ASSOCIATIONS BETWEEN CHLAMYDIA TRACHOMATIS, HUMAN PAPILLOMAVIRUS INFECTION, AND CERVICAL INTRAEPITHELIAL NEOPLASIA IN WOMEN OF PELVIC INFLAMMATORY DISEASE

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Chlamydia trachomatis (CT) and Human papillomavirus (HPV) are the two most common pathogens with sexually transmitted infection and associated with abnormal cervical intraepithelial neoplasia (CIN). The aim of this study is to examine the correlation among Chlamydia trachomatis, HPV infection and cervical lesion progression with women of pelvic inflammatory disease.

The medical records of 400 patients who diagnosed pelvic inflammatory disease (PID) All of them underwent HPV DNA test, CT PCR (polymerase chain reaction) and liquid-based cytology test for cervical cancer screening simultaneously. Abnormal liquid-based cytology patients were pathologically proven to have CIN through biopsies.

Among 400 patients, thirty seven patients had positive infection of CT (9.3%) and both HPV and CT positive infected patients were 25 cases (6.3 %) in PID patients. Significantly higher positive rates for CT was pre sent in those aged 30 years. The positive rate for CT infection was significantly higher in the positive rate for HPV infection. Abnormal cervical cytology became more significantly increased with positive HPV infection. The positive rate for CT infection was significantly higher in all of the groups with abnormal cervical cytology except HSIL. Cervical histologic results were associated with positive HPV infection. However, the impact of CT infection seems not to associate with the progression of CIN (p=0.594).

This study suggests that CT infection is associated with both HPV infection and abnormal cervical cytology. Gynecologists should be careful about active screening and treatment of CT infection is suggested in young females to decrease in PID and pre-cancer intraepithelial lesions.