

# Kenya: prospects for early detection at primary level

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## **Abstract:**

To assess the feasibility of cytologic screening services for rural women and to establish the prevalence of abnormal cytology in Kenya. Women at four maternal and child health/family planning (MCH/FP) clinics were screened, and some screens were repeated. After Pap staining they were graded in classes I-IV, where abnormal smears referred to classes III and IV. The prevalence of abnormal cytology was 2.9% and 2.6% for the first and second screen, respectively. Enrolled community nurses took adequate smears and were able to diagnose overt lesions of the cervix. Training of technicians in cytologic techniques and setting up of a network of laboratories down to district level was considered feasible. Cytology services may be extended to rural populations through existing MCH/FP clinics. Enrolled nurses can take adequate cervical smears and diagnose overt cervical lesions, and could be used in a downstaging and screening program extending to rural areas.