Reviewer’s report

Title: Prevalence and predictors of cervical epithelial cell abnormality among women attending gynecological examination in cervical cancer screening unit at Debremarkos referral hospital, East Gojjam, Northwest Ethiopia

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Reviewer: Simona Stolnicu

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Title: Prevalence and predictors of cervical epithelial cell abnormality among women attending gynecological examination in cervical cancer screening unit at Debremarkos referral hospital, East Gojjam, Northwest Ethiopia

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Cervical cancer is the most common cancer among women in the developing countries and the association with the HIV infection increased the risk of cervical cancer development. The aim of this study was to determine the prevalence and risk factors of cervical epithelial cell abnormalities among women in Ethiopia since these data are limited so far.

The overall prevalence of Pap abnormal smears in this study was 14.1%, which is significantly higher than in European countries (including those ones who did not have a national screening program so far) and much higher than US and Canada (in which for decades the screening is running very well).

HIV infection, multiple sexual partnership, early ages of first sexual contact, parity greater than three and oral contraceptive usage were significant predictors of prevalence of abnormal Pap smears in this study.

I consider this manuscript interesting for publication. However, I have the following Major Compulsory Revisions and I would like to see the manuscript after these changes are made:

1. Background. Please carefully check the Bethesda system in order to correct the following paragraph, since there is one more category ASC-H that has to be included in the results and discussions.

The Bethesda System 2001 classifies ECA into four major categories as atypical squamous cells of undetermined significance (ASCUS), low-grade squamous intraepithelial lesion (LSIL), high grade squamous intraepithelial lesion (HSIL) and squamous cell carcinoma (SCC) which in turn promote specificity in mode of treatment.

2. Background. Please check the following sentences, as ASCUS, LSIL and HSIL are not cancer but precursor lesions and there is no stage of the disease for these lesions. Make separate comments for precursor versus invasive
carcinoma of the cervix regarding treatment.
The treatment options of patients with cervical cancer depend on the stage of the
disease. For women diagnosed with ASCUS and LSIL follow-up assessment
within certain time interval is a management option.

3. Please provide data regarding the correlation of the cases with abnormal
cytology with the colposcopic and pathologic findings.

4. Please carefully correct typing errors

Sincerely yours,

Prof. Simona Stolnicu
Department of Pathology, University of Medicine Targu Mures, Romania

**Level of interest:** An article whose findings are important to those with closely
related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

no competing interests