

Egyptian Journal of Medical Research

Print ISSN: 2682-4396 / Online ISSN: 2682-440X



Cervical Cytology Findings and Microorganisms Among Sudanese Women at Soba Teaching Hospital: Implications for Screening and Awareness

Mouna Mahmoud Abdulrahman Medhat¹; Mohamed Elfatih A. A. Abdelwadoud²; Rami Yousef³; Sulma Ibrahim Abdalwahab Ibrahim ⁴; Mutaz Mohamed Ibrahim Ali⁵; Elsadig Ahmed Adam Mohammed⁶; Amira Burhan⁷; Nazik Elmalaika Obaid Seid Ahmed Husain⁸; Hind Elrayah Osman⁹

¹Department of Histopathology and Cytology, Faculty of Medical Laboratory Sciences, University of Medical Sciences and Technology, Khartoum, Sudan.

²Department of Histopathology and Cytology, Faculty of Medical Laboratory Sciences, Wad Medani University of Sciences and Technology.

³Napata College, SQ.10 building 151, Alreyadh, Khartoum, Sudan

⁴Cervical Cancer Prevention & Research (CCPR) Unit, Department of Obstetrics & Gynaecology, Soba University Hospital, Khartoum Postal Code 13314, Sudan.

⁵¹Department of Histopathology and Cytology, Faculty of Medical Laboratory Sciences, University of Medical Sciences and Technology, Khartoum, Sudan.

⁶Department of Pathology, Faculty of Medicine, The National Ribat University, Khartoum, Sudan.

⁷Department of Obstetrics & Gynaecology, Faculty of Medicine, University of Khartoum, Khartoum Postal Code 11115, Sudan.

⁸Department of Pathology, Faculty of Medicine and Health Sciences, Omdurman Islamic University, PO Box 382, 14415 Omdurman, Sudan

⁹Department of Preventive Medicine and Public Health, College of Veterinary Medicine, Sudan University for Science and Technology, Khartoum, Sudan.

Article Info

Corresponding Author:

Hind Elrayah Osman hmmhmm12345@yahoo.com

Keywords

Cervical cancer Pap smear Cytomorphological patterns Sudanese females Cervical cancer screening **Papillomavirus** Human (HPV); Bethesda System Microorganisms in cervical smears Precancerous lesions Cervical cancer awareness.

Abstract

Background: Cervical cancer is the second most common cancer in Sudanese women after breast cancer. Pap smear screening is an effective diagnostic procedure for early detection. This study aimed to identify cytomorphological patterns in Pap smears from Sudanese females attending the Cervical Cancer Prevention and Research Unit (CCPRU) at Soba Teaching Hospital (STH) in Khartoum, Sudan. **Methods:** This study was a descriptive, cross-sectional, laboratory-based study conducted at CCPRU, STH, Khartoum, Sudan, from December 2020 to June 2021. The study included 118 Sudanese females, age and reproductive status varied. Pap smears were processed using the Pap stain method (Bancroft, 1990). Demographic and clinical data were collected from patient records. Cytological findings were reported based on the Bethesda System 2013. For statistical analysis, SPSS version 23.0 was used. Results: The majority (71.2%) of participants were aged 15-45 years. Cytological diagnoses included NILM (69.5%), HSIL (13.5%), LSIL (12.7%), ASCUS (2.5%), SCC (0.9%), and adenocarcinoma (0.9%). Microorganisms included bacterial vaginosis (21 cases), Actinomyces (3 cases), cellular changes consistent with HPV (14 cases), candida (7 cases), cellular changes consistent with HSV (6 cases) and Trichomonas vaginalis (1 case). The association between cytological findings with the age group and the clinical symptoms proved to be statistically insignificant, while it is significant when related to the cytological characteristics according to the Bethesda system. Conclusion: Cervical cytology is vital for detecting precancerous and cancerous lesions in Sudanese women. The majority of participants were aged 15-45 years, and HSIL was the most common

lesion. Establishing regular screening programs and raising awareness about cervical cancer are recommended

1. Introduction:

Cancer is the leading cause of death worldwide, with cervical cancer ranking as the second most common cancer among women (Husain et al., 2022). Globally, nearly 500,000 women are diagnosed with cervical cancer annually, resulting in over 300,000 deaths (Waggoner, 2003). About 88% of the cases are in developing countries (WHO, 2008). Cervical cancer accounts for over 370,000 new cases yearly, nearly 10% of all cancers (Hassan and Khir Elseed, 2009). Racial and ethnic disparities in cervical cancer incidence and survival have been documented (Spencer et al., 2023; Cohen et al., 2023), with Black women in the US facing a 30% higher risk of developing cervical cancer and a 60% higher risk of dying from cervical cancer compared to non-Hispanic white women (Spencer et al., 2023). In Sudan, cervical cancer ranks as the second most common cancer among women (Husain et al., 2011). Human Papillomavirus (HPV), particularly high-risk subtypes, stand as the primary cause of cervical cancer (Waggoner, 2003). This cancer affects women across various groups, with a prevalence of approximately 20% among sexually active young women (Khan et al., 2007). Pap

smear screening is a valuable diagnostic tool for mitigating the oncogenic potential of HPV (Khan *et al.*, 2007).

This study seeks to explore the cytomorphological patterns of cervical smears and their association with microorganisms in Sudanese females attending the Cervical Cancer Prevention Research Unit (CCPRU) at Soba Teaching Hospital (STH) in Khartoum State, Sudan.

2. Methods:

A descriptive cross-sectional laboratorybased study was conducted at CCPRU, STH, Khartoum State, Sudan, which provides maternity health services and cervical cancer screening. The study included 118 Sudanese females, spanning from December 2020 to June 2021. Participants were married and fertile females of varying ages who consented to participate, while infertile or unmarried individuals were excluded, along with those who declined participation or exhibited inadequate information or specimen inadequacy.

Cervical smears were processed using the Pap stain method (Bancroft, 1990), and demographic and clinical data, including age, clinical symptoms, and last menstrual cycle, were collected from patient history records at Soba Teaching Hospital. Smears were microscopically examined, and findings were reported according to the Bethesda System 2013. Data analysis was performed using IBM SPSS Statistics version 23.0, employing descriptive and inferential statistics, including Fisher's exact test.

Exclusion criteria: infertile women were excluded.

3. Results:

A descriptive cross-sectional study was conducted was conducted on 118 Sudanese female patients who attended the clinic for follow-up or screening in Soba Teaching Hospital, Khartoum State, Sudan, A questionnaire was designed to collect data concerning demographic and clinical information and other data required in the study. Table 1 shows the age distribution of the participants where 71.2 were at the range of 15-45 years and the rest were more than 45 years old. In 66.1% of the participants, no clinical symptom was detected, while bleeding, irregular cycles, polyps, and vaginal discharge were the only recorded symptoms or lesions in the rest of the participants (Table 2). Cytological characteristics detected were normal

cellular elements, non-neoplastic findings, microorganisms and their cellular changes, mild dysplasia, and moderate to severe dysplasia (Table 3. Figure 1). Microorganisms detected were Actinomyces spp., Candida spp. (Figure 2) Trichomonas vaginalis. **Bacterial** infection, cellular changes consistent with HPV and cellular changes consistent with HSV were also detected (Table 4). Table 5 shows diagnosis according to the Bethesda system; the participants were diagnosed with negative for inta-epithelial lesion or malignancy NILM (69.5%), high-grade squamous intra-epithelial lesion HSIL (13.5%),low-grade squamous epithelial lesion LSIL (12.7%), atypical cells of undetermined squamous significance ASCUS (2.5%), squamous cell SCC (0.9%)carcinoma and Adenocarcinoma (0.9%). Figure 3 shows SCC. Adenocarcinoma is shown in Figures 4 and 5, while Figure 6 and Figure 7 show HSIL and LSIL, respectively. Table 6, Table 7 and Table 8 show the association between cytological findings with age group, clinical symptoms which proved to be insignificant, and with the characteristics according to Bethesda system, which found to be significant, respectively.

Table 1: Age distribution among the study participants attending CCPRU, Soba Teaching Hospital, Sudan, during the study period.

Variable	Frequency	%
15-45	84	71.2
> 45	34	28.8
Total	118	100%

Table 2: Clinical symptoms among Sudanese fertile Women attending CCPRU, Soba Teaching Hospital, Sudan, during the study period.

Variable	Frequency	%
No symptoms	78	66.1
Bleeding	19	16.1
Irregular cycle	6	05.1
Polyps	3	02.5
Vaginal discharge	12	10.2
Total	118	100%

Table 3: Cytological findings of Pap smears among Sudanese fertile women attending CCPRU, Soba Teaching Hospital.

Variable	Frequency	%
Normal cellular elements	34	28.8
Non neoplastic findings	6	5.1
Microorganisms and/or their cellular changes	46	39
Mild dysplasia	17	14.4
Moderate to severe dysplasia	15	12.7
Total	118	100.0

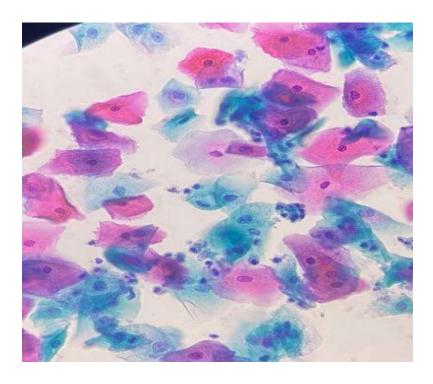


Fig. 1. Normal epithelial cells from cervix of Sudanese fertile woman: Pap smear (40X)

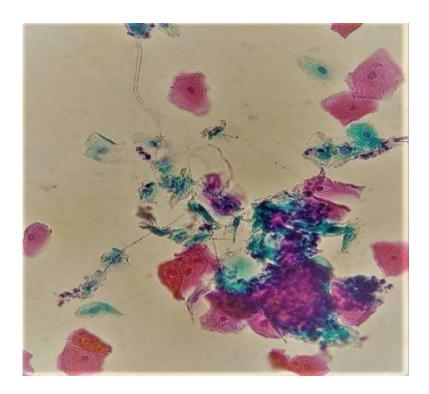


Fig. 2. Presence of Candida in cervical smears of Sudanese fertile woman: Pap smear (40X)

Table 4: Microorganisms detected in cytological smears among Sudanese fertile women attending CCPRU, Soba Teaching Hospital.

Variable	Frequency	%
Actinomyces spp.	3	5.8
Candida spp.	7	13.5
Trichomonas vaginalis	1	01.9
Bacterial infection	21	40.3
Cellular changes consistent with HPV	14	26.9
Cellular changes consistent with HSV	6	11.6
Total	52	100%

Table 5: Diagnosis according to Bethesda system among Sudanese fertile women attending CCPRU, Soba Teaching Hospital.

Variable	Frequency	%
NILM	82	69.5
HSIL	16	13.5
LSIL	15	12.7
ASCUS	3	02.5
SCC	1	0.9
Adenocarcinoma	1	0.9
Total	118	100%

NILM: Negative for Inta-epithelial Lesion or Malignancy, HSIL: High-Grade Squamous Intraepithelial Lesion, LSIL: Low-Grade Squamous Intraepithelial Lesion, ASCUS: Atypical Squamous Cells of Undetermined Significance, SCC: Squamous Cell Carcinoma.

Table 6: Association between cytological findings according to Bethesda system with age groups of Sudanese fertile women attending CCPRU, Soba Teaching Hospital.

Varial	ble	C	Cytological findings according to Bethesda system						
	NILM LSIL HSIL ASCUS Adenocarcinoma SCC								
A go group	15-45	56	11	12	3	1	1	84	
Age group	> 45	26	4	4	0	0	0	34	0.909
Tota	ıl	82	15	16	3	1	1	118	

Table 7: Association between cytological findings according to Bethesda system with clinical symptoms among Sudanese fertile women attending CCPRU, Soba Teaching Hospital.

Variable Cytological findings according to Bethesda system						Total	P value		
		NILM	LSIL	HSIL	ASCUS	Adeno	SCC		
	No symptoms	54	11	9	3	0	1	78	
	Bleeding	14	0	4	0	1	0	19	
Clinical symptoms	Irregular cycle	4	0	2	0	0	0	6	0.233
	Polyps	2	0	1	0	0	0	3	
	Vaginal discharge	8	4	0	0	0	0	12	
Total		82	15	16	3	1	1	118	

Table 8: Association between cytological characteristics and cytological findings according to Bethesda system among Sudanese fertile women attending CCPRU, Soba Teaching Hospital.

	Variable	Cytolog	Cytological findings according to Bethesda system						P value
		NILM	LSIL	HSIL	ASCUS	Adeno	SCC		
	Negative	34	0	0	0	0	0	34	
	Non-specific inflammation	6	0	0	0	0	0	6	
	Microorganism	42	1	2	0	1	0	46	0.000
Cytologi cal characte	Mild dysplasia	0	14	0	3	0	0	17	
ristics	Moderate to severe dysplasia	0	0	14	0	0	1	15	
Total		82	15	16	3	1	1	118	

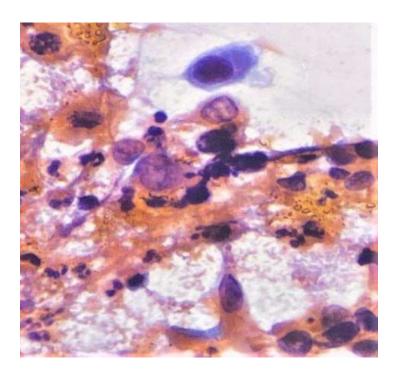


Figure 3. Squamous cell carcinoma from cervix of Sudanese fertile woman: Pap smear (40X)



Fig. 4. Adenocarcinoma from cervix of Sudanese fertile woman: Pap smear (40X)

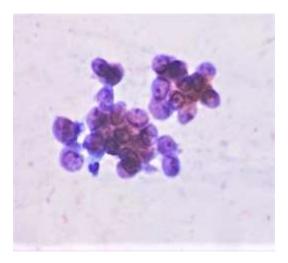


Fig. 5. Adenocarcinoma from cervix of Sudanese fertile woman: Pap smear (40X)

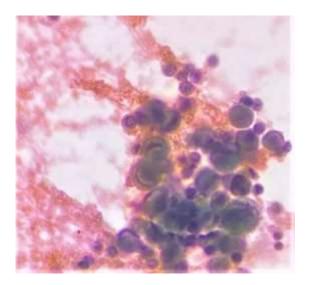


Fig. 6. HSIL from cervix of Sudanese fertile woman: Pap smear (40X)

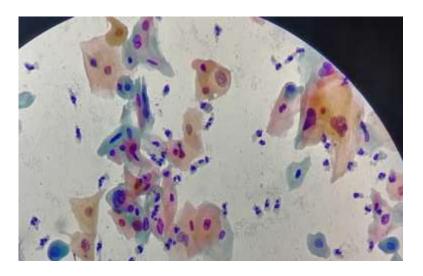


Figure 7. LSIL from cervix of fertile Sudanese fertile woman: Pap smear (40X)

4. Discussion"

This descriptive cross-sectional laboratory-based study was conducted in Soba Teaching Hospital, Khartoum State, Sudan. This study was conducted on 118 Sudanese fertile women patients who attended the clinic for follow-up or screening.

Cervical cancer is a significant health concern for Sudanese women, with the majority of participants in this study falling within the age group of 15-45 years. This age distribution aligns with research indicating a higher prevalence of cervical cancer and precancerous lesions among younger age groups (Sachan et al., 2018). HPV, a leading cause of cervical cancer, was detected in 26.9% of participant samples, highlighting the importance of HPV screening alongside cytological examination for more accurate detection (Elhasan et al., 2019). Accurate prevalence of HPV requires molecular detection using PCR, as cervical cancer screening based on cytology may have limited accuracy (Sørbye et al., 2017).

Similar to what reported by (Moneira Mansour et al., 2013), microorganism associations, including Actinomyces spp., Candida spp., and Trichomonas vaginalis, were observed in this study, underscoring the need for comprehensive cervical health assessments.

Squamous cell carcinoma (SCC) is the most common malignant tumour of the cervix, comprising 70-80% of cervical malignancies. Most SCC cases occur in less developed countries without effective screening systems (Waggoner, 2003). Cervical Adenocarcinoma (ADC) has been increasing in its prevalence worldwide. It comprises nearly 20-25% of all cervical malignancies in developed countries. (Takeuchi, 2016). The low percentages of SCC and adenocarcinoma in this study may be attributed to the age of participants, as cervical cancer predominantly affects older groups (Husain et al., 2011). Nevertheless, cervical cytology remains a crucial tool for detecting precancerous and cancerous lesions, especially in resourceconstrained settings with limited access to more advanced diagnostic methods.

Cytological examination of Pap smear in females using Pap stain can be instrumental in sensitivity and specificity. Moreover, it carries more advantages regarding screening and detecting precancerous lesions, in which the treatment is more accessible, less expensive and affordable. Given the limited availability of regular cervical screening programs in Sudan, there is a pressing need to establish and promote awareness about cervical cancer screening. Health education campaigns focusing on cervical cancer and sexually transmitted diseases are essential to improve screening rates among Sudanese women, particularly given the reported lack of accurate knowledge about these topics (Almobarak *et al.*, 2016).

The predominant clinical symptoms were bleeding (16.1%) followed by vaginal (10.2%),66.1% discharge were asymptomatic. These findings disagree with Michelle et al. (2005), who found that vaginal discharge was the most common complaint, occurring in 36.96% of the women and Sachan et al. (2018), who reported that vaginal discharge was the most common complaint, occurring in 36.96% of the women. An irregular menstrual cycle was the complaint of 12.78% and abdominal pain of 25.63% of while only 15.15% women, were asymptomatic (Sachan et al., 2018).

In the current study, among the 118 study participants, 82 (69.5%) of the cytological diagnosis of Pap smears according to the Bethesda system were NILM, followed by 16 (13.6%) HSIL, 15 (12.7%) LSIL, 3 (2.5%) ASCUS, 1 (0.8%) adenocarcinoma and 1 (0.8%) SCC. These findings agree with the findings that have been found in the study made by Sachan et al. (2018) in which atypical squamous cells undetermined significance (ASCUS), lowgrade squamous intraepithelial lesion (LSIL), and high-grade squamous intraepithelial lesion (HSIL) were detected.

Microorganisms and cellular changes were detected in 39% of the smears of the Sudanese women who participated in this study. Almost a similar percentage was detected in the study of Sachan *et al.* (2018).

In this study, the overall abnormal cytology was 31%, higher than that Ali *et al.* (2019) revealed in a study made in Addis Ababa, Ethiopia, in which the overall HPV burden and abnormal cytology were 13.1%. In our study, HSIL was the most prevailing finding of the abnormal cytology, followed by LSIL, ASUS and Adenocarcinoma. Whereas in Ali et al. (2019), LSIL was the highest, followed by ASCUS and HSILs.

No significant association between cytological findings, neither with clinical symptoms nor with age group, is detected among the Sudanese females who participated in this study. This finding contradicts Ali *et al.* (2019), who found an association between age and cervical cytology abnormalities.

Cervical cytology is playing an important preliminary role in detecting precancerous and cancerous lesions. In Sudan, the Federal Ministry of Health has not implemented cervical cancer screening programs up to writing this document, although it has been prioritized in its WHO-supported National Cancer Control Program (Husain *et al.*, 2011). Establishing a regular screening of cervical cancer

highly program is recommended. of various Awareness diagnostic procedures, such as Pap smear screening, proves to be an effective way of eradicating the oncogenic potential of HPV (Khan et al., 2007), and as recommended by Hassan and Khir Elseed (2009), Pap testing intervention programs for less acculturated Sudanese women should be developed, implemented, and evaluated. This screening test should be evaluated considering the cost of the test compared to more accurate methods such as PCR for HPV. Health education about cervical cancer and sexually transmitted diseases is crucial to improve cervical screening for Sudanese women (Almobarak et al., 2016; Husain et al., 2022) that less than half of them expected to have accurate knowledge about cervical cancer screening, cervical cancer and HPV (Almobarak et al., 2016).

5. Conclusion:

In conclusion, this study sheds light on the critical issue of cervical cytology findings and the presence of microorganisms among Sudanese women attending Soba Teaching Hospital, Khartoum State. Cervical cancer remains a significant concern, particularly among women aged 15-45, aligning with global trends indicating a higher prevalence of cervical abnormalities in younger age groups.

This study highlights the cervical abnormalities among Sudanese women, emphasizing the significance of HPV screening alongside cytological examination. Microorganism associations underscore the need for comprehensive cervical health assessments. While SCC and adenocarcinoma percentages were relatively low due to the age of participants, cervical cytology remains vital in resourceconstrained settings. Promoting awareness and implementing screening programs are crucial steps to combat cervical cancer in Sudan, given the limited access to regular screening and the reported lack of accurate knowledge about cervical health and related diseases.

6. References:

Ali, K. E.; Mohammed I. A.; Difabachew, M. N.; Demeke, D. S.; Haile, T.; Ten Hove, R. J.; Kumssa, T. H., Woldu, Z. L.;, Haile, E. L.; Tullu, K. D. Burden and genotype distribution of highrisk Human Papillomavirus infection and cervical cytology abnormalities at selected obstetrics and gynecology clinics of Addis Ababa, Ethiopia. BMC cancer. 2019 Dec;19(1):1-9.

Almobarak AO, Elbadawi AA, Elmadhoun WM, Elhoweris MH, Ahmed MH. Knowledge, Attitudes and Practices of Sudanese Women Regarding the Pap Smear Test and Cervical Cancer.

Asian Pacific Journal of Cancer Prevention [Internet]. 2016 Mar 7;17(2):625–30.

WHO (2008). World Health Organization. Cervical cancer, human papillomavirus (HPV) and HPV vaccines: Key points for policy-makers and health professionals. WHO Press, 2008. World Health Organization, 20 Avenue Appia, 1211 Geneva 27, Switzerland.

Bancroft, J. D.; Stevens, A. (1990). Theory and practice of histopathological techniques. 2nd ed. Churchill and Livingistone: London.

Cohen, M. C., Wentzensen, N.; Castle, P. E.; Schiffman, M.; Zuna, R.; rend, R.; Clarke, M. A. (2023). Racial and ethnic disparities in cervical cancer incidence, survival and mortality by histologic subtypes. Journal Of Clinical Oncology, 41(5): 1059-1068.

Elhasan LM, Bansal D, Osman OF, Enan K, Abd Farag EA. Prevalence of human papillomavirus type 16 in Sudanese women diagnosed with cervical carcinoma. Journal of cancer research and therapeutics. 2019 Oct 1;15(6):1316.

Hassan FM, KhirElseed M. Cervical cancer screening among Sudanese women. The Gulf journal of oncology. 2009 Jul 1(6):28-34.

Hause, Z. H. (1996). Papillomavirus infections – a major cause of human cancers. Biochim Biophys Acta 1996, 1288(2):F55-78.

Husain NE, Burhan A, Ahmed IAI, Mohammed SI, Hammad N. (2022). Women's cancers in Sudan with a focus on cervical cancer: turmoil, geopolitics and opportunities. *Ecancer* 16 1433. doi: 10.3332/ecancer.

Husain, N.; Helali, T.; M Domi, M.; Bedri, S. (2011). Cervical cancer in women diagnosed at the National Health Laboratory, Sudan: A call for screening. Sudan JMS, 6(3): 183-189.

Khan MJ, Castle PE, Lorincz AT, Wacholder S, Sherman M, Scott DR, Rush BB, Glass AG, Schiffman M. The elevated 10-year risk of cervical precancer and cancer in women with human papillomavirus (HPV) type 16 or 18 and the possible utility of type-specific HPV testing in clinical practice. Journal of the National cancer Institute. 2005 Jul 20;97(14):1072-9.

Khan S, Jaffer NN, Khan MN, Rai MA, Shafiq M, Ali A, Pervez S, Khan N, Aziz A, Ali SH: Human papillomavirus subtype 16 is common in Pakistaniwomen with cervical carcinoma. *Int J Infect Dis* 2007, 11: 313-317.

10.1016/j.ijid.2006.06.007.

Michelle J. Khan, Philip E. Castle, Attila T. Lorincz, Sholom Wacholder, Mark Sherman, David R. Scott, Brenda B. Rush, Andrew G. Glass, Mark Schiffman, The Elevated 10-Year Risk of Cervical Precancer and Cancer in Women

With Human Papillomavirus (HPV) Type 16 or 18 and the Possible Utility of Type-Specific HPV Testing in Clinical Practice, JNCI: Journal of the National Cancer Institute, Volume 97, Issue 14, 20 July 2005, Pages 1072–1079.

Moneira Mansour, A.; Salih, M. M.; Shomo, A. E; Amel Bakheit, O. Elhassan M. M. (2013). Screening for Cervical Cancer and Its Association with Human Papilloma Virus (HPV) among Sudanese Women. Egypt. Acad. J. Biolog. Sci., 5(1): 101-106.

Sachan PL, Singh M, Patel ML, Sachan

R. A study on cervical cancer screening using pap smear test and clinical correlation. Asia-Pacific journal of oncology nursing. 2018 Jul;5(3):337.

Sørbye SW, Suhrke P, Revå BW, Berland J, Maurseth RJ, Al-Shibli K. Accuracy of cervical cytology: comparison of diagnoses of 100 Pap smears read by four pathologists at three hospitals in Norway. BMC clinical pathology. 2017 Dec;17(1):1-6.

Spencer J. C.; Kim, J.J.; Feldman, S. J.; Kobrin, S. C.; Skinner, C. S.; Wang, L.; McCarthy, M.; Atlas, S. J.; Pruitt, S. L.; Silver, M. I.; Haas, J. S. (2023). Racial and ethnic disparities in cervical cancer screening from three U.S. healthcare settings. American Journal of Preventive Medicine,

https://doi.org/10.1016/j.amepre.2023.04.0 16.

Takeuchi S. Biology and treatment of cervical adenocarcinoma. Chinese Journal of Cancer Research. 2016 Apr;28(2):254. **Waggoner SE**. Cervical cancer. The Lancet. 2003 Jun 28;361(9376):2217-25.