Cervical Polyps Called Less Risky Post Menopause

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NASHVILLE, Tenn.—Cervical polyps in postmenopausal women might pose lower risk of malignancy, dysplasia, and atypia than those found in premenopausal women, according to a study presented at the annual meeting of the North American Menopause Society.

Dr. Peter F. Schnatz of the University of Connecticut, Farmington, and his colleagues searched a pathology database for women aged 45 or older who had undergone hysterectomy with total hysterectomy and bilateral salpingo-oophorectomy (with and without lymphadenectomy) at the University of Connecticut. The women were examined during April 2003 to December 2005. The absence of cervical polyps was noted when the cervix was examined before hysterectomy. All women were excluded from the study if they had their hysterectomy after menopause.

Of 467 women who met the inclusion criteria, 67 had cervical polyps. The median age at hysterectomy of the women with cervical polyps was 61 years (range 52-86), while the median age of the women without cervical polyps was 58 years (range 45-86). The incidence of cervical polyps was 14% (67/467). The women with polyps were 3 years older on average than the women without polyps. The median age at first delivery of the women with polyps was 28 years (range 17-40) and the median age at menopause was 53 years (range 45-62). The median age at menopause of the women without cervical polyps was 51 years (range 45-62).

Cervical polyps (adult) were the most common finding in the women with cervical polyps (66.9%). Endometrial polyps were found in 33.8% of these women. This prevalence of cervical polyps was significantly higher than that of 1.3% reported in a study from the early 1990s. Using a 3% prevalence as a cut-off value, the prevalence of cervical polyps in this study was significant (P < 0.001).

The presence of cervical polyps was associated with a higher age at hysterectomy (P = 0.002). Additionally, women with cervical polyps were more likely to have a family history of breast cancer (P = 0.03) and a family history of a benign gynecologic tumor (P = 0.04).

While the incidence of cervical polyps was significantly higher in women aged 60 years or older compared to women aged younger than 60 years (18% vs. 0%), women with cervical polyps had a lower age at first delivery compared to women without cervical polyps (median age 28 vs. 31 years). The frequency of cervical polyps was not associated with race, weight, body mass index, parity, or history of endometriosis.

The presence of cervical polyps was associated with a higher age at hysterectomy, supporting the hypothesis that cervical polyps are a premalignant lesion. This study confirms the findings of other investigators who have noted an increased risk of cervical polyps and cervical dysplasia in postmenopausal women.

Dr. Schnatz said that the findings of low prevalence of abnormalities for cervical polyps should reassure patients. Moreover, "routine removal is reasonable, given the high likelihood of symptoms, the small possibility of malignancy or transformation to malignancy, and the potential marker for uterine or extraterine disease, as well as the ease of removal," he said.

He noted that polyps are the most common benign neoplastic growth in the cervix; are found in roughly 5% of women, most commonly in multiparous women older than 20 years; and are rare before menarche.