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Prevalence of Cervical Dysplasia and Cervicitis in South India Comparing **Standard Cytology and Mobile Colposcopy**

Mallika Samuel*

*M.G.R. University, Tamil Nadu, India.

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ABSTRACT

Objective: To compare visual screening for cervical cancer using a mobile connected colposcope to standard of care cytology.

Methods: This was a multicentric cross sectional study where 597 patients were recruited at the six centers in southern India. Each patient first underwent screening through standard of care cytology, followed by visual screening using a mobile colposcope. Patients testing positive in either of these tests underwent colposcopy with biopsy, following the standard of care approach. Clinical decisions made by the provider were recorded on a decision support job aid integrated into the mobile colposcope application. Information on patient socioeconomic status was also recorded.

Results: In five of six sites, the rates of dysplasia detected visually (10.3%) was higher than using cytology (3.3%). However, cervicitis was found to be much more common, detected in 33% of the patients using EVA and 37% using cytology. Dysplasia was more common among low-income patients and less among middle income patients, whereas cervicitis common among middle income patients, and less common in low- and high-income patients.

Conclusion: Cervicitis is much more common in southern India than dysplasia among women who access private healthcare. Socioeconomically, dysplasia is much more prevalent in low-income patients, while cervicitis is prevalent in middle income patients. Because cervicitis infections make it difficult to visually identify dysplasia, methods should be devised to call back patients for rescreening to ensure dysplasia cases are not missed.

Keywords: Cervical dysplasia, Cervicitis, Mobile colposcope

Corresponding author: Mallika Samuel, Consultant Obstetrician & Gynecologist, M.G.R. University, Tamil Nadu, India. E-mail: mallikamsamuel@gmail.com

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