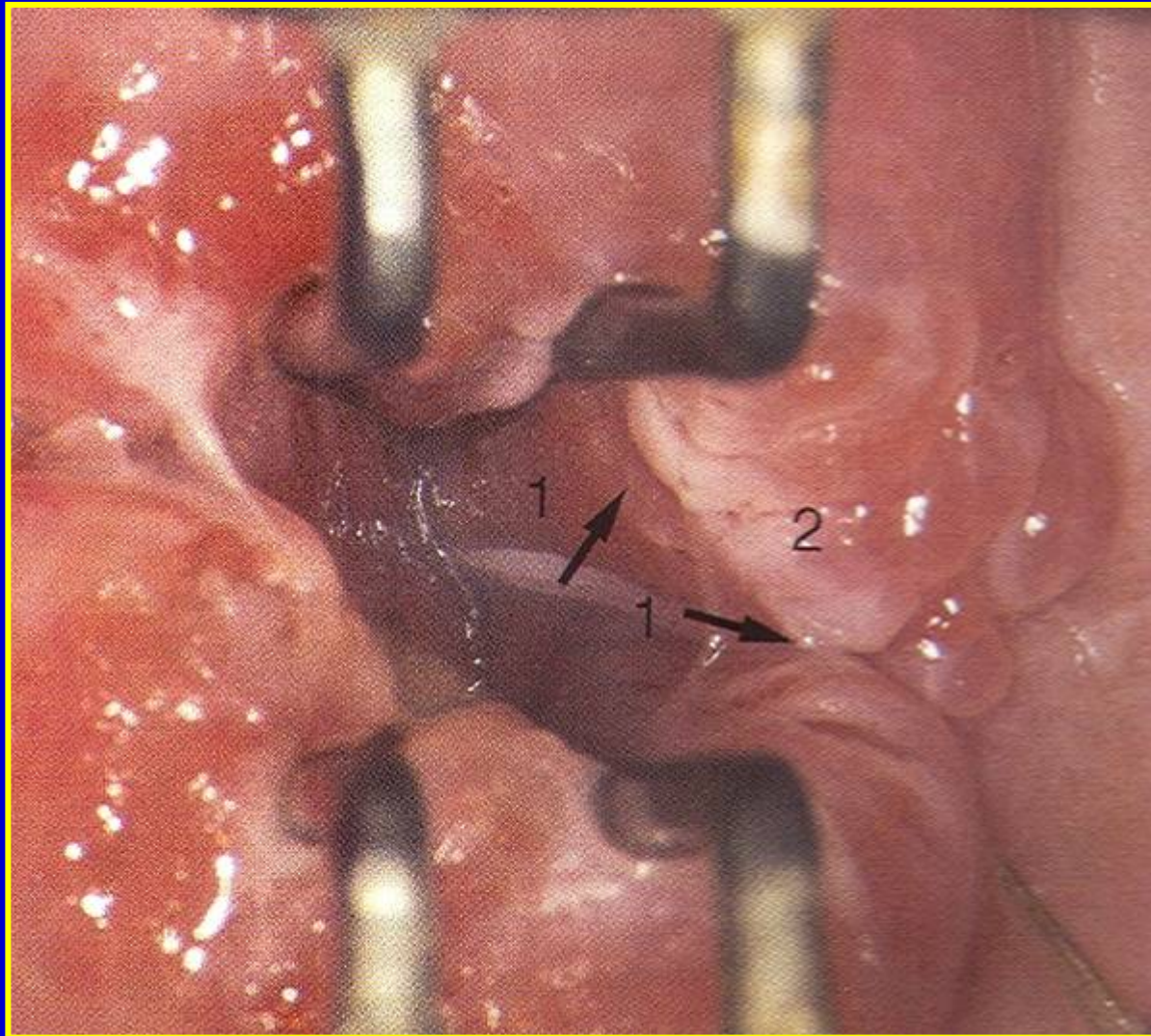


Endocervical Canal





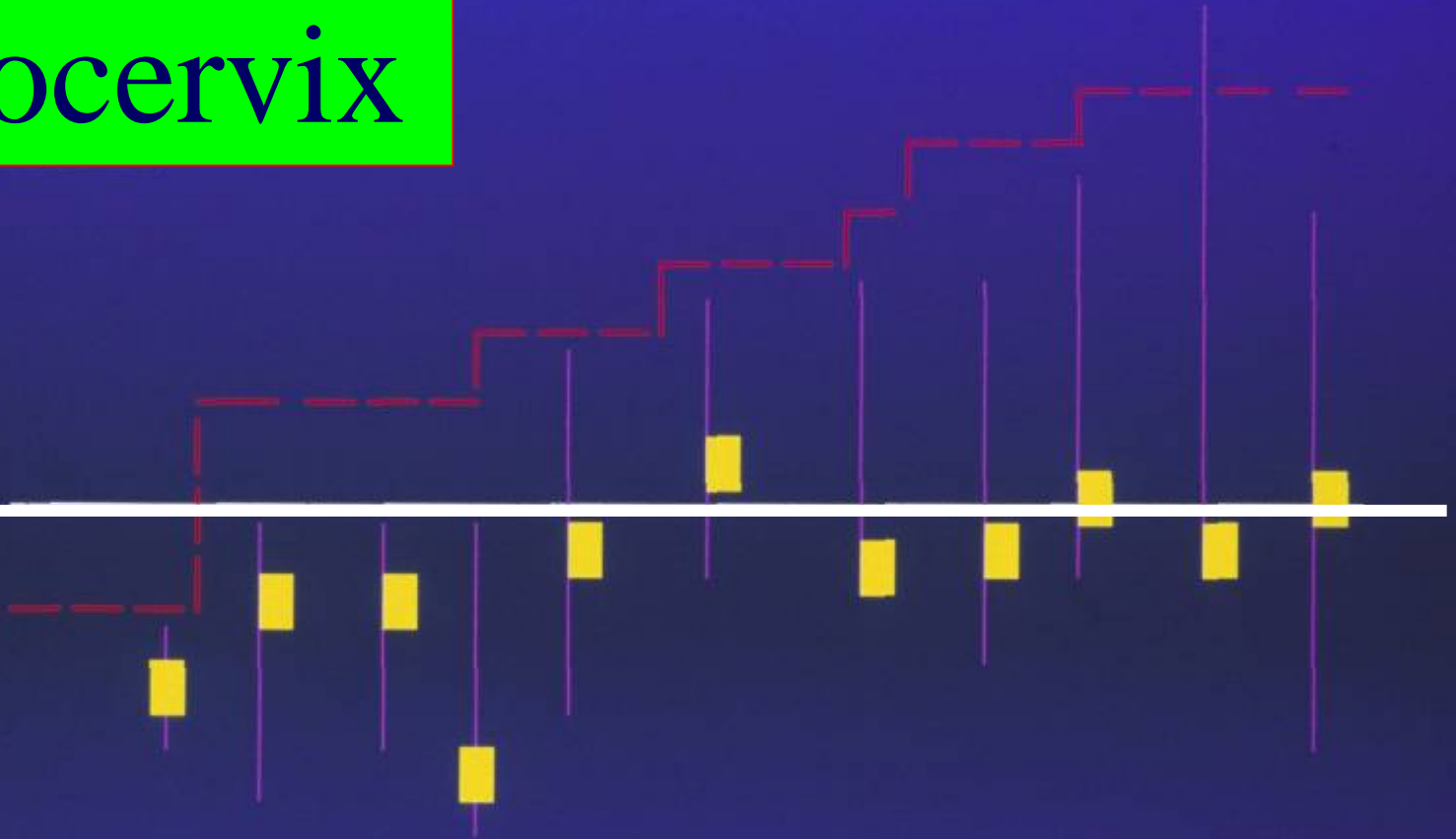
Anatomical forceps



Koogan Speculum

Ectocervix

E.O.



Endocervix

Dargent 1990

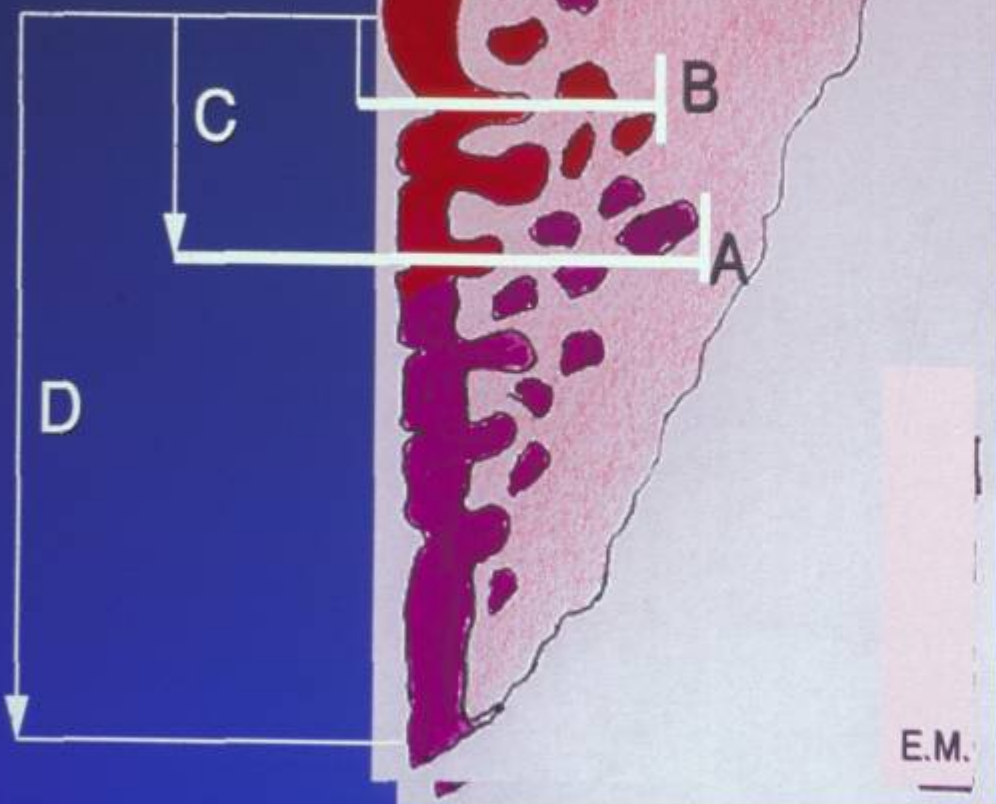
Ca in situ

Invasion débutante

Dernière glande



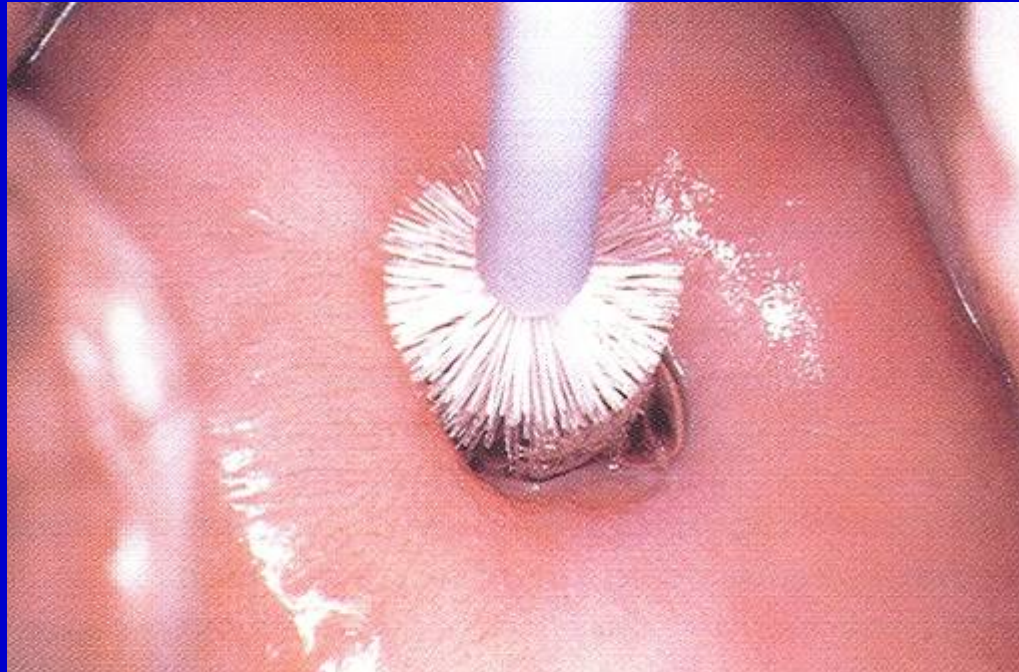
O.E.



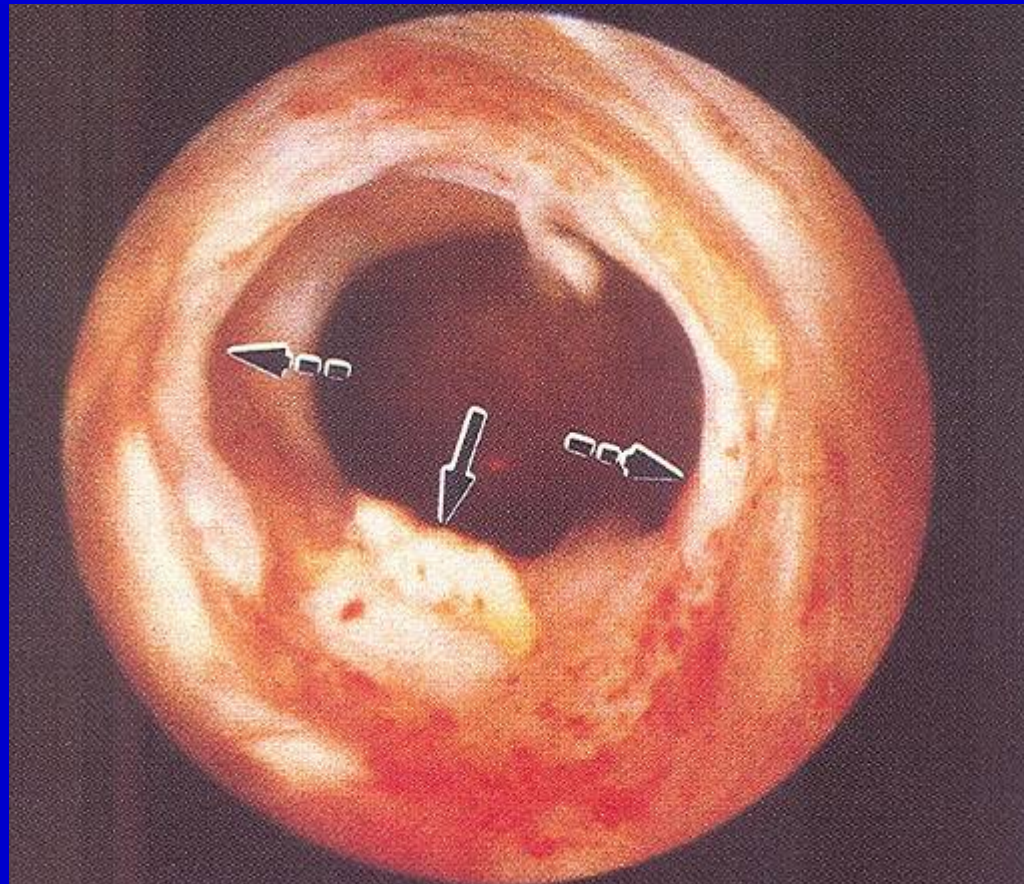
- Epithélium épidermoïde
- Métaplasie ± atypique
- Epithélium glandulaire
- Dernière glande

- A. Glande la plus profonde
0.7 cm (0.3-1.6)
- B. Glande dysplasique la plus
profonde 0.45 cm (0.29-0.52)
- C. 1.68 cm (0.33-3.25)
- D. Canal cervical 2.8 cm (1.3-4.7)

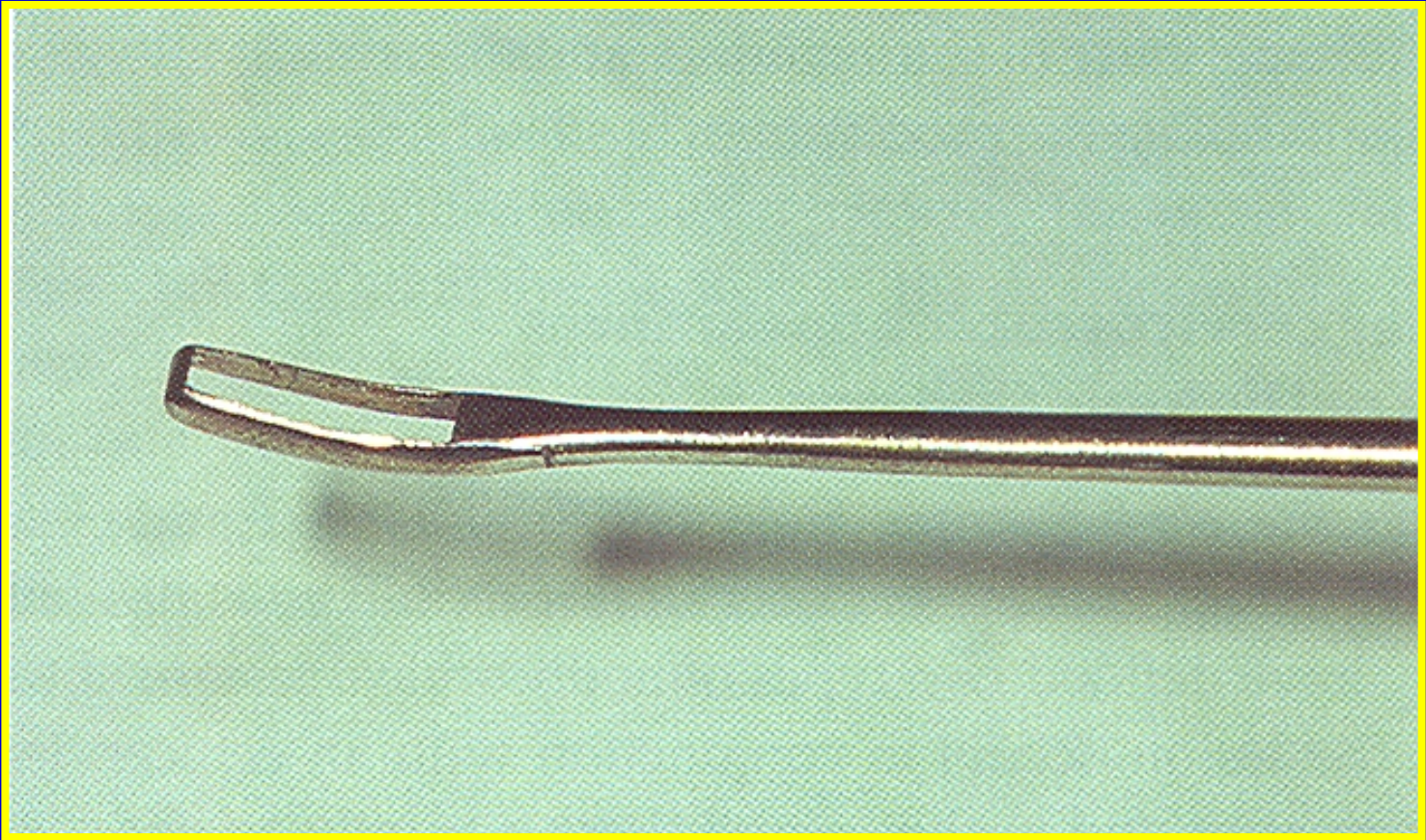




Sampling the endocervical canal



Skipping lesions of AIS



Endocervical curette

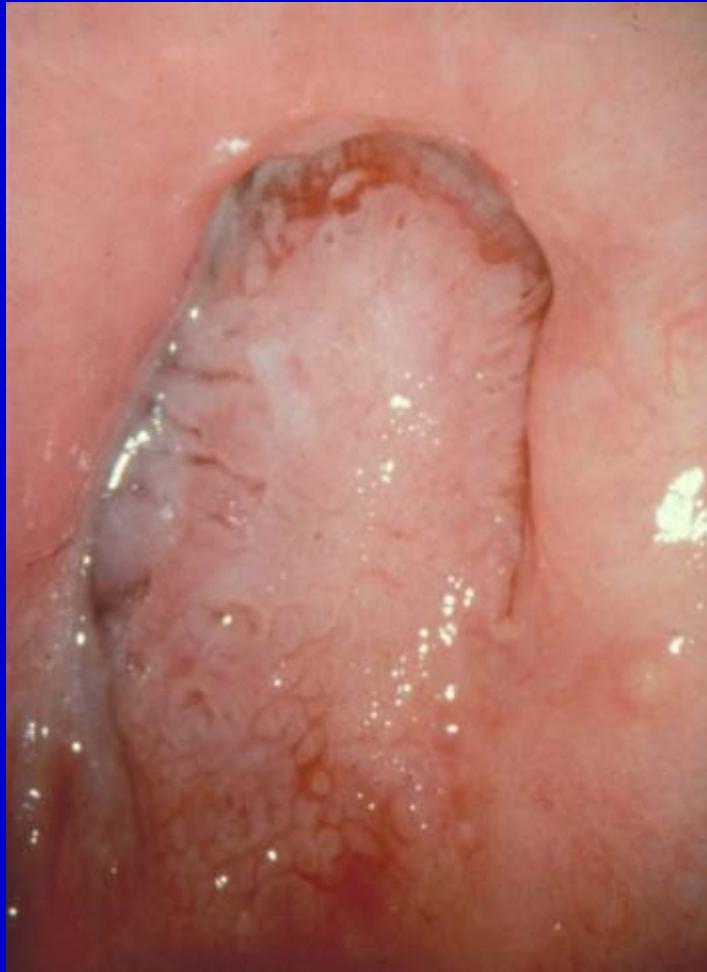
Table 6.2 The modified Reid Colposcopic Index (RCI)*.

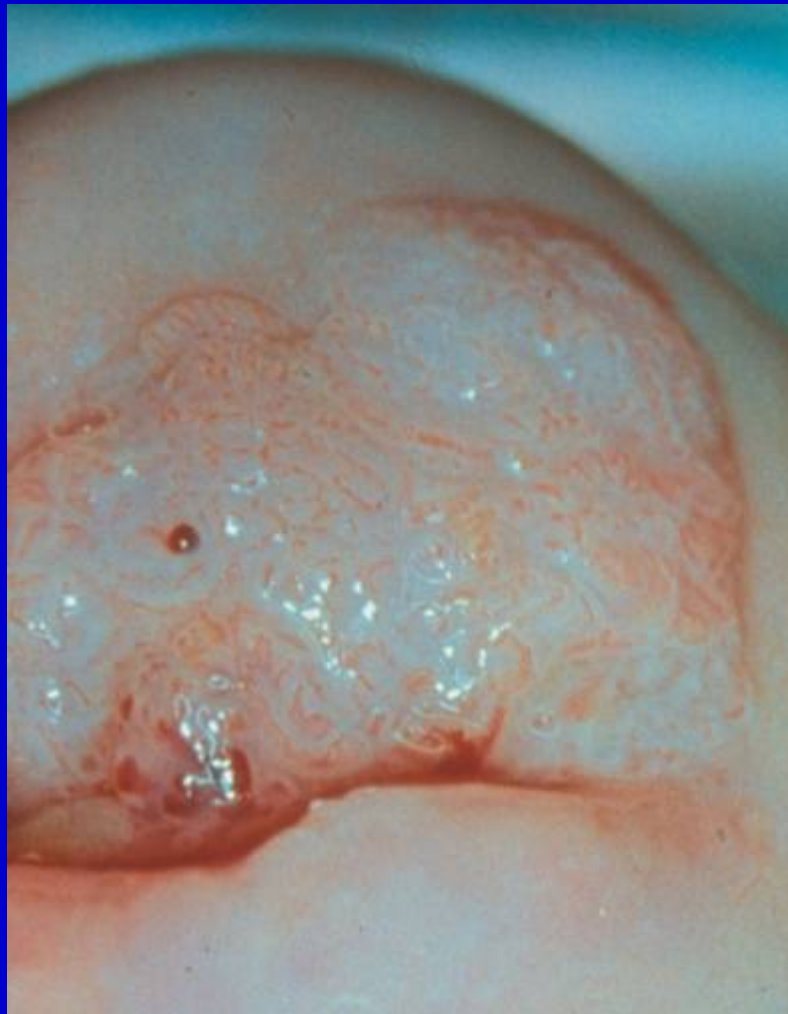
Colposcopic signs	Zero points	One point	Two points
Color	Low intensity acetowhitening (not completely opaque); indistinct acetowhitening; transparent acetowhitening Acetowhitening beyond the margin of the transformation zone Pure snow-white color with intense surface shine (rare)	Intermediate shade – gray-white color and shiny surface (most lesions should be scored in this category)	Dull, oyster-white Gray
Lesion margin and surface configuration	Microcondylomatous or micropapillary contour† Flat lesions with indistinct borders Feathered or finely scalloped margins Angular, jagged lesions§ Satellite lesions beyond the margin of the transformation zone	Regularly shaped symmetrical lesions with smooth, straight outlines	Rolled, peeling edges‡ Internal demarcations between areas of differing colposcopic appearance; a central area of high-grade change and peripheral area of low-grade
Vessels	Fine/uniform caliber vessels¶ Poorly formed patterns of fine punctation and/or mosaic Vessels beyond the margin of the transformation zone Fine vessels within microcondylomatous or micropapillary lesions††	Absent vessels	Well-defined coarse punctation or mosaic, sharply demarcated**
Iodine staining	Positive iodine uptake giving mahogany brown color Negative uptake of insignificant lesion, i.e. yellow staining by a lesion scoring three points or less on the first three criteria Areas beyond the margin of the transformation zone, conspicuous on colposcopy, evident as iodine negative areas, such areas are frequently due to parakeratosis‡‡	Partial iodine uptake – variegated, speckled appearance	Negative iodine uptake of significant lesion, i.e. yellow staining by a lesion already scoring four points or more on the first three criteria

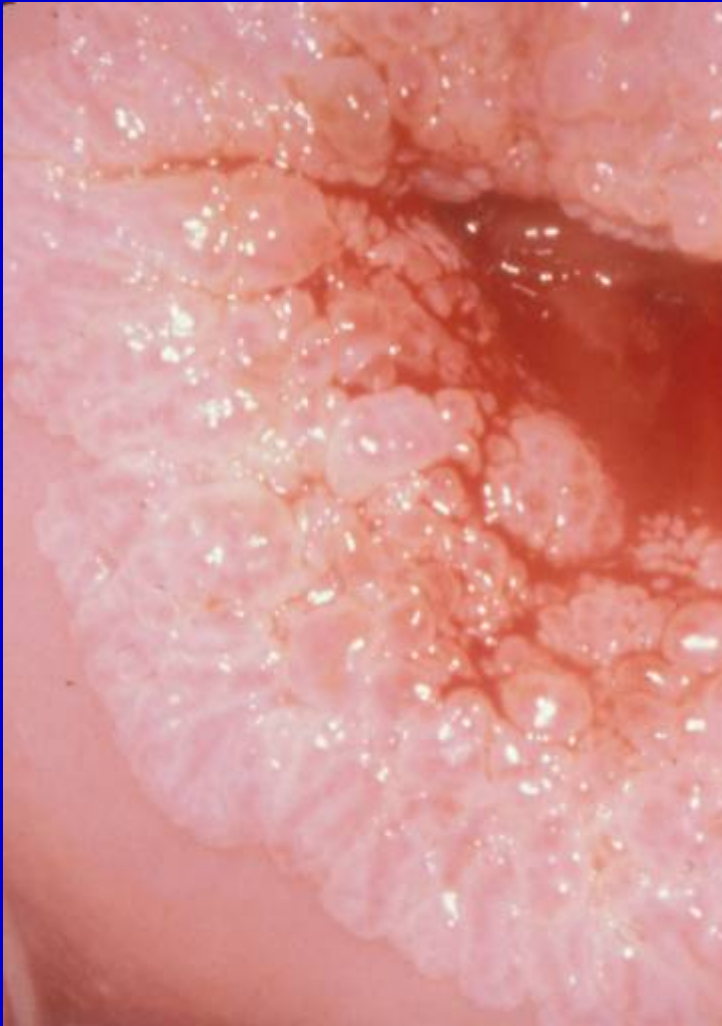
Reid Colposcopic Index

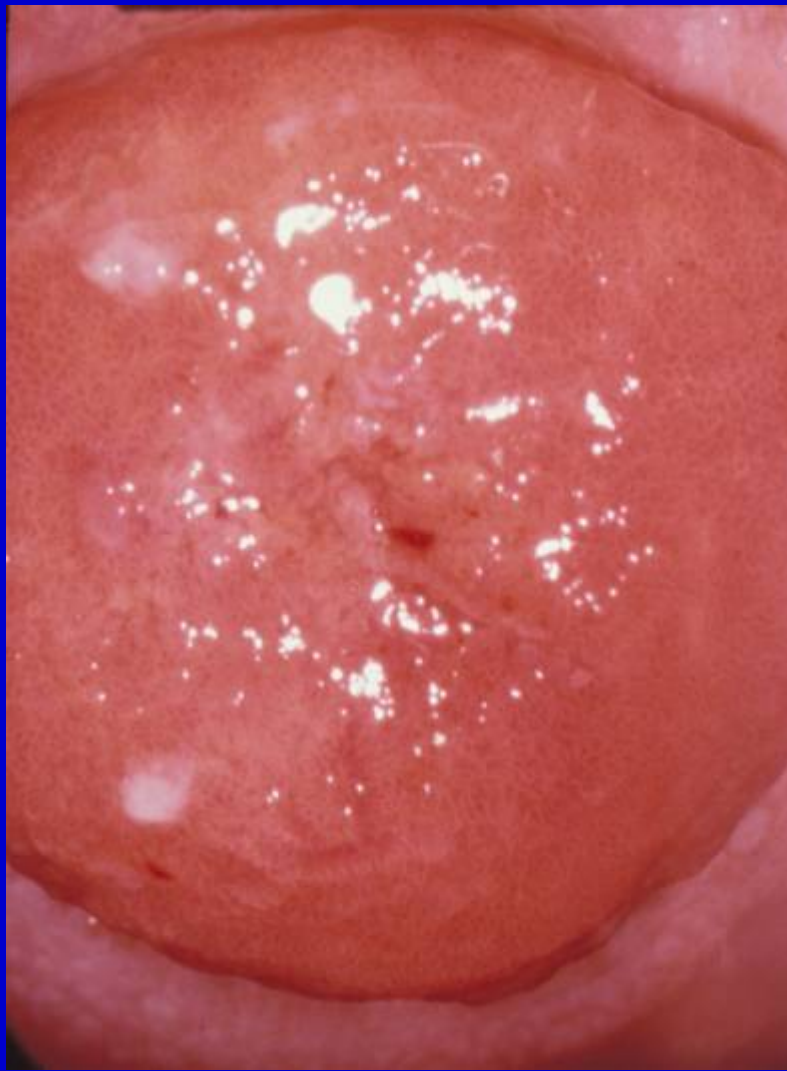
Reid Colposcopic Index (RCI)

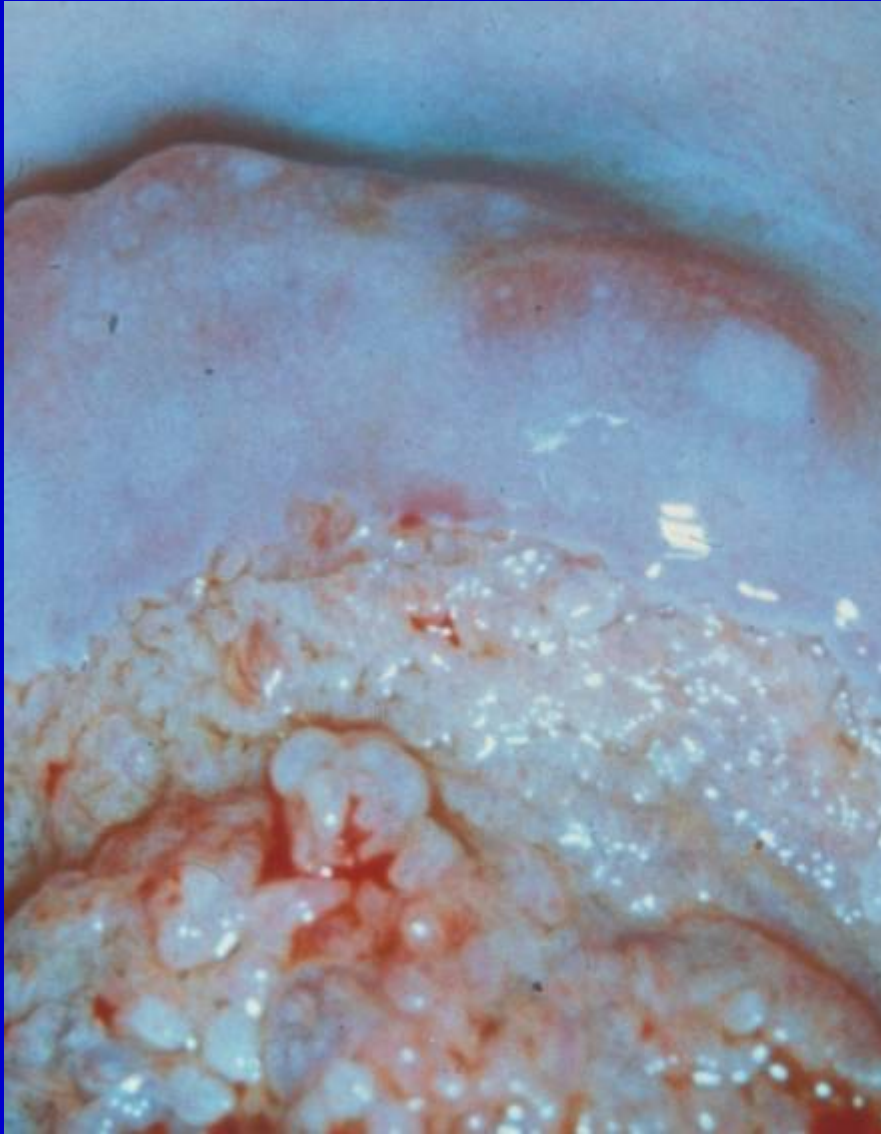
RCI (overall score)	Histology
0-2	LSIL-HPV/atypia
3-4	Overlap*
5-8	HSIL

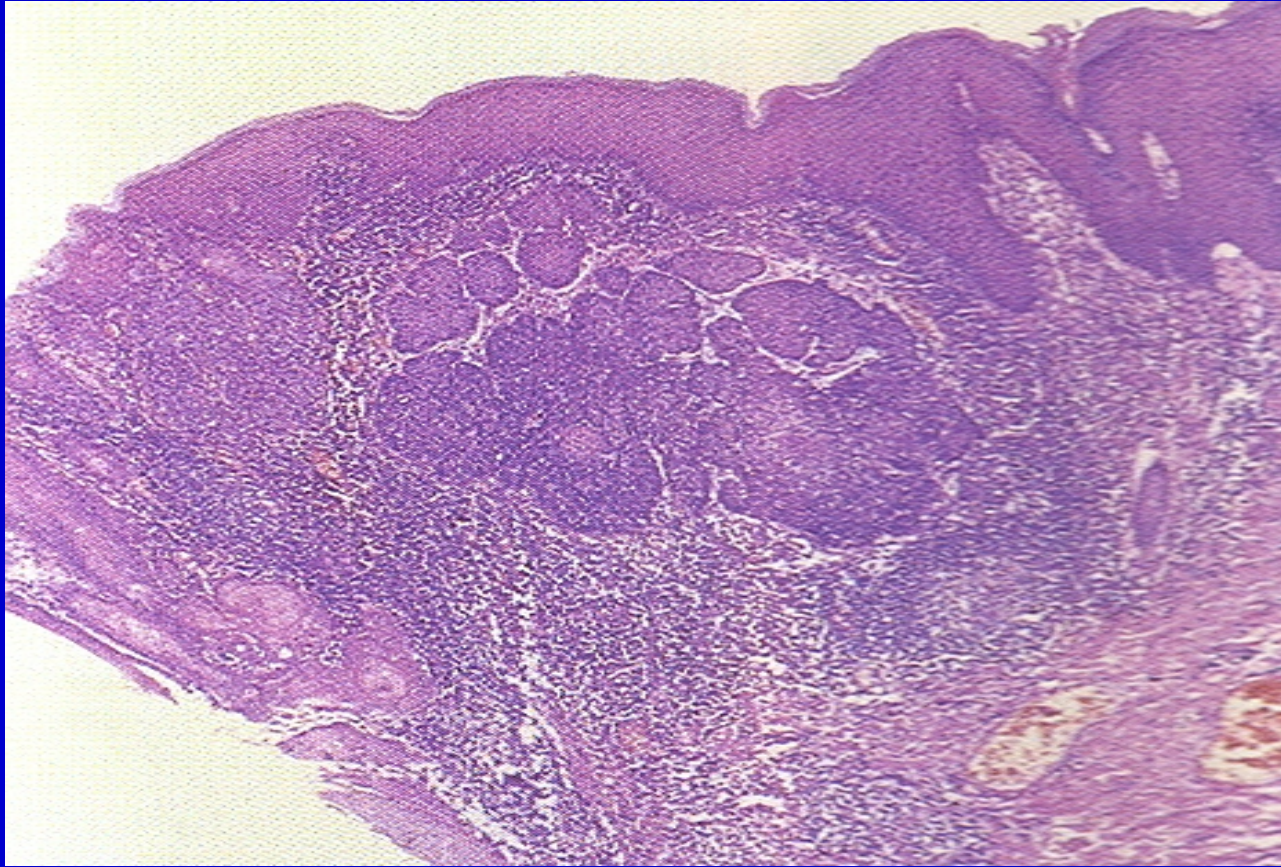












Rely only on Histology !