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Human Papillomavirus and cervical neoplasia in HIV positive women: A non systematic review

Nweke I G¹, Nwadike V U¹, Kalu I E¹ and Ojide K C²
¹Federal Medical Center Owerri, Nigeria
²University of Uyo Teaching Hospital, Nigeria

Human papilloma-virus (HPV) infection confers 85-90% of the attributable risk for the development of cervical dysplasia. Worldwide and in particular in Nigeria, HPV 16 has been shown as the most prevalent HPV type and it also contributes more to the development of invasive squamous cell carcinoma. Studies have also shown that the prevalence of HPV is higher among HIV-positive women than among HIV-negative women of all age groups. HIV-positive women also have a higher incidence of squamous intra-epithelial lesion (SIL) and invasive cervical cancer. Progression to cervical cancer is also more rapid amongst these patients and often refractory to treatment with high incidence rates. Current screening recommendations for HIV-positive women are accessible and developed in rich countries. The best strategy for screening infected women in poorer nations where human immunodeficiency virus (HIV) is rampant remains uncertain and challenging.

Abstract

Nweke Ikechukwu G is a Pathologist with special interest in Gynepathology. He completed his residency's training in Anatomic and Molecular Pathology from the Lagos University Teaching Hospital, Lagos, Nigeria. He is currently working as a Pathologist with the Federal Medical Centre Owerri, Nigeria and has seven publications in reputable journals.

ikgold4@yahoo.com

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