

宫颈癌

诊断

&

治疗

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诊断？

症状

**早期通常无症状，仅表现为宫颈细胞学异常、
高危型HPV（+）**

出现症状

**异常阴道流血、同房后出血、接触性出血、
水样白带**

症状

- **盆腔痛、压迫症状、直肠或泌尿系症状**
(侵犯膀胱或直肠引起排尿困难、血尿、便血、顽固性便秘)

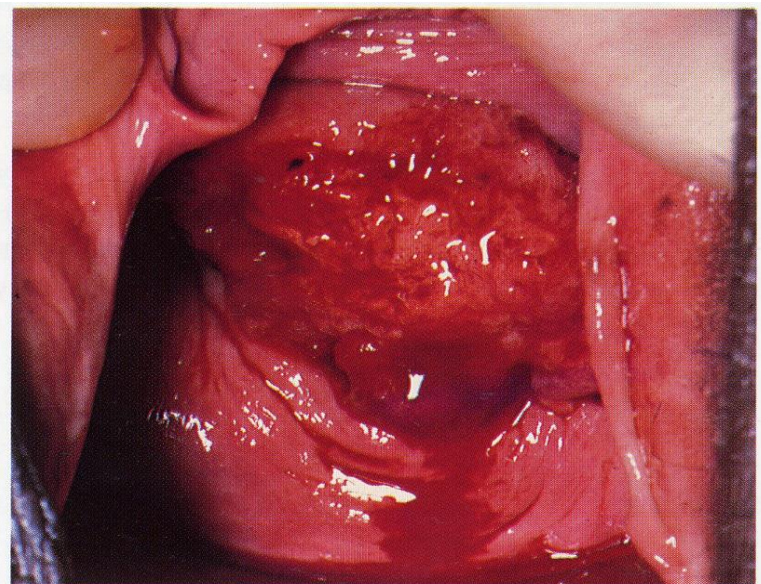
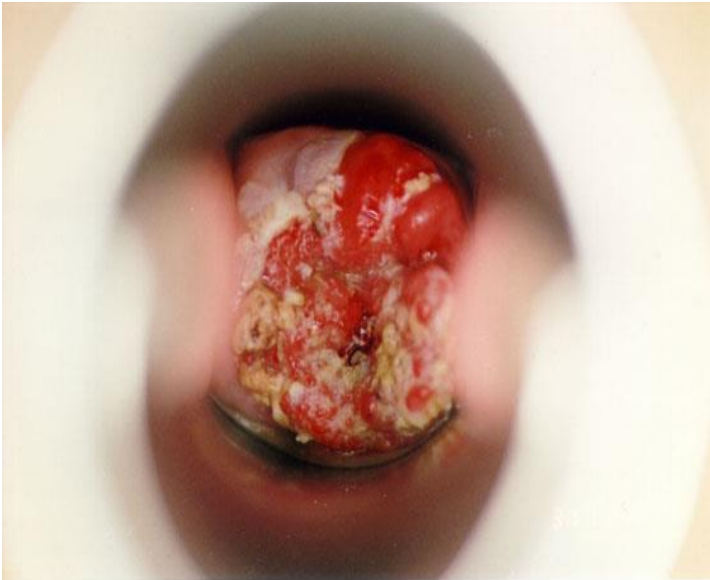


图 112 症状明显的宫颈浸润癌。

症状

宫颈癌晚期和复发的常见表现：

- **远处转移**
- **广泛盆壁侵犯使淋巴静脉回流受阻导致持续单侧或双侧下肢水肿**

如何诊断?

宫颈癌筛查

HPV (+)

TCT: ASCUS、LISL、HISL

阴道镜、宫颈活检

症状

异常阴道流血、同房后出血、
接触性出血、水样白带

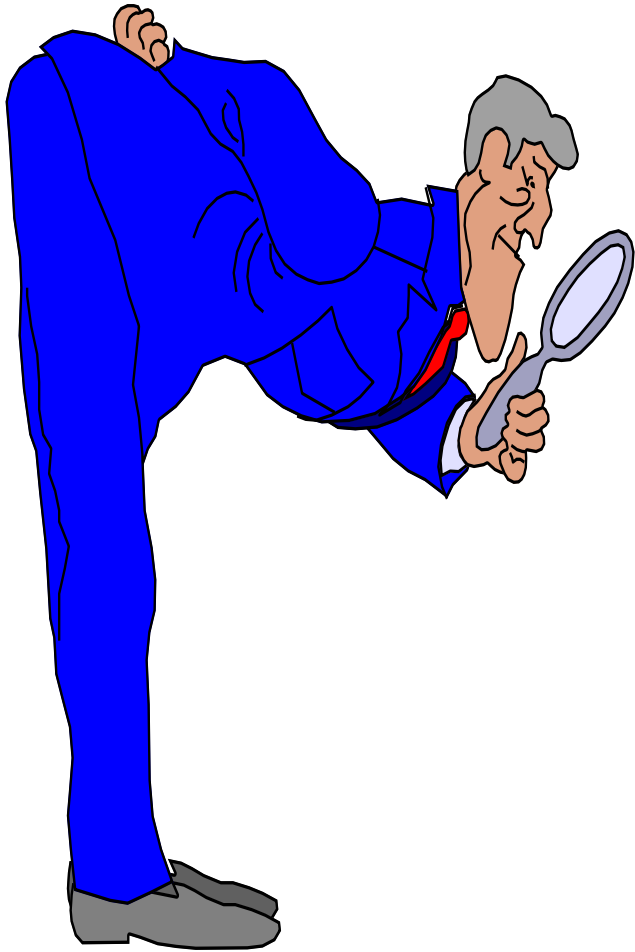
体征:

阴道: 白带、穹窿

宫颈: 赘生物大小、侵犯程度、
溃烂、筒状

子宫: 大小、活动度

宫旁: 增厚





组织学类型

鳞状细胞癌(SCC) 80%

腺癌 10%-15%

其他 5%-10%

溃疡型宫颈癌，通常侵蚀部分宫颈或侵犯上方阴道穹窿宫颈





转移途径

- **直接蔓延：最常见，常见于外生型、宫颈管型**
- **淋巴转移：癌栓进入局部淋巴结**
一级组：宫旁、闭孔、髂内、髂外、髂总、骶前
二级组：腹股沟深浅淋巴结、腹主动脉旁
- **血行转移：少见**

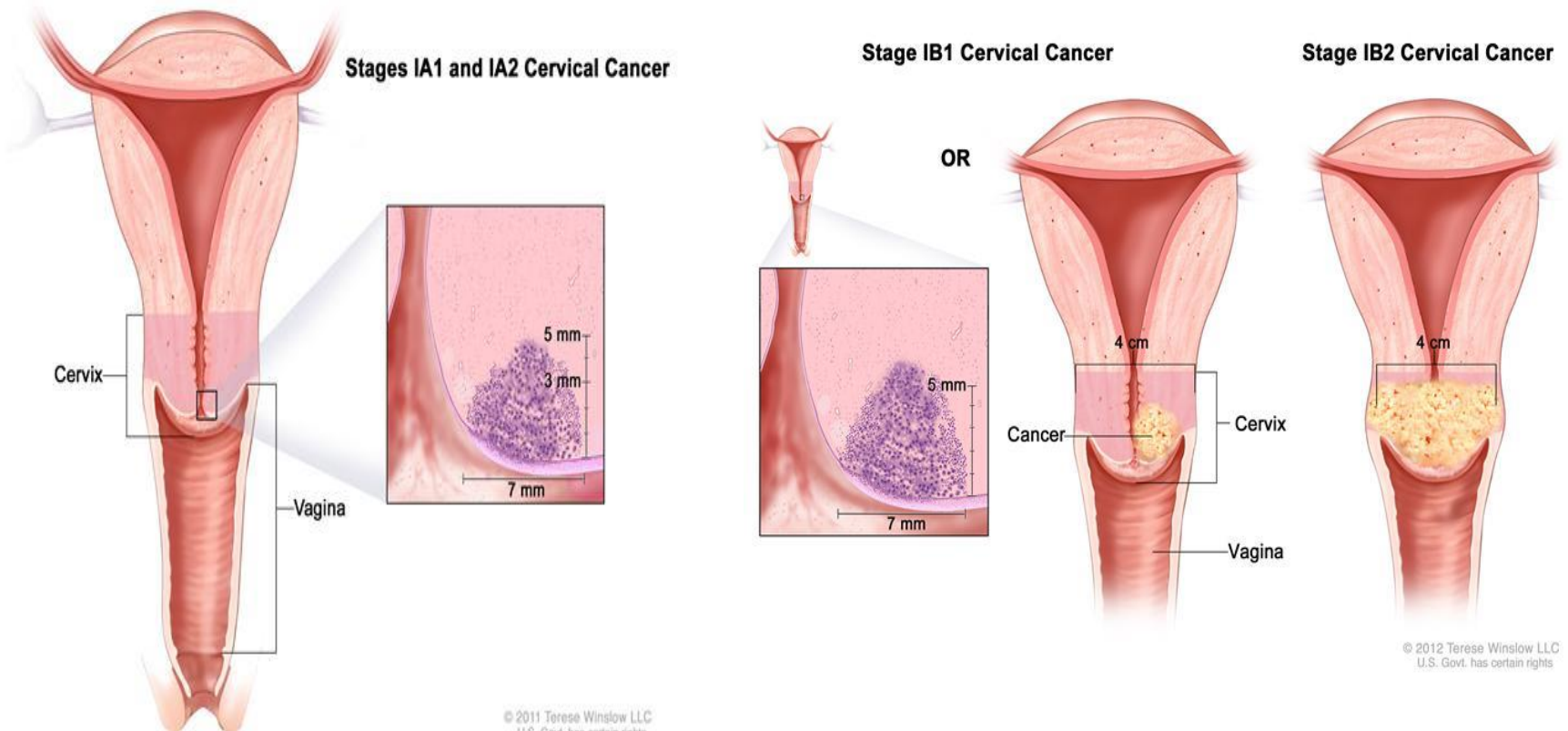
转移途径

- 侵犯阴道粘膜，由镜下可见进展至肉眼可见或可触及的病灶。
- 累及子宫下段和子宫体的肌层，特别是病变起自宫颈管内时。
- 进入宫颈旁淋巴管进而进入最常见的淋巴结(闭孔、胃下、髂外淋巴结)。
- 直接蔓延至邻近结构，到达闭孔筋膜和真骨盆壁

FIGO Staging for Cervical cancer

Stage I

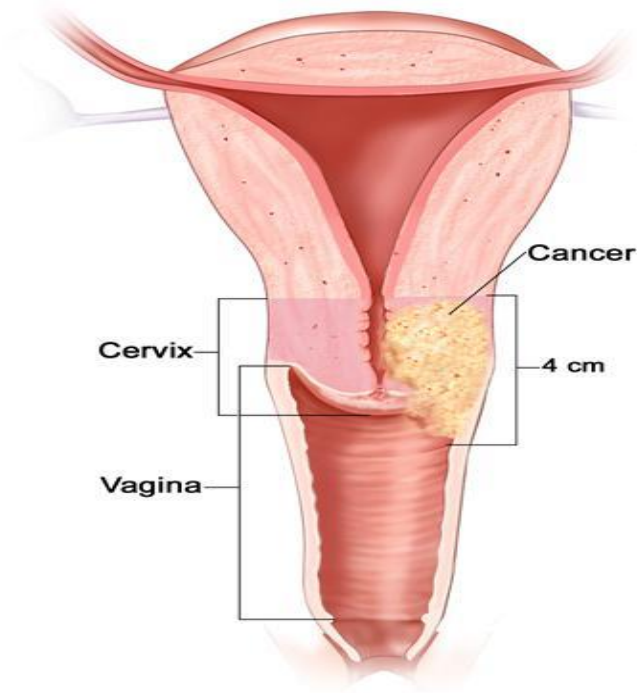
- is confined to the cervix 病灶在宫颈



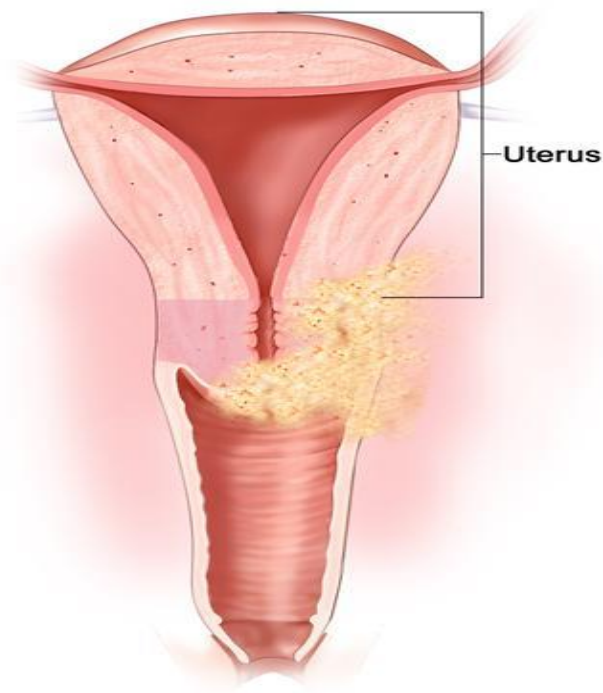
Stage II

- 病灶超出宫颈但没到侧盆壁及阴道下1/3

Stages IIA1 and IIA2 Cervical Cancer



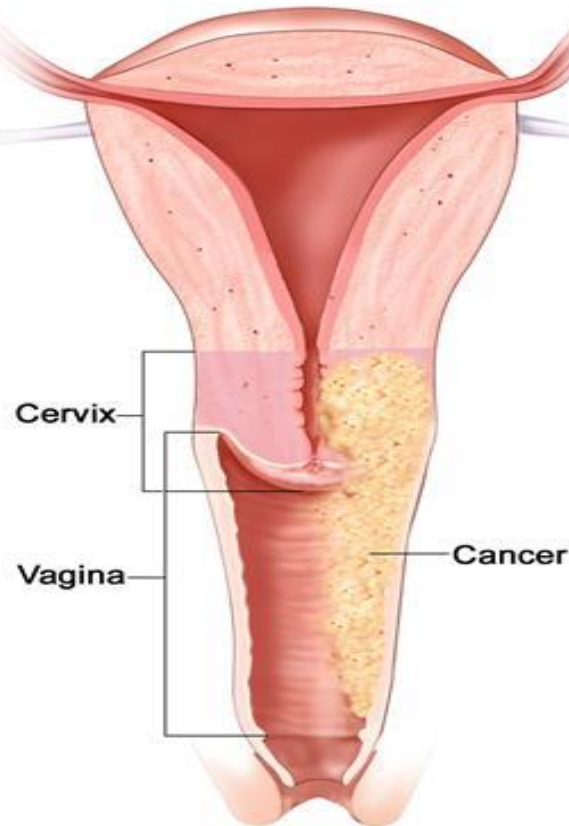
Stage IIB Cervical Cancer



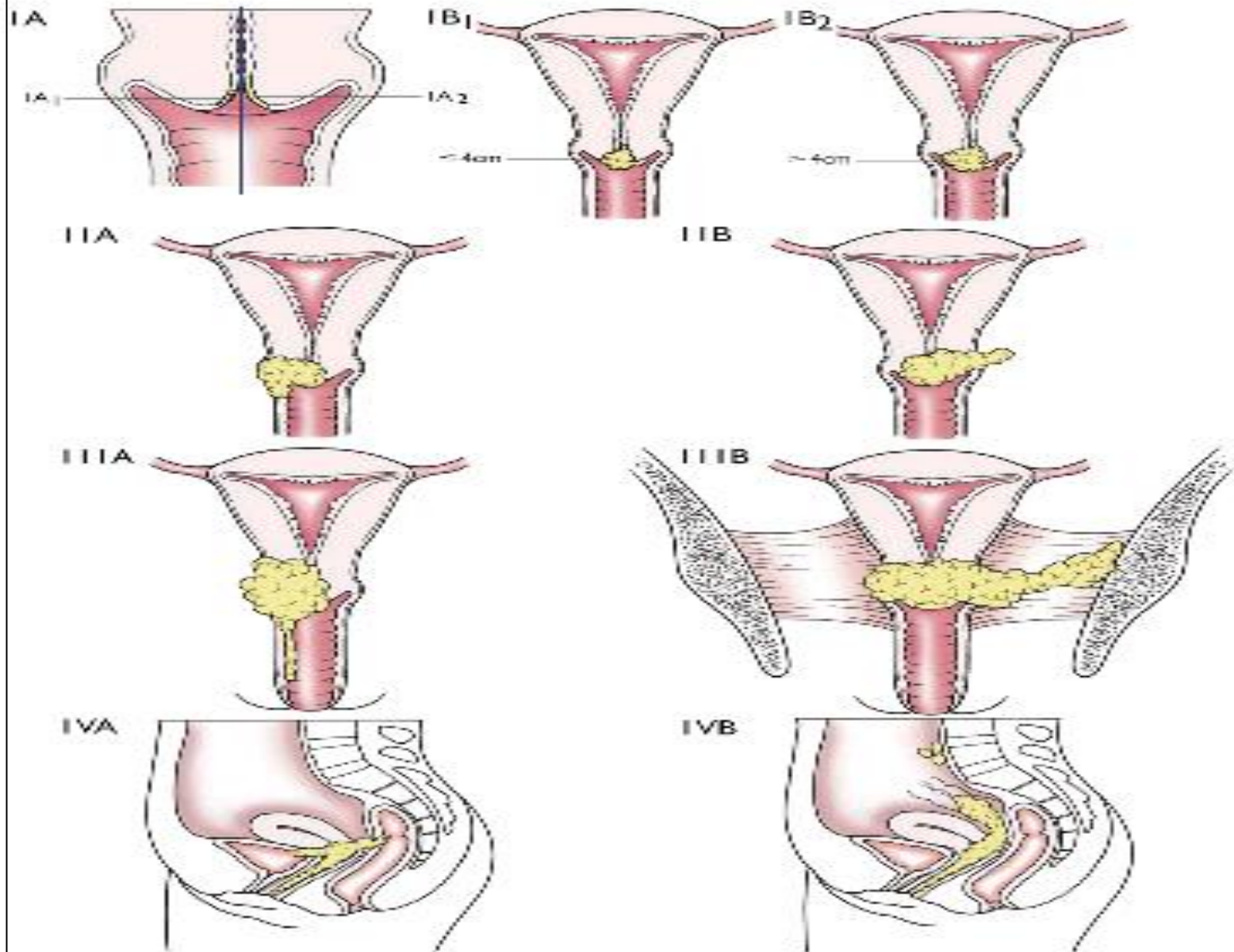
Stage III

- 病灶达侧盆壁或达阴道下1/3

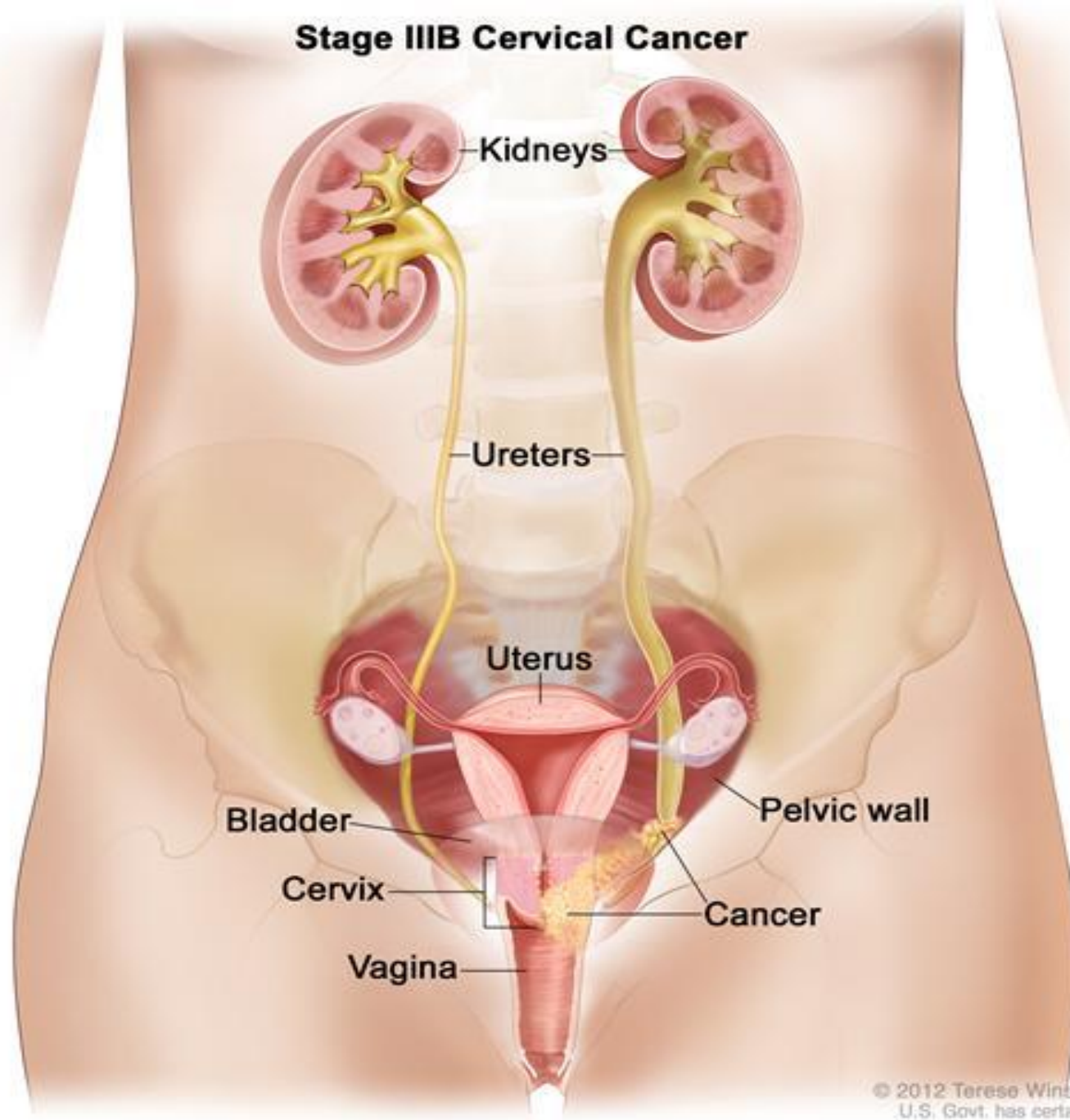
Stage IIIA Cervical Cancer



宫颈癌的临床分期



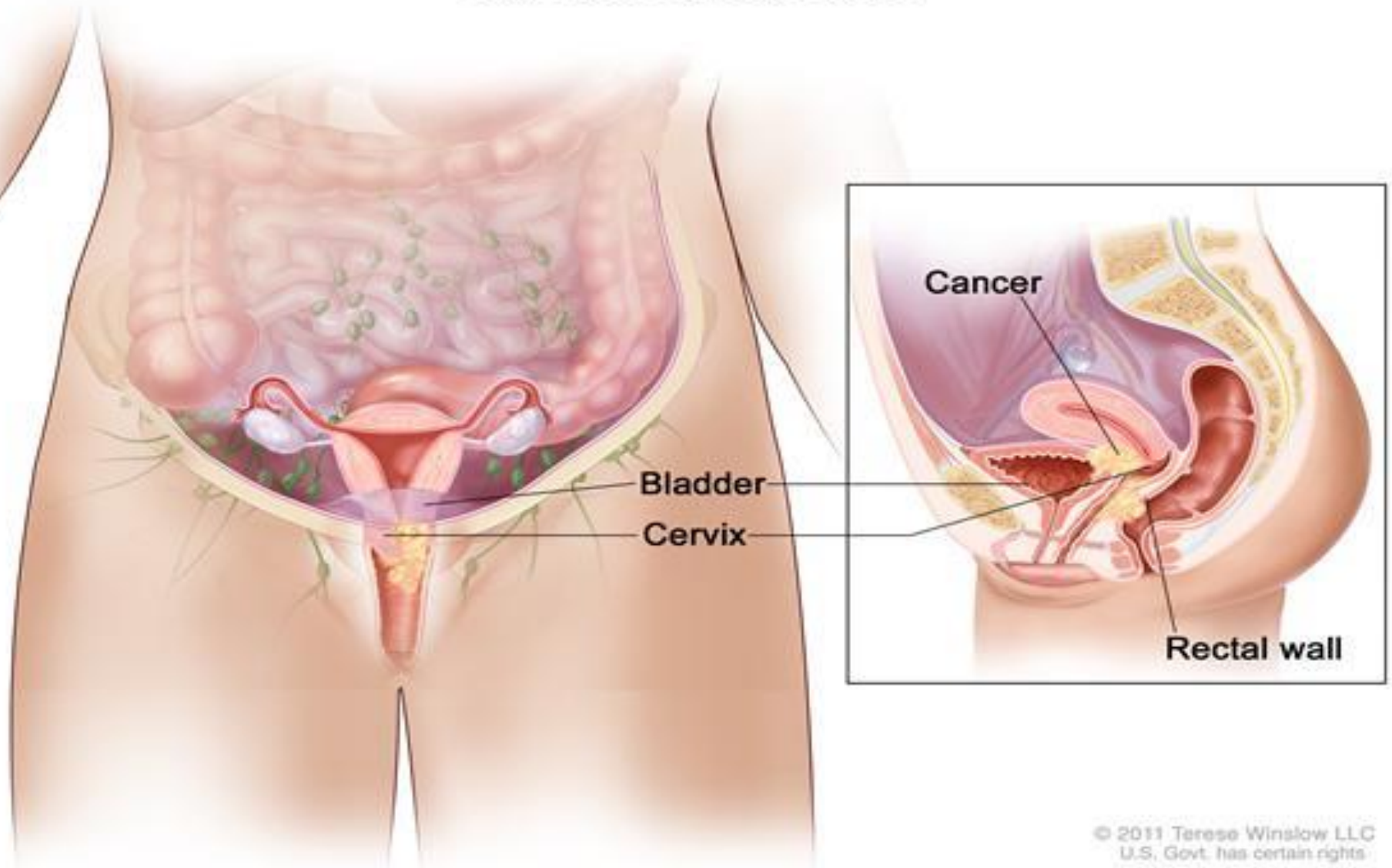
Stage IIIB Cervical Cancer



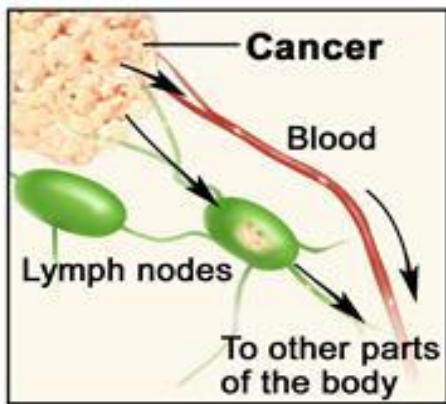
Stage IV

- **病灶超出盆腔或侵犯膀胱直肠或远处转移
(骨、肺、肝)**

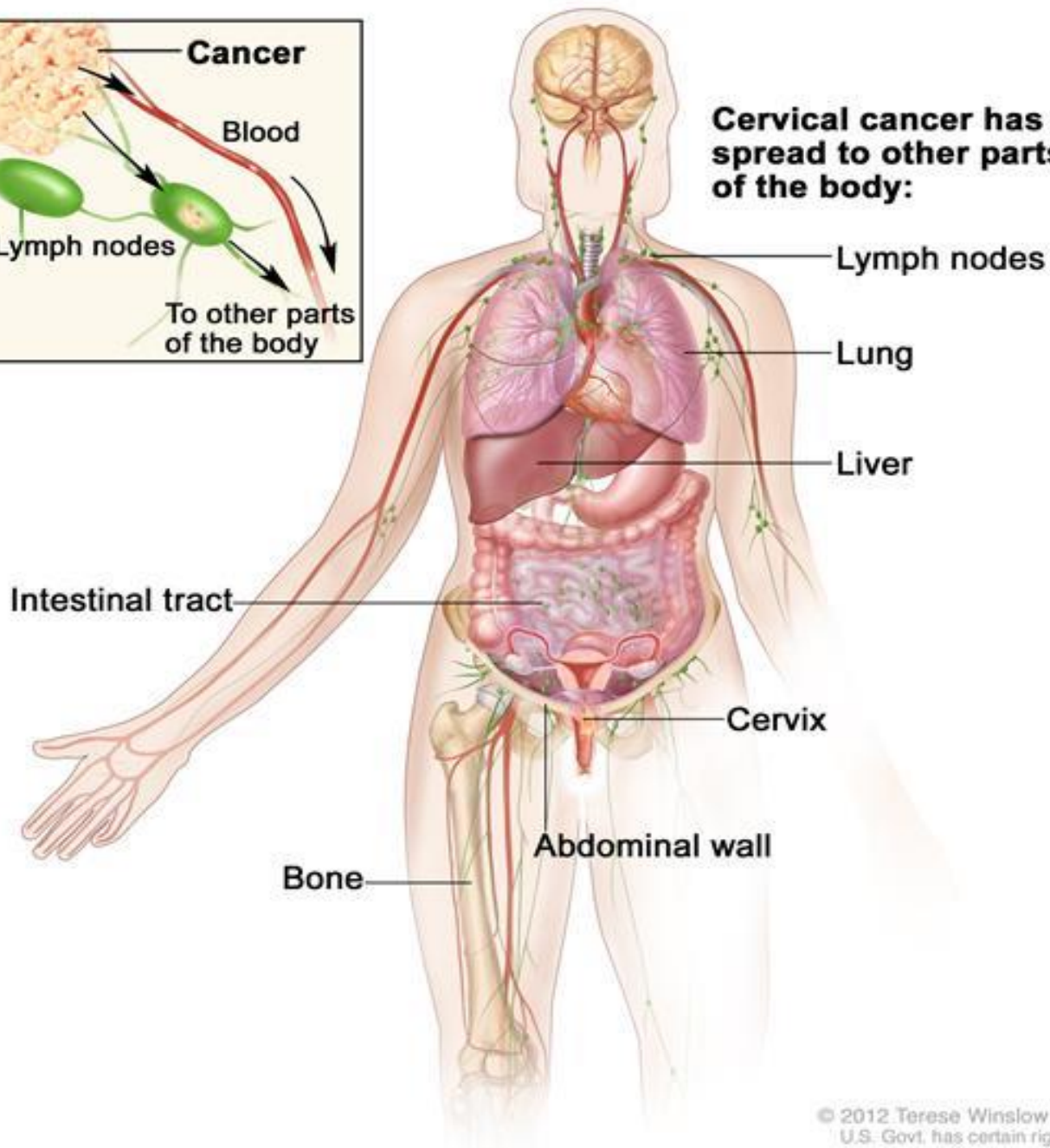
Stage IVA Cervical Cancer



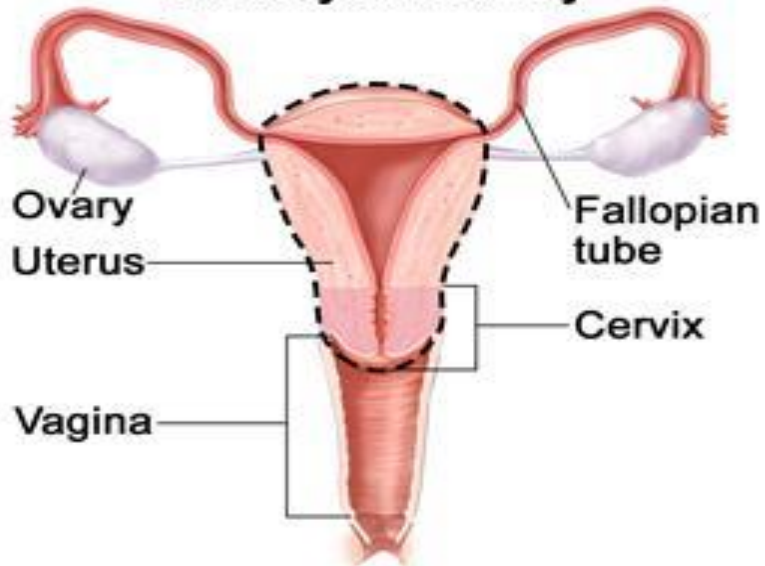
Stage IVB Cervical Cancer



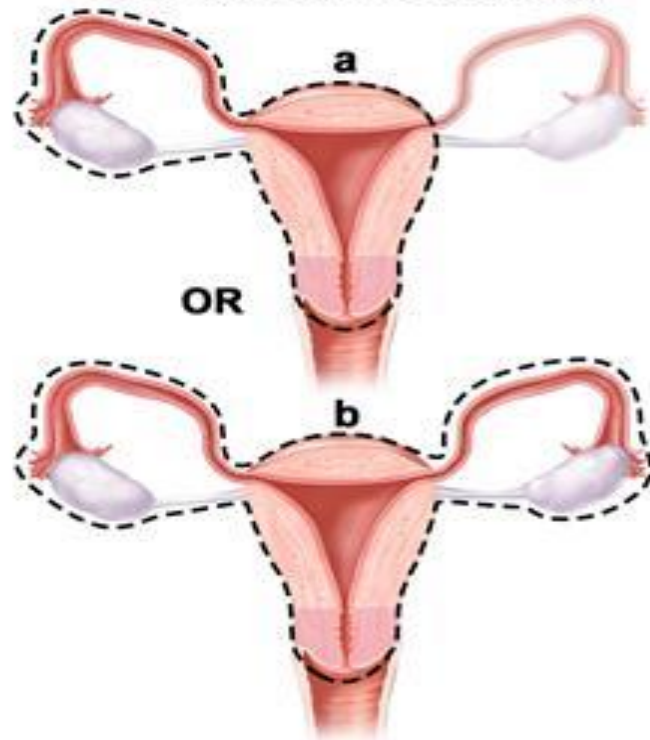
Cervical cancer has spread to other parts of the body:



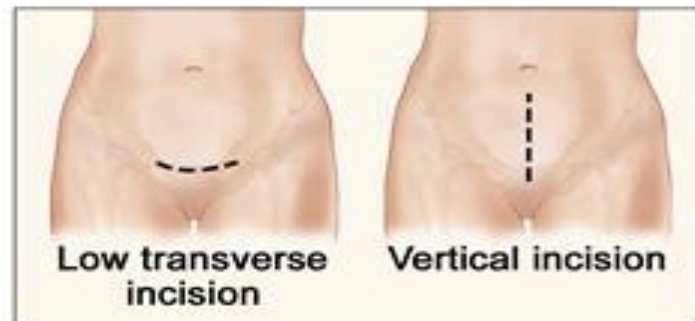
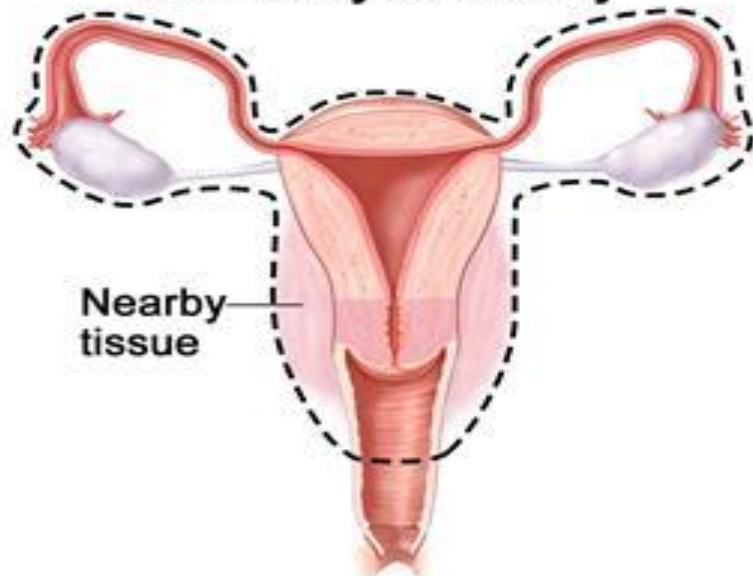
Total hysterectomy



Total hysterectomy with salpingo-oophorectomy



Radical hysterectomy



治疗

(i).手术治疗:适应症Ia~ II a

Ia1: 全子宫切除,若卵巢外观正常,卵巢可以保留

Ia2- II a :广泛子宫切除+盆腔淋巴结清扫

若卵巢外观正常,卵巢可以保留

(ii).放疗:

腔内照射,外照射

指征: II b, III, IV;

无法耐受手术者

治疗

(iii).手术加放疗综合治疗:

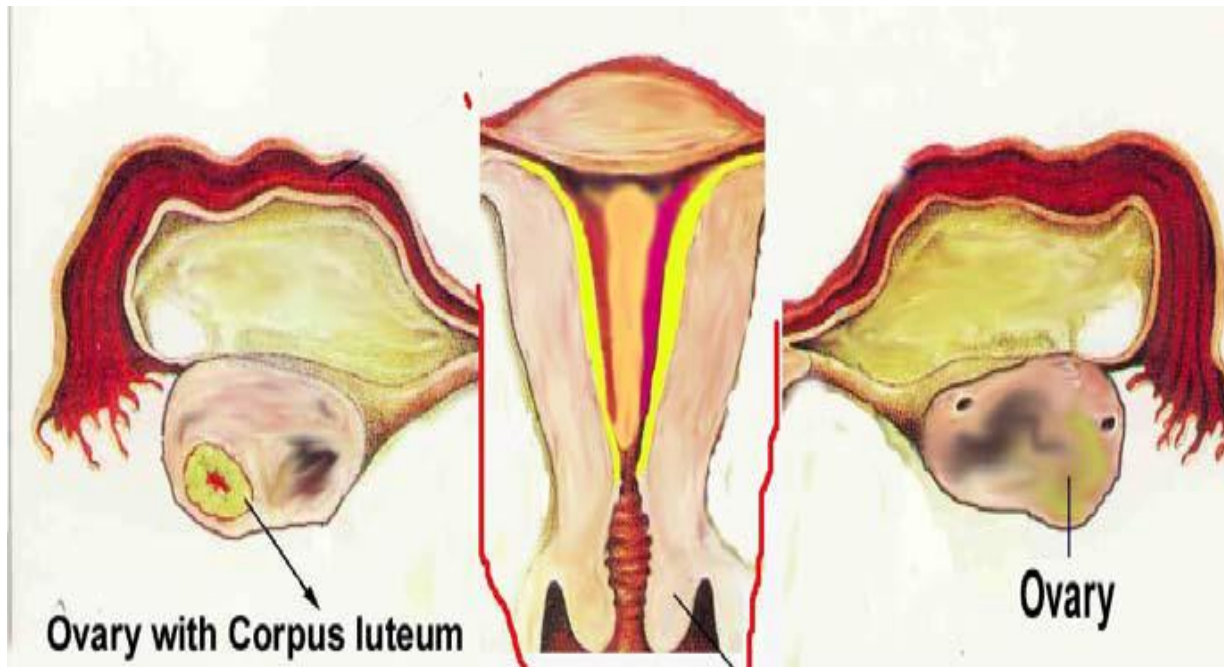
术前放疗:局部晚期宫颈癌

术后放疗:有淋巴转移或宫旁受累

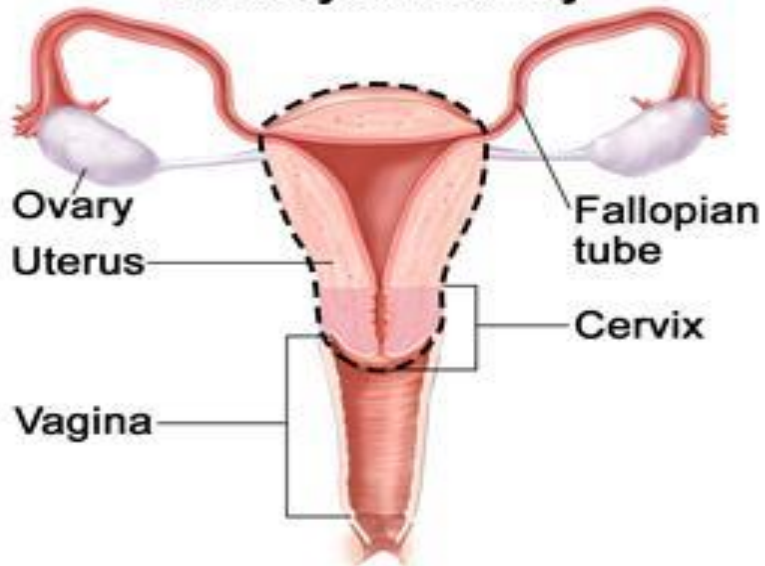
(iv).化疗:TP (紫杉醇+卡铂)

指征: 晚期或复发者

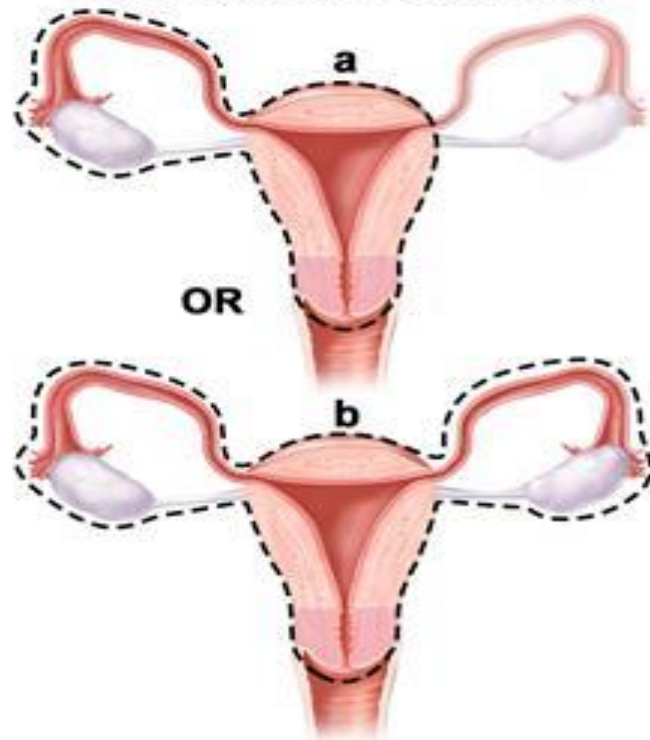
治疗进展



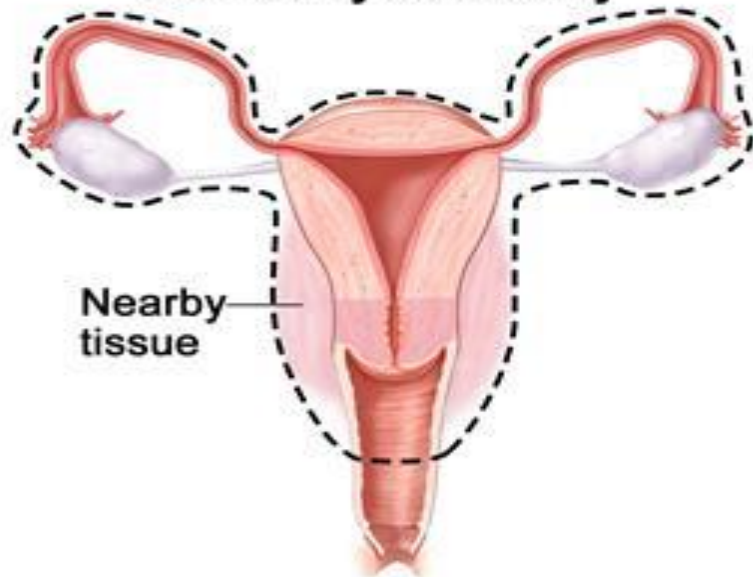
Total hysterectomy



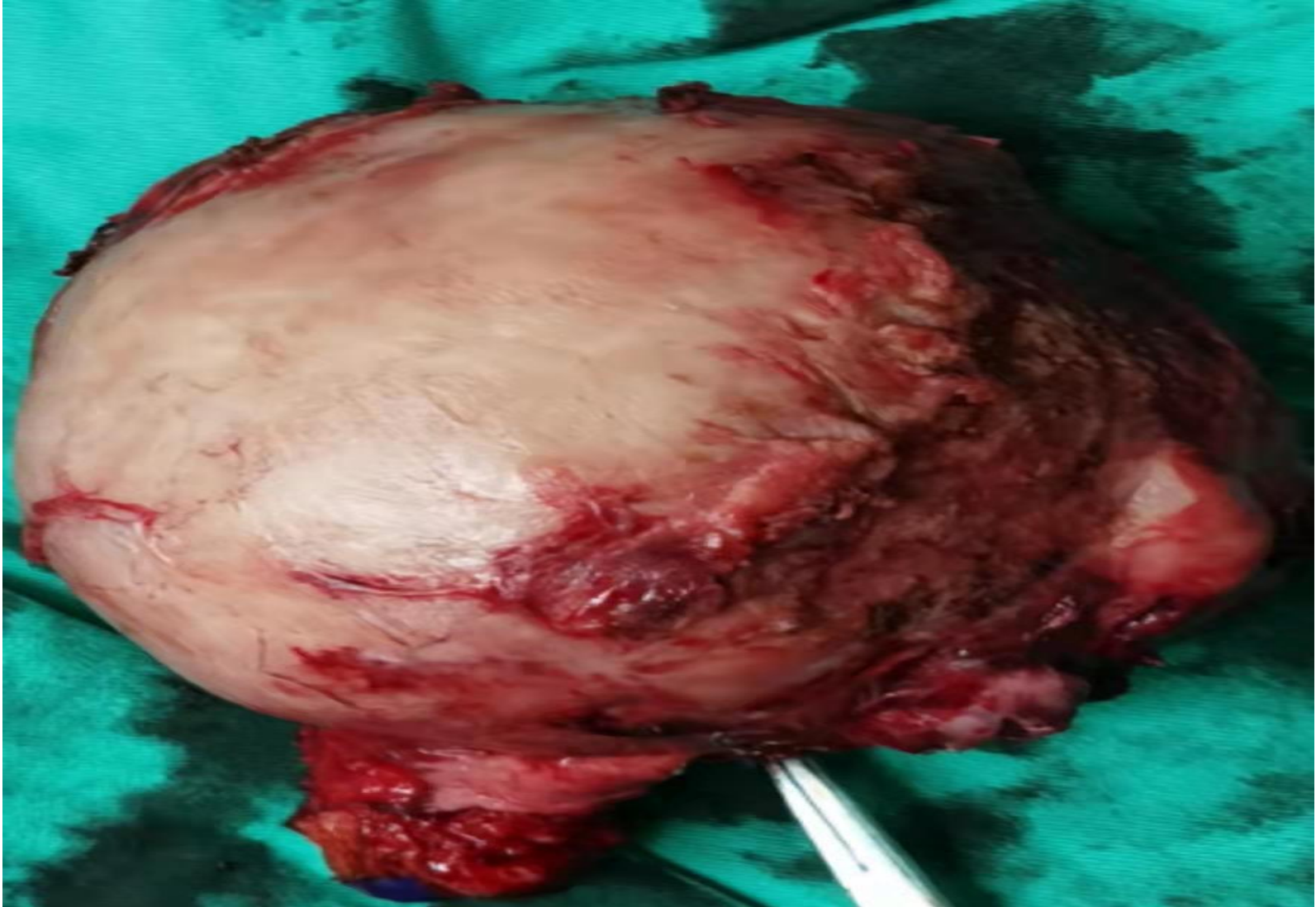
Total hysterectomy with salpingo-oophorectomy



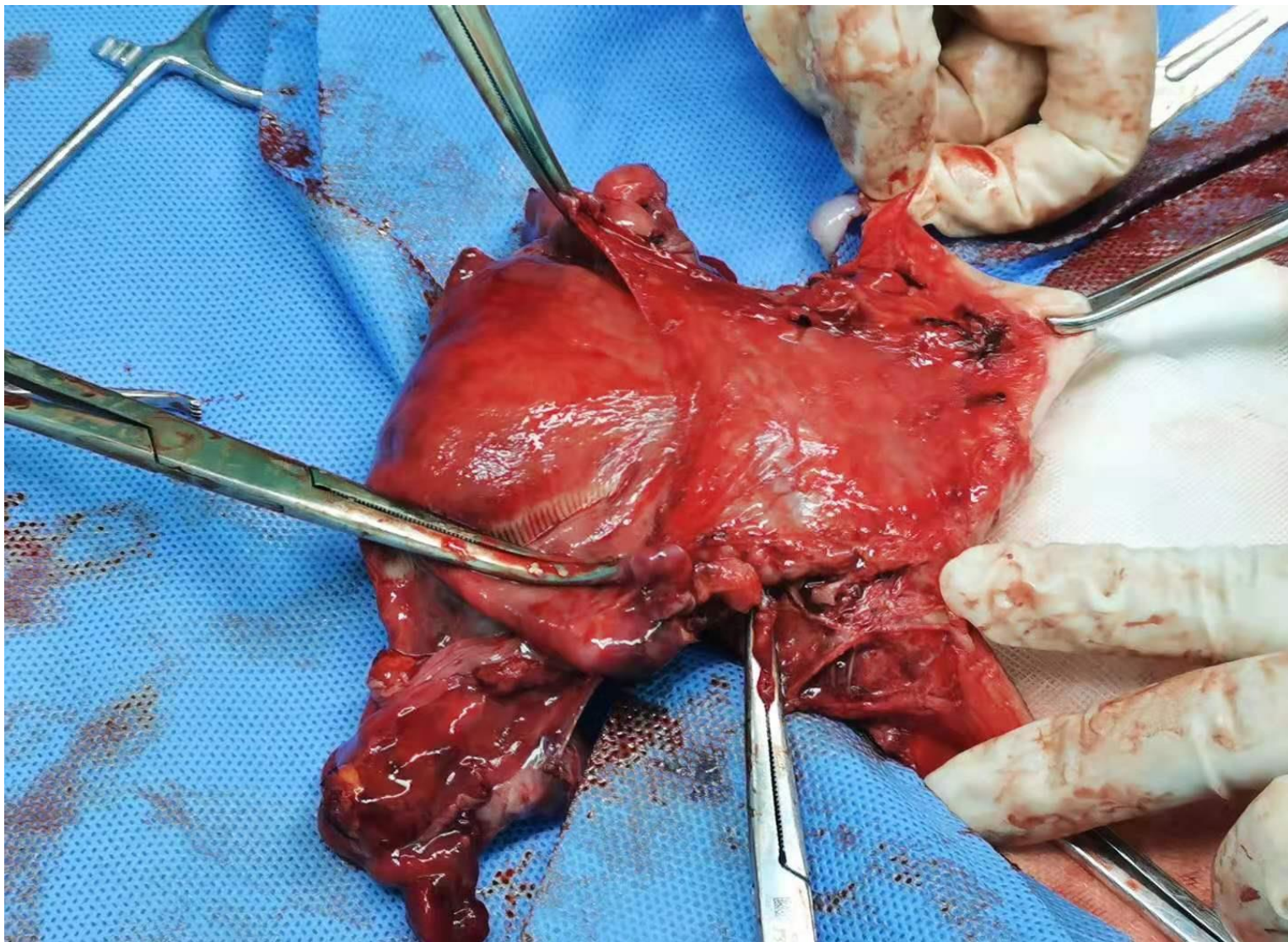
Radical hysterectomy



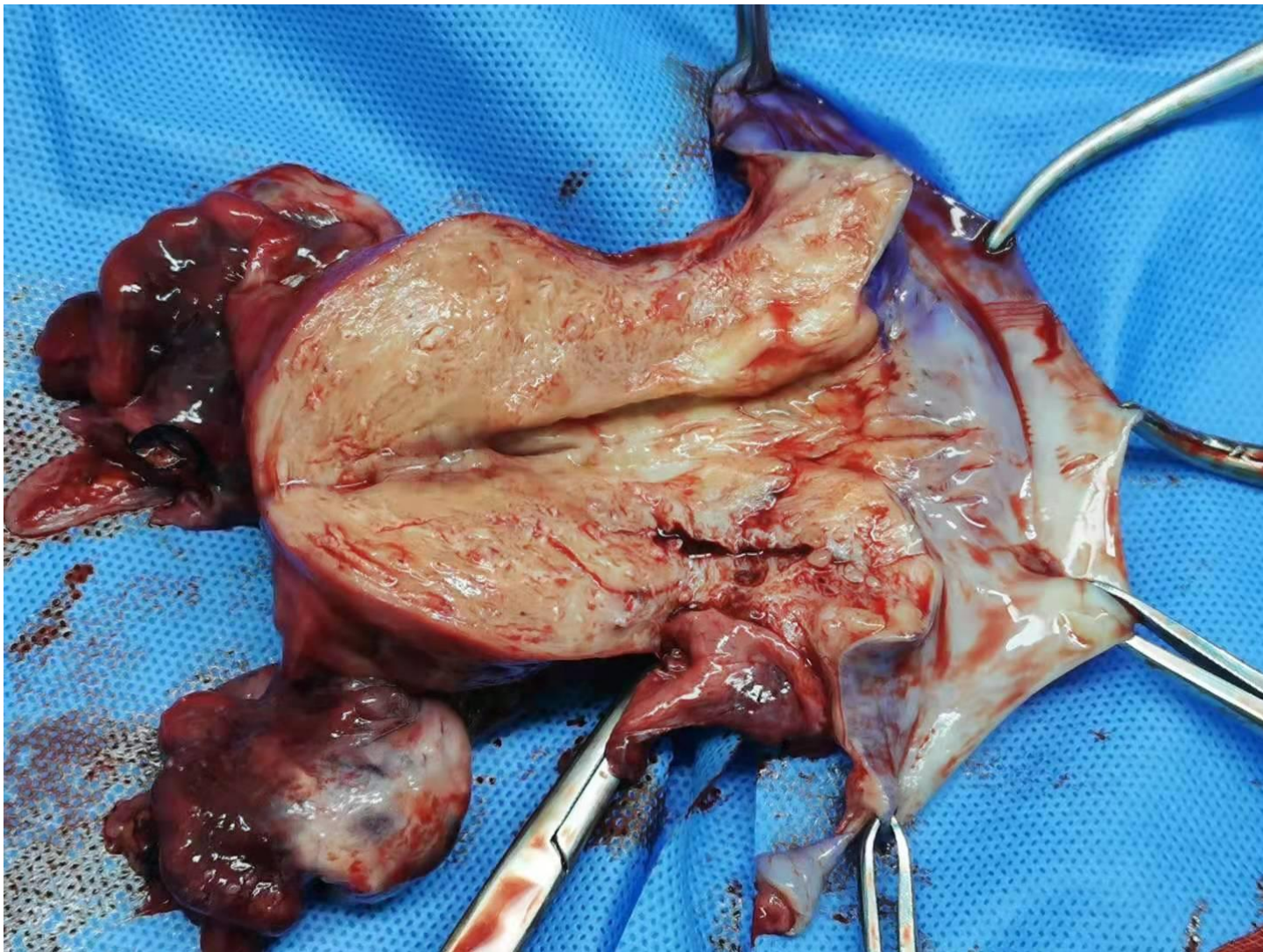
Total hysterectomy



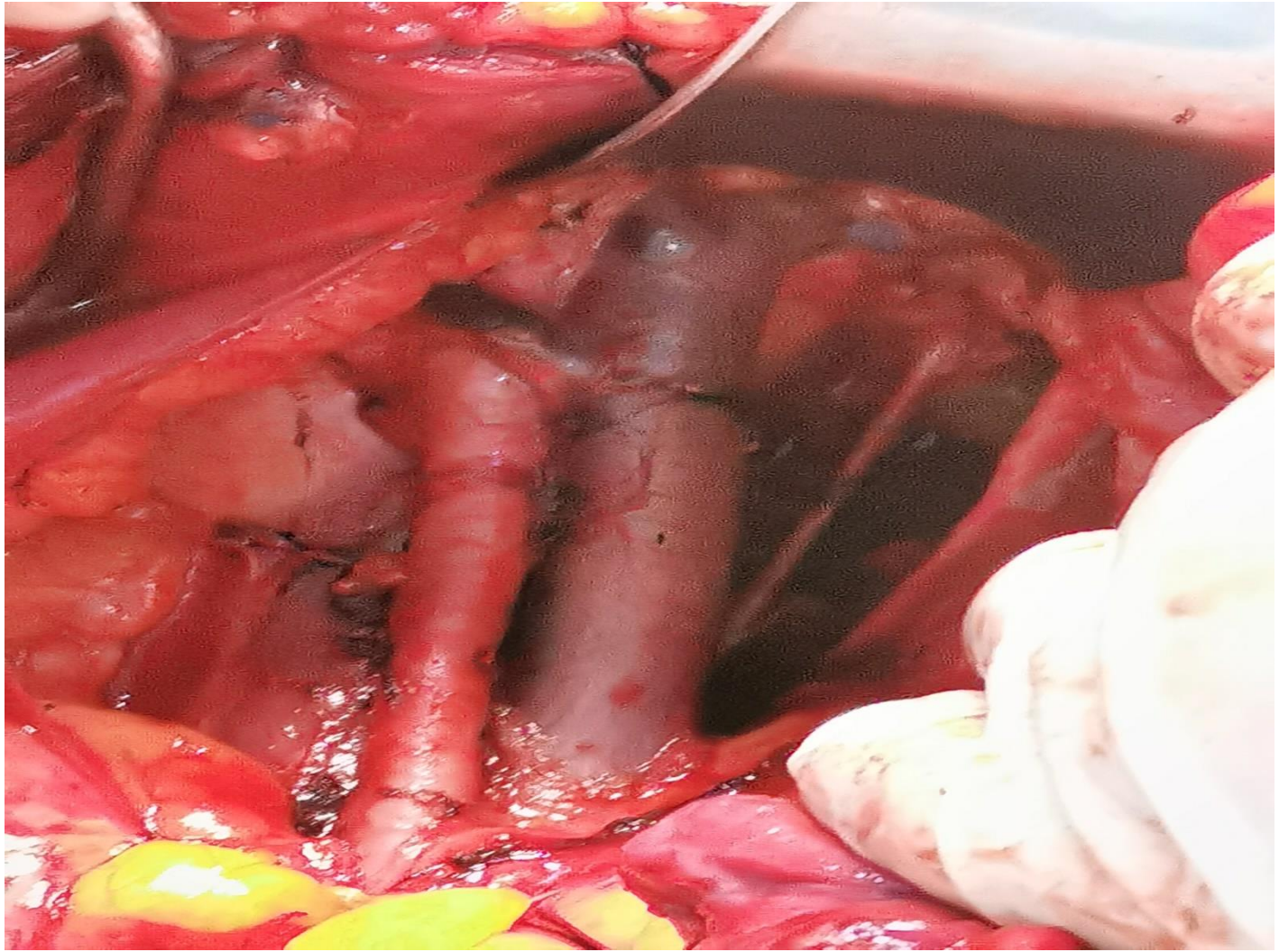
广泛子宫切除



广泛子宫切除



盆腔淋巴结清扫



随访

**首次复查为治疗后1个月；
此后1年内2-3个月复查1次；
第2年3-6个月复查1次；
第3-5年每年复查1次。**

**随访内容包括临床检验、胸片、血常规、HPV、
TCT 、 SCC**

奉献

博爱

人道

Thank you

谢谢

Thank you

