### Atlas of some diagnostic challenges

### Professor Goran Grubišić

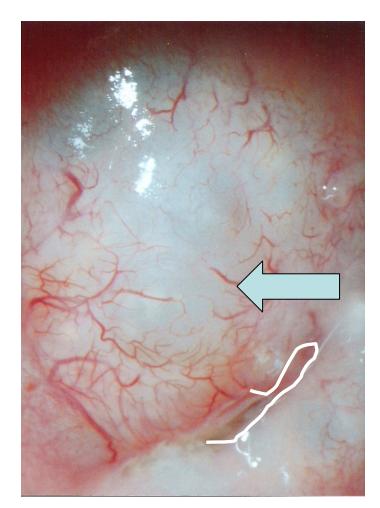
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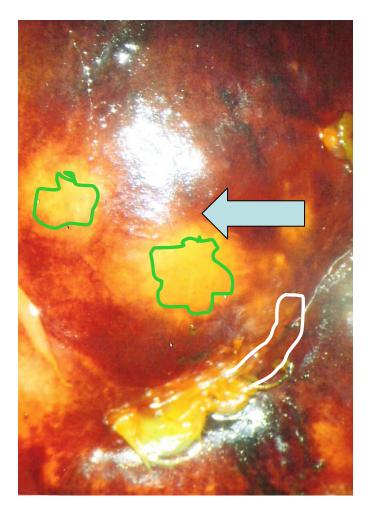
## At first sight an enlarged Nabothian cyst

 At first sight an enlarged Nabothian cyst of the anterior lip (*left arrow*), SCJ not fully visible (white scribble), the colposcopist asks for further examination.



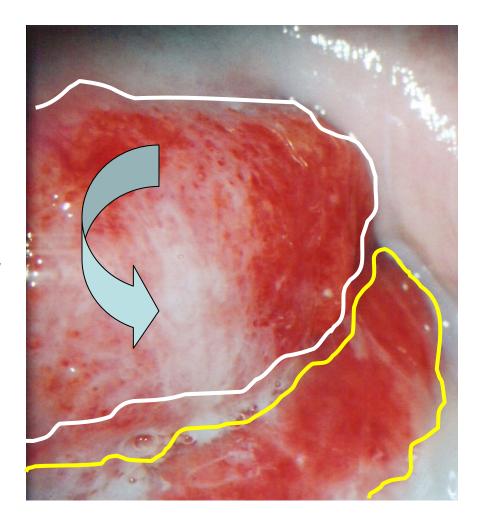
## At first sight an enlarged Nabothian cyst – Schiller's test

 At first sight an enlarged Nabothian cyst of the anterior lip (*left arrow*), some parts of its surface demonstrate weak iodine captation (*green scribbles*), SCJ not fully visible (white scribble), the colposcopist asks for further examination (endocervical inspection by Kogan's speculum, biopsy if necessary).



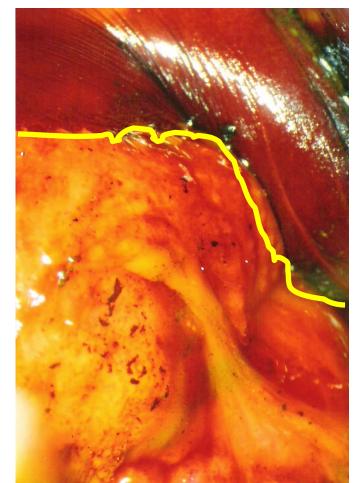
### Inflammated ectropion

 Ectropion of both the anterior (white scribble) and the posterior lip (yellow scribble) of the uterine cervix (curved right arrow), demonstrating abundant mucous discharge.



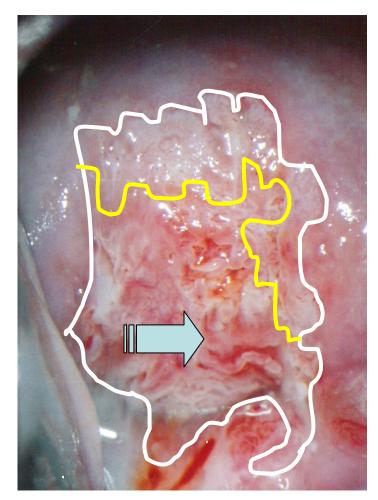
# Inflamed ectropion – Schiller's test

 After Schiller's iodine probe a welldemarcated healthy pluristatified epithelium is visible, separated from inflamed hyperplastic cylindrical epithelium (yellow scribble)



## Inflamed ectropion – another patient

 Inflamed hyperplastic ectropion (stripped arrow right) with an irregular area of coarse acetowhitening (between white and yellow scribble)



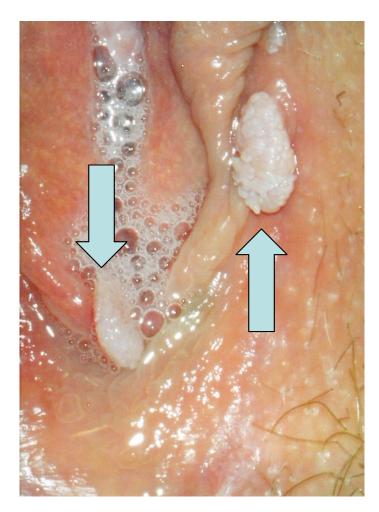
## Inflamed ectropion – another patient

 The same patient after Schiller's probeiodine negative area includes coarse acetowhitening (white scribble)

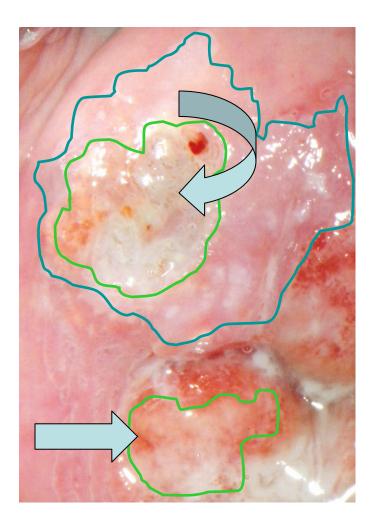


#### A 34-year-old female with vulvar condylomata and abundant discharge

 A 34-year-old female with vulvar condylomata and abundant vulvovaginal discharge (up and down arrow) underwent colposcopy - next slide



A 34-year-old female with • vulvar condylomata and abundant discharge underwent colposcopy, which revealed acetowhite area well demarcated from the surrounding tissue of the anterior lip (blue scribble), as well as two coarse acetowhite fields of the uterine cervix (curved left and right arrows and green scribble). Punch biopsy, pathohistology revealed Microinvasive adenocarcinoma.



### A 34-year-old female with vulvar condylomata and abundant discharge - Schiller's test

 After iodine probe a well-demarcated hyperplastic area was visible (white scribble, down arrow)



 Histology, age, nulliparity and wish to give birth in future lead us towards trachelectomy and laparoscopic pelvic lymph node dissection as the right procedures for this patient.