SUMMARY AND CONCLUSION

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Herpes Simplex Viruses (HSV) are among the most common infectious agents of man.

HSV-2 infection is becoming appreciated as a common venereal disease in several countries.

Because of incompleteness of information, the total impact of the relation of herpes simplex viruses to human cancers, abortions, birth defects and chronic neurological diseases cannot be ascertained at present.

The present work was planned to study the detection rate of HSV infection in the female cervix.

The material of this study included 250 females, diagnosed clinically as follows :

1- 103 women with apparently normal cervix.

2- 92 women with cervical erosion.

3- 47 women with chronic cervicitis.

4- 8 women with cervical cancer.

5- 28 pregnant females : 14 in first trimester, 8 in the second trimester and 6 in the third trimester.

6- 12 women with IUCD.

From all patients cervical scrapings were obtained for culture on BGM, DFA and Papaniculeou staining.

For virus isolation, clinical specimens were inoculated on BGM cells.

Results showed that from all the genital specimens studied, the virus recovery rate on the BGM cells the isolation rate was 14.4%.

Results showed that the virus detection rate among 92 women with cervical erosion was a high statistical significant rate either on BGM cells (20.7%) when compared with females with apparently normal cervix (4.8%).

Similar significant results could be obtained among the 47 females with chronic cervicitis. HSV could be isolated in 23.4% by inoculation on BGM cells.

Our cases when studied in relation to age revealed that the virus detection rate was a higher significant in women who are in the active sexual period (20 - 40 years), than those above 40 years.

Females with history of suspected herpetic like lesion on genitalia showed a high statistical significant rate (55.6%) on BGM cells, when compared with those not had such history. While women with history of suspected herpetic like lesion on mouth gave no statistical significant results.

When our cases were studied in relation to gravidity, it revealed that gravidity increases the incidence of HSV infection. A high significant virus detection rate could be obtained among multi-gravida women either on BGM inoculation (15.5%).

Similar results could be detected when our cases were studied in relation to parity. The virus detection rate was highly significant among multi-para women either on BGM 17.5%

Although the virus recovery rate in cases with multiple abortion was high on BGM cells 17.1% yet it has not statistical significance, when compared with those not abort before.

Results of the 28 pregnant females revealed that the virus detection rate on BGM cells 13.9 %, of no statistical significance, when compared with non pregnant females. The virus detection rate among females using oral contraceptive pills was 15% on BGM cells while in those wearing IUCD, the virus detection rate was 33.3% on BGM cells, 25% by DFA and 25 by Papaniculeou stain.

In conclusion I would like to bring out the following remarks and recommendation.

1- Genital HSV infections do constitute a major problem for both patients and the treating clinician.
2- Early and accurate diagnosis is needed, especially with the availability nowadays of clinically proved effective antiviral drugs for HSV.
3- More clinical, virological and epidemiological studies are needed to present the actual magnitude of genital HSV infection in our community.
4- The clinicians should be aware and encouraged to consult the virus laboratory to confirm or to rule out a viral diagnosis in suspected cases.
5- For primary HSV isolation from clinical specimens, a continuous cell line as BGM cells should be used.