

ABSTRACT

INTRODUCTION: Cancer of the cervix, the second most common cancer in women worldwide can be dramatically reduced by screening of Pap or cervical smears in order to detect dysplasia or precancerous changes which can be treated. The risk factors associated with the development of cervical cancer include age at first sexual intercourse, multiple sexual partners, sexually transmitted infections (especially Human Papilloma Virus), smoking and not taking a Pap test, among others. The incidence of cervical cancer is also highest among poor women in developing countries. **METHODS:** Participants in this cross sectional study were women who voluntarily went to the Nairobi clinics to have Pap smear tests. The Pap smears were taken, processed and screened at the FHOK clinics and the results given to the participants by the clinicians. Data was collected using questionnaires and laboratory results and was analyzed using Epi Info version 3.3 statistical software. **RESULTS:** A total of 194 Pap smears were collected and screened between the month of April and June 2008. The combined prevalence of cervical cell abnormalities and inflammatory changes was 91 (46.9%). Of these cases, 27 (13.9%) were infections while 6 (3.1%) were cervical cell abnormalities and 58 (29.9%) of the rest were inflammatory changes due to other causes, mainly the use of IUCD contraception (33 cases), 1 case of atrophic cervicitis and 24 cases of non-specific causes. One hundred and three (53.1%) Pap smears were negative for either inflammation or cervical cell abnormalities. **CONCLUSIONS:** Cervical dysplasia and inflammatory changes are present in women attending FHOK clinics in Nairobi but women of low economic status and other related risk factors were not captured in the screening program. For a screening program to be successful all women should have access to Pap test and that both the private and public healthcare facilities should be equipped for the same.