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Imaging of Condylomata by Endoscopy with Narrow Band Image

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Genital condylomata are caused by infection with low-risk (non-oncogenic) types of Human Papilloma Virus (HPV). Condylomata can be detected on the external genitalia, vagina or cervix and are frequently multiple.

Condylomata are mutiple, exophytic lesions, which are found in the vagina or on the vulva. Depending on their size, they may be obvious to the naked eye. They present as soft pink or white vascular growths with multiple, fine, finger-like projections on the surface **(Image 1)**.

Condylomata have a typical appearance, with a vascular papilliferous or frond-like surface, each element of which contains a central capillary **(Image 2)**.

Often, the surface of the lesion may be densely hyperplastic.

Occasionally, the surface of a condyloma may have a whorled, heaped-up appearance with a brain-like texture, known as an encephaloid pattern **(Image 3)**.

These lesions may be located inside the TZ but are more often found out-side the TZ **(Image 4)**.

After the application of acetic acid, there is blanching of the surface, with acetowhite change persisting for some time **(Image 5)**.

A condyloma at the SCJ can sometimes be confused with a prominent area of columnar epithelial villi. Both tend to be acetowhite, but a condyloma is whiter.

Koilocytotic cells exhibit vacuolization of the cytoplasm with condensation of the chromatin and slight atypia of the nuclei **(Image 6)**.

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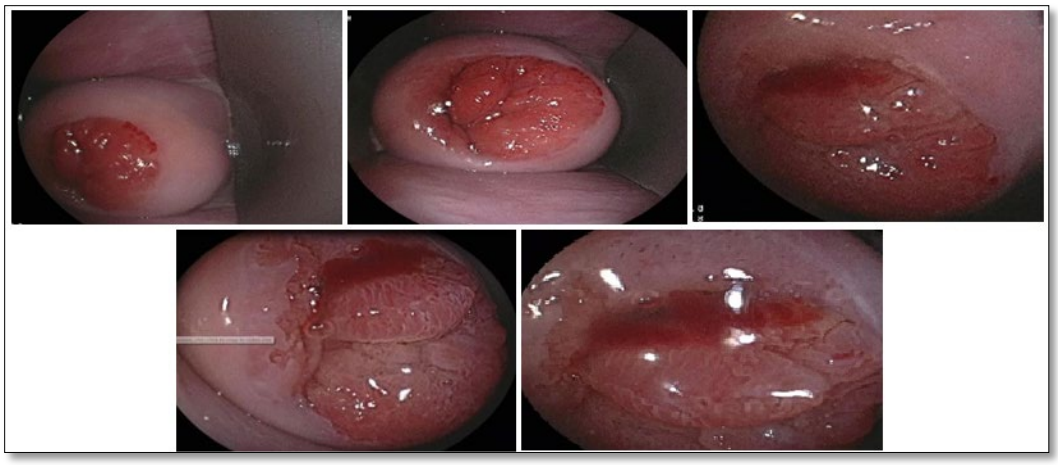

Image 1

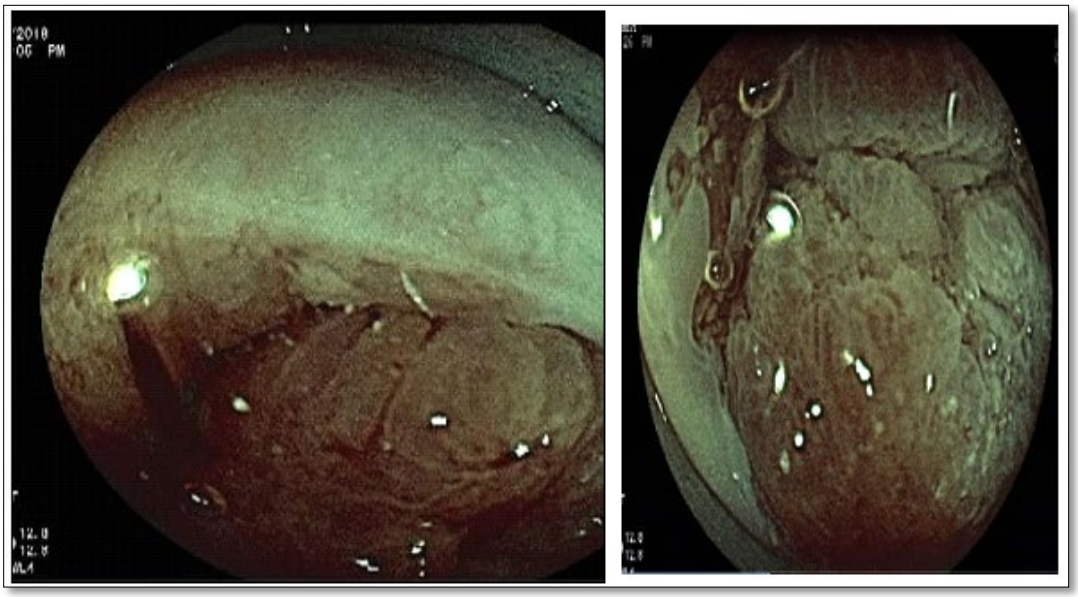

Image 2

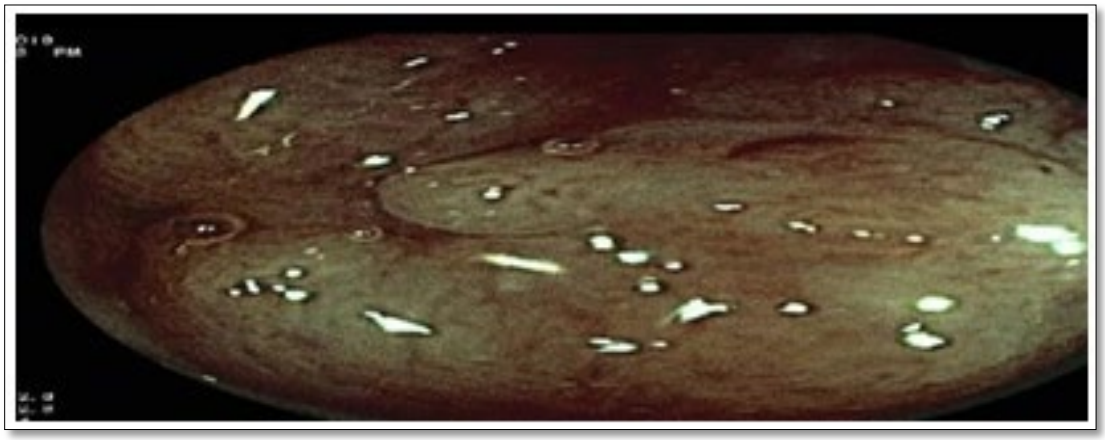

Image 3

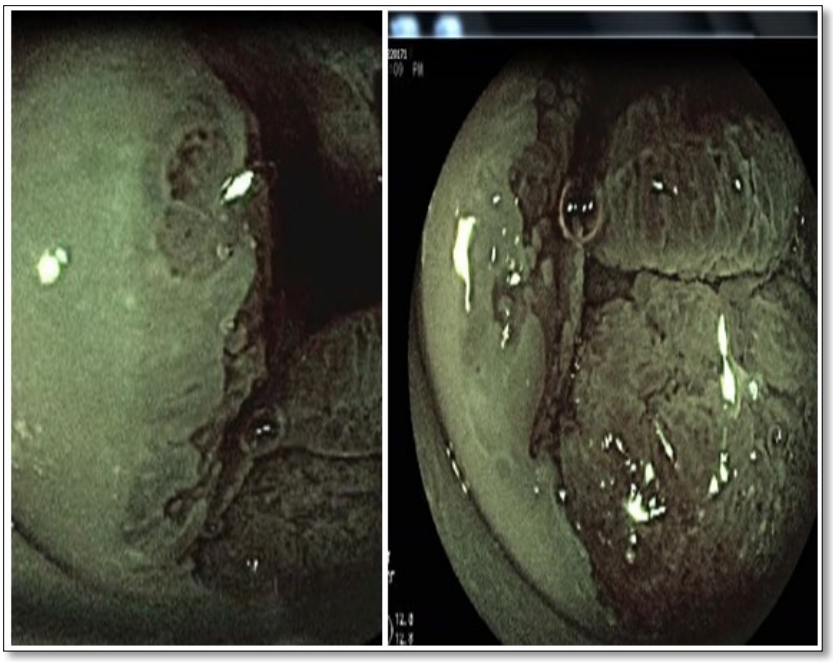

Image 4

Image 5

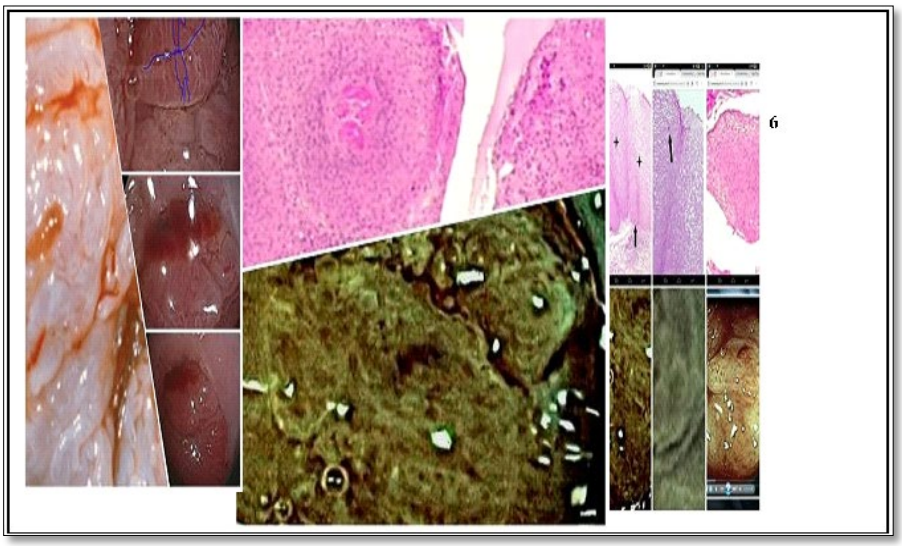

Image 6