

子宫颈液基细胞学诊断女性生殖系统腺癌的准确性分析

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Analysis of Diagnostic Accuracy for Adenocarcinoma of Female Genital System by Cervical Liquid-based Cyto

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摘要 目的揭示子宫颈液基细胞学(LBC)诊断女性生殖系统腺癌的准确性。方法选取中国医学科学院肿瘤医院2001~2005年组织学诊断的女性生殖系统腺癌与其LBC诊断对照,同时选取同期宫颈LBC诊断的腺癌细胞(AdcaC)、可疑腺癌细胞(Sus-AdcaC)和非典型腺细胞(AGC)与其组织学诊断对照,以LBC诊断的Sus-AdcaC为切入点,以组织学诊断为金标准,统计学分析数据。结果共259例纳入分析。子宫颈LBC诊断女性生殖系统腺癌的敏感性为42.6%,特异性为91.5%,阳性预测值和阴性预测值分别为93.0%和37.6%;对子宫颈腺癌、子宫内膜腺癌和卵巢输卵管腺癌的敏感性分别为65.6%、38.9%和36.1%,前者显著高于后两者(P=0.016)。子宫颈LBC诊断生殖系统腺癌的敏感性与其临床病理分期相关(P=0.001),随临床病理分期的增加诊断敏感性也有增加的趋势。结论子宫颈LBC诊断有助于提高对女性生殖系统腺癌诊断的敏感性,但有一定局限性。

关键词: 子宫颈液基细胞学 女性生殖系统 腺癌

Abstract: Objective To explore the diagnostic accuracy for adenocarcinoma of female genital system by cervical liquid-based cytology (LBC). Methods The cases with adenocarcinoma of female genital system were selected to find their cervical LBC diagnoses, meanwhile, the cases with the diagnoses of adenocarcinoma cells (AdcaC), suspicious adenocarcinoma cells (Sus-AdcaC) and atypical glandular cells (AGC) by cervical LBC were selected to find their histological diagnoses. These cases were all from Cancer Hospital Chinese Academy of Medical Sciences during 2001 to 2005. The diagnoses of histology were taken as golden standard and Sus-AdcaC was taken as a cut point of LBC diagnoses to analyze the accuracy of LBC diagnoses. The data were analyzed by SPSS 13.0 software. Results A total of 259 cases was selected. The sensitivity and specificity of cervical LBC diagnoses for adenocarcinoma of the female genital system were 42.6% and 91.5%, respectively; the positive prognostic value and negative prognostic value were 93.0% and 37.6%, respectively. The sensitivities of cervical LBC diagnoses for endocervical adenocarcinoma, endometrial adenocarcinoma and ovarian / fallopian tubal adenocarcinoma were 65.6%, 38.9% and 36.1%, respectively. The sensitivity for endocervical adenocarcinoma was higher than that for endometrial adenocarcinoma and fallopian tubal adenocarcinoma significantly (P = 0.02). The diagnostic sensitivity of cervical LBC had a trend of increase as the increase of clinicopathological stages (P = 0.001). Conclusion Cervical LBC is helpful for increasing the diagnostic sensitivity of female genital system adenocarcinoma, but it has certain limitations.

Key words: Cervical LBC Female genital system Adenocarcinoma

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