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Utility of 2014 Bethesda classification of Cervical Lesions

Manasa Gaddam and Nandini N M

JSS Medical College, India.

Abstract

Cervical cancer is the second commonest cancer in India. Early detection of cervical cancer has significant improvement on patient survival, morbidity and decreases economic burden on treatment cost. Invasive cancer of the cervix has been considered preventable because it has a long pre-invasive state, cervical cytology screening programmes are available and the treatment of pre-invasive lesions is effective. Cervical screening programmes aims to detect women who have an epithelial abnormality. Screening for cervical cancer with conventional Pap smear (CPS) is still widely used investigation in low resource settings like India. It has been the mainstay for screening which has led to substantial reduction in cancer incidence. The Bethesda System of Reporting Cervical Cytology- 2014 (TBS) has been widely accepted and used as it brings uniformity for reporting. CPS are required not only for the diagnosis and management of the malignant lesions but it is also helpful in identifying the infectious etiologies and treatment in developing countries. Aims of TBS were to provide effective communication from the laboratory to the clinical provider; facilitate cytologic-histologic correlation; facilitate research into the epidemiology, pathology of cervical disease; and provide reproducible and reliable data for national and international statistical analysis comparisons.

Our study aims at categorization of cervical lesions according to TBS in a low to mid income country (LMIC) like India and to eliminate the diagnostic dilemma.

Biography

Manasa Gaddam has completed his MBBS in M.S.Ramaiah medical college, bangalore, India. And now pursuing 2nd year pathology residency in JSS medical college, a constituent of JSS AHER, mysuru, India.



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