

Condyloma acuminatum of the uterine cervix

A 23-year-old woman gave a history of intermittent post-coital vaginal spotting, and a Papanicolaou smear indicated the presence of a low-grade squamous intraepithelial lesion and cellular changes due to the cytopathic effect of human papillomavirus (HPV) infection. Colposcopic examination showed a circumferential exophytic lesion (Fig 1). Multiple biopsies were performed; histological examination showed prominent koilocytes and confirmed that the lesion was due to HPV infection (Fig 2).

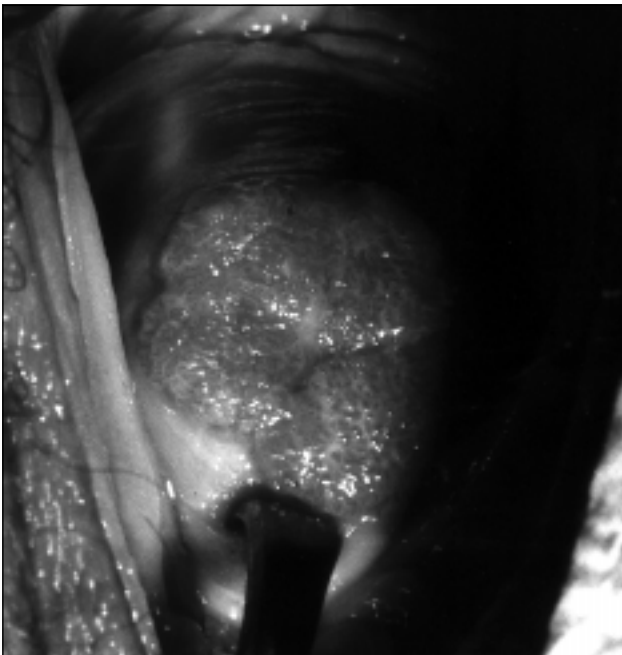


Fig 1. Colposcopic examination revealed a circumferential exophytic lesion

Lesions due to HPV infection are often small and difficult to detect without the use of colposcopy. Larger lesions, such as the one found in this patient, can be seen easily and can be treated by using diathermy or laser, or by surgical excision. Small lesions may not require treatment, as many can spontaneously regress. The annual global number of new cases of sexually transmitted HPV infections has been esti-

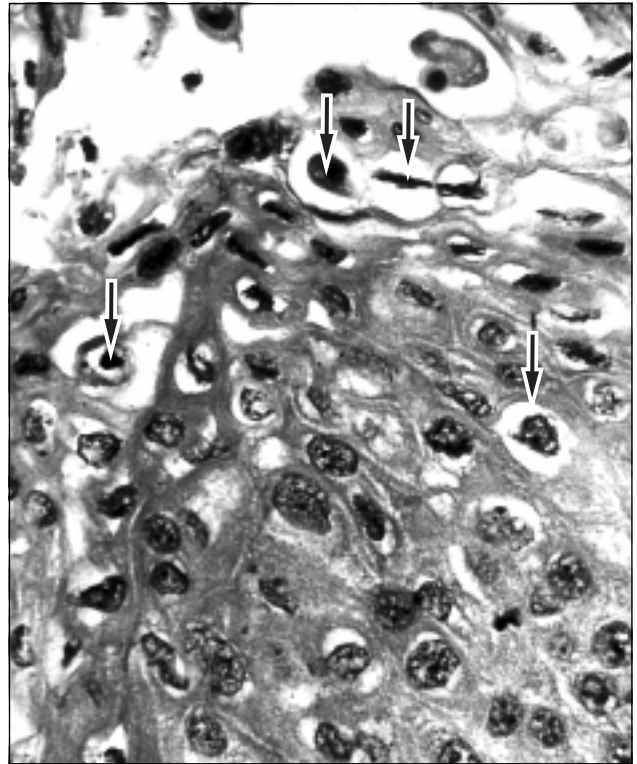


Fig 2. Photomicrograph of biopsy specimen from uterine cervix

Note the prominence of koilocytes (arrows) [H&E, x400]

ated to be 30 million, making HPV infection one of the most common human infections.¹

AR Chang, MD, FHKAM (Pathology)
Department of Anatomical and Cellular Pathology
The Chinese University of Hong Kong
Prince of Wales Hospital
Shatin
Hong Kong

Reference

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