

PETRA CASEY: My name is Petra Casey. I'm an associate professor of obstetrics and gynecology at Mayo Clinic Rochester. And I'm here to talk about an article entitled *Abnormal Cervical Appearance: What to do, When to Worry*, which is scheduled to appear in the February issue of Mayo Clinic *Proceedings*.

This article provides a summary of common cervical lesions encountered in practice and distinguishes those that can be safely observed from those needing an evaluation by a gynecologist. The article is geared towards primary care providers, and it helps to sort out which cervical abnormalities can be safely observed and which should be referred for evaluation.

We also included some practical tips on how to make difficult pelvic examinations easier. What this really means for the patients is decreased worry over benign lesions such as Nabothian cysts, or the need for procedures, such as removal of small endocervical polyps.

Our next research project in this area will be a comprehensive review of all the endocervical polyps removed at the Mayo Clinic over the last 15 years. We will look more closely at those which are not benign, and attempt to tease out any risk factors associated with precancerous or cancerous changes in these polyps.

There are two take away messages for readers of this article. One is that some common cervical lesions such as ectropian, Nabothian cysts, and small cervical polyps can be safely watched. The other is that other conditions, including bleeding after intercourse, cervical endometriosis, and prior exposure to the hormone diethylstilbestrol, or more commonly known as DES, should prompt a gynecology consultation.

We hope that this article proves to be a valuable and meaningful addition to the tool box of any practicing clinician seeing women in their practice.

SPEAKER: We hope you benefited from this presentation based on the content of Mayo Clinic *Proceedings*. Our journal's mission is to promote the best interests of patients by advancing the knowledge and professionalism of the physician community.

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