

Resuming Cervicography in Cervical Cancer Screening

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Cervicography is a relatively new technique with the use of digital cameras from the mid-1980s, of various brands such as Canon, Niko and Kodak, used by some gynecologists as documentation of cervical pathology studies. It was actually used as a simple complement to traditional colposcopy or by those who saw the opportunity for an early diagnosis in an easier and more economical way.

However, correct ways of planning the proper taking of the photographic image, oriented and taken from the expert photographers of that time, emerged, which helped gynecologists to have a better vision optics and allow them, once revealed, to be able to distinguish a better image of the cervix and determine possible lesions, especially aceto white and iodine negative spots, as well as their comparative importance with colposcopy for better cervical cancer screening [1].

With technological advances, especially with colposcopic equipment more accessible to gynecologists and perhaps due to the delay in improving the optics of the cameras of the time, cervicography gradually fell into disuse.

We currently have excellent colposcopes with super high-definition vision, with miniaturized electronics, which generates greater versatility in its use, in addition to other functions that make it possible to locate the lesion with great precision and determine its malignancy risk parameters. But we are also observing that the optics of our smartphone camera lenses have improved substantially, they are portable at hand and by simply focusing on any area of our vision, they can take highly precise digital photographs.

Incredibly with the same mobile camera, we can zoom, and distinguish with great precision the macroscopic characteristics of the cervix and with great detail lesions that could not be distinguished with the naked eye (Photographs 1-4, smartphone Huawei Y8, fla-lx3, 2018, resolution 2160x1080). That is why I consider that cervicography can be a previous or complementary alternative to colposcopy for an adequate evaluation of the cervix, you are in any country regardless of your socioeconomic level, and I would dare to say that it would be very useful in very poor countries. Well, we know that every time we have a smartphone, whose costs will be more accessible to the common people [2].

Cervicography is simply taking an image of the cervix with the best possible resolution camera of the mobile, which any doctor who is not a gynecologist can send by any electronic means to the expert to guide and decide in certain cases of cervical pathology. It also serves as an element of evidence in legal medical cases and serves to evaluate the evolution of treatments applied over time and observe their changes.



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Photograph 1-4

As a gynecologist, I routinely use cervicography, rather than colposcopy, limiting the latter to true cases that are not observed by cervicography, in addition to being extremely useful and surprising when the patient is sent and recognizes what her cervix is like, whether she is healthy or sick.

Little is currently mentioned about cervicography within cervical cancer screening, since the triad, cytology or viral typing, colposcopy and cervical biopsy are always mentioned. However, I leave this concern to the readers, to take cervicography as part of their scientific arsenal in the evaluation of the cervix [3,4].

Electronic technology and software advance faster than the same plasticity for its application in the field of medicine. Today, with high-end smartphones, we have cameras of more than 40 megapixers, with spectacular resolution and sharpness to observe the cervical surface, for which I dare to assert that in the future we will do colposcopy with the mobile in hand. What's more, we can record it and share it with other expert colleagues, to make a precise diagnosis in therapeutics. Finally, also have to see the cost benefit factor.

These advances in mobile cameras, using it in our public and private medical practice, are therefore becoming a necessity for any gynecologist.

I particularly encourage them to resume cervicography, in a simple way practicing with their smartphones, regardless of whether it is high-end or not, but with a camera of adequate resolution and focus with different magnifications and achieve precise cervical topography with emphasis on the metaplasia zone [5]. On the other hand, they can compare and observe the beauty of cervical photography and its different pathologies.

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