



Original Article

Socio-Demographic and Clinical Profile of Women with Cervical Cancer in a Tertiary Care Centre in India: A Cross-Sectional Study

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ABSTRACT

Background: Cervical cancer remains one of the leading causes of cancer-related morbidity and mortality among women in developing countries. Despite being largely preventable through screening and vaccination, late presentation remains common in India.

Objective: To evaluate the socio-demographic and clinical profile of women diagnosed with cervical cancer in a tertiary care centre.

Methods: A cross-sectional observational study was conducted in the Department of Obstetrics and Gynaecology at Pacific Institute of Medical Sciences, Umarda, Udaipur, Rajasthan. A total of 92 women diagnosed with carcinoma cervix were included over 18 months. Data regarding socio-demographic characteristics, reproductive history, awareness regarding cervical cancer, screening practices, clinical presentation, and stage of disease were collected using a structured proforma.

Results: The mean age at diagnosis was 48.2 ± 7.5 years, with the majority of patients (48.91%) belonging to the 41–50 years age group. Most women were illiterate (67.39%), manual labourers (46.74%), and belonged to lower socioeconomic class (69.57%). Awareness regarding cervical cancer was present in only 3.26%, while knowledge about HPV vaccination was reported by 1.09% of participants. Only 2.17% had previously undergone Pap smear screening.

Conclusion: Women with cervical cancer in this study predominantly belonged to lower socioeconomic and poorly educated backgrounds and presented with advanced stage disease. The findings highlight the urgent need to improve awareness, screening coverage, and HPV vaccination programs.

Keywords: Cervical Cancer, Socio-demographic Profile, Pap Smear Screening, HPV Vaccination, Awareness and Prevention.

INTRODUCTION

Cervical cancer remains one of the most common malignancies affecting women worldwide and is the fourth most common cancer among women. India accounts for nearly one-quarter of the global burden of cervical cancer.

Persistent infection with high-risk human papillomavirus (HPV), particularly HPV types 16 and 18, is responsible for the majority of cervical cancer cases. Socio-demographic factors such as low socioeconomic status, illiteracy, early age at marriage, multiparity, and lack of awareness regarding screening play an important role in disease development and late presentation.

Understanding the socio-demographic and clinical characteristics of cervical cancer patients is essential for developing targeted prevention and screening strategies.

MATERIALS AND METHODS

Study Design: Cross-sectional observational study.

Study Setting: Department of Obstetrics and Gynaecology, Pacific Institute of Medical Sciences, Umarda, Udaipur, Rajasthan, India.

Study Duration: 18 months.

Sample Size: 92 patients.

Inclusion Criteria:

- Women diagnosed with carcinoma cervix
- Patients willing to participate and provide consent

Exclusion Criteria:

- Patients with pre-invasive cervical lesions
- Patients with other cervical pathologies
- Patients unwilling to participate

Statistical Analysis: Data were analyzed using MedCalc software version 22. Qualitative variables were expressed as percentages and frequencies.

RESULTS

A total of 92 patients with cervical cancer were included.

Age Distribution: The majority were aged 41–50 years (48.91%), followed by 30–40 years (22.83%), 51–60 years (21.74%), and ≥61 years (6.52%).

- **Education:** Most women were illiterate (67.39%).
- **Occupation:** 46.74% were manual labourers.
- **Socioeconomic Status:** 69.57% belonged to lower socioeconomic class.
- **Awareness and Screening:** Only 3.26% were aware of cervical cancer and 1.09% knew about HPV vaccination. Only 2.17% had undergone Pap smear screening.
- **Clinical Presentation:** The most common symptom was foul-smelling vaginal discharge (55.43%), followed by post-coital bleeding (31.52%).
- **Stage at Diagnosis:** Nearly 48.92% were diagnosed at stage III disease.

DISCUSSION

The present study highlights the association of cervical cancer with low socioeconomic and educational status. The majority of patients were illiterate and from economically disadvantaged backgrounds, which may contribute to poor awareness and delayed health-seeking behaviour.

Very low screening uptake was observed, with only a small proportion of patients having undergone Pap smear testing before diagnosis. Most patients presented at advanced stages of the disease.

These findings emphasize the importance of strengthening screening programs, increasing awareness, and improving access to preventive services such as HPV vaccination.

SUMMARY AND CONCLUSION

The study was conducted in Pacific Institute of Medical Science, Sai Tirupati University, Udaipur. Total 92 patients were included in this study. Detail history about sociodemographic and reproductive profile of all patients were taken. The following observations were made:

SUMMARY

1. Majority of patients were found in the age group of 41-50 years.
2. Most of the cervical cancer women were belonged to Hindu religion 70 (76.09%).
3. Most of the 62 women were illiterate (67.39%) or had lower primary education (29.35%) and hence ignorant.
4. According to Kuppuswamy classification 65% cervical cancer patients belonged from lower socio economic class leading to poorer hygiene and dietary insufficiency.
5. In the present study, majority of the patients were manual worker occupation, which was 46.74%.
6. In present study, most of the patients had normal range 49 (53.26%).
7. Majority of 51 (55.43%) patients were age of menarche is <13 years.
8. Most of the women had 1st time pregnant in the age of 17-19 years, which is 48.91%.
9. Most common obstetric history was grand multipara 51(55.43%) and second most common obstetric history was multipara 37 (40.22%).
10. In present study, 23 (25%) patients used used condoms as a form of contraceptive and 6 (6.52%) patients had used OC pills.
11. 17 (18.48%) patients used to consume tobacco and 12 (13.04%) patients used to consume alcohol.
12. only 3 (3.26%) women knew about carcinoma cervix and only 1 women had knowledge HPV vaccine, among all

only 2 patients had history of pap smear screening in past before diagnosis of cancer, but didn't go for regular follow up and repeat screening.

13. Gross negligence had been observed by almost 95.65% of patients, leading to diagnosis in advanced stage.
14. Most common symptoms were excessing foul smelling white discharge in cervical cancer, which 51 (55.43%) and second and third most common symptoms were post coital bleeding and menorrhagia 29 (31.52%) and 26 (28.56%) respectively.
15. Most of the patient was diagnosed at very late stage that is at stage IIIB. Among them 45 (48.92%) were diagnosed at very late stage III.
16. Most of the women 65 (70.65%) had Ignorance and unavailability of local health services in their area and second most common cause of delay in diagnosis had Ignorance of patients and relatives 16 (17.39%)

CONCLUSION

In India, there are very few studies describing profile of cancer patients visiting health-care facilities. Ignorance about the disease and the lack of awareness of the risk factors, need and availability of screening programmes at low cost in Government health care systems was noteworthy. As a result cancer cervix is being diagnosed in advanced stage of disease leading to very high morbidity & mortality. The information gathered can be helpful in formulating proper guidelines, public health policies and implementation of cancer control programs.

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