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Carcinoma of the cervix & hysterectomy in a low resource setting (Preliminary report)

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Background: Carcinoma of the cervix has remained a scourge in the developing nations, where it accounts for more than 70% of our gynecological cancers. It is the leading cause of cancer death in women, with 80% of cases presenting late. The paradox is that it's a cancer with well documented natural history, aetiology, treatment and prevention; but yet carries such a high morbidity & mortality. Prevailing poverty, illiteracy, and inadequate radiotherapy machine with long waiting time and poor follow up with consequent relapse were some of the hindrances.

Objective: To review hysterectomy done for carcinoma of the cervix.

Methodology: All histologically diagnosed carcinoma of the cervix stage I before or after chemoradiation therapy were recruited. Assessment were based on clinical pelvic examination and the use of a CT scan (MRI Not Visible)

Results: We had a total of 21 hysterectomies for carcinoma of the cervix under the study period. The mean age was 47 years. 91% of the cases were squamous cell carcinoma and 9% were adenocarcinomas.

Conclusion: In our settings, hysterectomy after chemoradiation therapy and early cancer of the cervix is an option to be considered.

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