SUCCESSFUL IMMUNOTHERAPY WITH IMIQUIMOD IN VAGINAL INTRAEPITHELIAL LESION – A CASE REPORT

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Introduction/Background: Imiquimod is an immune response stimulator often used in the management of various clinical manifestations of human papillomavirus (HPV) infections. Surgical treatment of vaginal intraepithelial lesions is often difficult and not always feasible. According to literature therapy with 5% imiquimod seems to be a safe mode of treatment for high grade genital intraepithelial lesions (HSIL) in selected patients, especially for vaginal and vulvar HSIL. The aim of this report is to present 5% imiquimod therapy as an alternative to surgical procedures in patient with vaginal intraepithelial lesion.

Methodology: 55-year-old postmenopausal woman was referred to our department with high-grade squamous intraepithelial lesion (HSIL) and HPV-related changes on her Pap test. Also, patient presented with lesion on left vaginal fornix which cytology result was consistent with SIL. The patient underwent conization, resulting in a pathological diagnosis of grade 2/3 cervical intraepithelial neoplasia (CIN). Also, excision of vaginal lesion in left fornix revealed vaginal intraepithelial neoplasia (VaIN) grade 2/3. Neoplastic changes involved resection margins on both specimens. Total abdominal hysterectomy with resection of vaginal fornices and bilateral salpingo-oophorectomy were performed. Histological examination revealed VaIN 3. One year after the surgery, a follow-up vaginal smear demonstrated VaIN 1. Therefore, biopsy was performed leading to a pathological diagnosis of VaIN 1/2. Treatment was initiated with topical imiquimod 5% cream, three times per week, for 8 weeks.

Results: Follow-up vaginal smear and colposcopy findings after completion of therapy were all negative for intraepithelial lesion or malignancy. As of 4 years after the imiquimod treatment, there has been no signs of recurrence.

Conclusion: Combined treatment modalities may hold the key to optimal treatment of genital HSILs and the treatment must always be individualised. However, there are currently no studies assessing efficacy of imiquimod topical treatment with traditional surgical modes of treatment.