الآيـة

قال تعالى:

{اعْلَمُوا أَنَّمَا الْحَيَاةُ الدُّنْيَا لَعِبٌ وَلَهْوٌ وَزِينَهٌ وَتَفَاخُرٌ بَيْنَكُمْ وَتَكَاثُرٌ فِي الأَمْوَال وَالأَوْلَادِ كَمَثَل غَيْثٍ أَعْجَبَ الْكُفَّارَ نَبَاتُهُ ثُمَّ يَهِيجُ فَثَرَاهُ مُصْفَرًا ثُمَّ يَكُونُ حُطَامًا وَفِي الْآخِرَةِ عَذَابٌ شَدِيدٌ وَمَعْفِرَةٌ مِنَ اللَّهِ وَرضْوَانٌ وَمَا الْحَيَاةُ الدُّنْيَا إِلَّا مَتَاعُ الْعُرُور}

صدق الله العظيم سورة الحديد الآية (20)

Dedication

This dissertation dedicated to my parents who taught me to get up after a fail and start again and for their endless love and support.

To my brothers and sister.

To my colleagues and my friends who have always helped me and believed that I could do it.

And also to my supervisor and teaching staff for their devotion to education. Lastly,

To those who are interested in histopathology and cytology in the world.

Acknowledgment

Firstly, my gratitude and prayers to Allah for his mercy and guidance throughout the long path of this research. I owe so much to my supervisor **Dr. IbrahimBakhitYousif** for his close supervision, valuable advices and stimulating suggestions. His pleasant personality made it easy for me to do this project and complete the research. I really do appreciate the assistance and patience of the College of Medical Laboratory staff. Last but not least, I would like to thank everyone who contributed by any means in this study from the beginning, during the processing of the specimens or through the final stage. Finally, I do thank all the participants for their kind cooperation.

Abstract

This is a descriptive, retrospective case study which was conducted at research laboratory in Sudan University of Science and Technology department of histopathology during the period from February to August 2017. The study aimed to detect the HPV-51 and cervical cancer patients using PCR technique, There by 40 formalin fixed embed tissue blocks of different cervical cancer type were collected.

The tissue blocks were cut by Rotary microtome, prepared for DNA Extraction and then the viral DNA was detecting using PCR and a garose gel electrophoresis, the Data was analyzed manually, frequencies and percentage were calculated.

The ages of patient were range between 30 to 70 years with mean age 50, Most of patient were more than 40 years representing 35/40 (88%) and the remaining less than 40 is 5/40 (12%).

The study showed that keratin cervical cancer represents 87% and Non-keratin is 13%.

The results of the DNA polymerase chain reaction of the human Papilloma virus were negative in all cervical tissue samples.

The study concluded that HPV-51 does not play a role in causing cervical cancer.

مستخلص الدراسة

أجريت هذه الدراسة الوصفية الإسترجاعية بمختبر الأبحاث قسم الأحياء الجزيئية بكلية المختبرات الطبية حجامعة السودان للعلوم والتكنولوجيا شعبة الانسجة المريضة خلال الفترة من مايو الى اغسطس ٢٠١٧م.

هدفت الدراسة إلى اكتشاف فيروس الورم الحليمي البشري -51 لدي مرضي سرطان عنق الرحم باستخدام تقنية تفاعل البلمرة المتسلسل وطريقة الفرز الكهربائي ، جمعت أربعون عينة ٤٠ نسيج محفوظة بالفورمالين ومثبتة في قوالب شمع البرافين من مختلف انواع سرطان عنق الرحم قطعت قوالب الأنسجة لشرائح رفيعة بواسطة المشراح الدوار ، جهزت لاستخراج الحمض النووي ومن ثم تم الكشف عن الحمض النووي الفيروسي باستخدام جهاز تدوير تفاعل سلسلة البوليميريز وطريقة الفرز الكهربائي على هلام الأغاروز ، وكان تحليل البيانات يدويا حيث حسبت الترددات والنسبة المئوية.

تراوحت أعمار المرضي بين ٣٠ و ٧٠ سنة بمتوسط عمر ٥٠ عاما، وكان معظم المرضى من الذين اعمار هن أكثر من ٤٠ سنة و يمثلون ٤٠/٥ (٨٨٪) والباقي أقل من ٤٠ سنة ويمثلون ٥٠/٠ بنسبة (...).

أوضحت الدراسة ان سرطان عنق الرحم الكيراتيني يمثل ٨٧ ٪وغير الكيراتيني يمثل ١٣٠٪ كانت نتائج تفاعل سلسلة البوليميريز للحمض النووي لفيروس الورم الحليمي البشري نوع -51 سلبية

في جميع عينات نسيج عنق الرحم.

خلصت الدراسة إلى أن لفيروس الورم الحليمي البشري نوع -51 ليس له دور في تسبيب سرطان عنق الرحم.

List of tables

No	Title	Page
Table (4-1)	the age frequency among study population	18
Table (4-2)	The frequency of histological types	19
Table (4-3)	DNA testing of HPV -51 among cases	20

List of abbreviations

Abbreviation	Full term
HR	High rick
LR	Low rick
DNA	Deoxyribonucleic Acid
HPSGs	Heparin Sulfate Proteoglycans
HPV	Human papilloma Virus
HR-HPV	High Risk Human papilloma Virus
IARC	International Agency for Research on Cancer
ICTV	International Committee on Taxonomy of Viruses
NALB	Nucleic Acid lysis Buffer
PCR	Polymerase Chain Reaction
PV	papilloma Virus
TZ	Transformation zone
CIN	Cervical interaepithelial neoplasia
VIN	Valvular interaepithelial neoplasia
VAIN	Vaginal intraepithelial neoplasia
RICK	Radiation and isotypes center of Khartoum
NCI-UG	National cancer institute of the university of Gezira
A	Agent
Е	Early
L	Late
PAP	Papanicolaou
ICC	Interview cervical cancer
P16NK4A	Protein 53
PRb	Retinoblastoma protein

List of Contents

No	Topic	Page
	Verse content of Quran	I
	Dedication	II
	Acknowledgment	III
	English abstract	IV
	Arabic abstract	V
	List of tables	VI
	List of abbreviations	VII
	List of contents	VIII
	Chapter one Introduction	
1.1	Introduction	1
1.2	Rationale	2
1.3	Objectives	3
1.3.1	General objectives	3
1.3.2	Specific objectives	3
	Chapter two Literature review	
2.1	The uterine cervix anatomy	4
2.2	Worldwide cervical cancer epidemiology	4
2.3	epidemiology of cervical cancer in Sudan	5
2. 4	Human papillomavirus	6
2. 4.1	HPV classification	6
2.4.2	HPV genome	7
2.4.3	The HPV infection	8
2.4.4	Onset of infection	10
	Chapter three Materials and methods	
3.1	Study design	13
3.2	Study area	13
3.3	Study duration	13

3.4	Study population	13
3.5	inclusion criteria	13
3.6	Exclusion criteria	13
3.7	Ethical consideration	13
3.8	Sample size	13
3.9	Data collection tools and variables	13
3.10	Data presentation	13
3.11	Data analysis	14
3.12	Sample processing	14
3.13	Methods of detection	14
3.14	DNA extraction from histological paraffin sections	14
3.14.1	Removal of paraffin	14
3.14.2	Digestion of protein	15
3.14.3	Precipitation and Isolation of DNA	15
3.15	Polymerase Chain reaction (PCR) method	15
3.15.1	HR-HPV PCR detection	15
3.15.2	Gel electrophoresis	16
	Chapter four Results	
4.	Results	17
	Chapter five Discussion, conclusion and recommendations	
5.1	Discussion	21
5.2	Conclusion	23
5.3	Recommendations	24
	References and Appendix	L.
	References	25
	Appendix	33