

Table 2.2. Cross-sectional and case–control studies of *S. haematobium* and cervical cancer

Reference, study location and period	Characteristics of cases	Characteristics of controls	Detection method	No. of exposed cases	Odds ratio* (95% CI)
Wright et al. (1982); Malawi; 1976–80	793 cervical biopsies with squamous cell carcinomas	824 biopsies with non-cancerous lesions (schistosomiasis)	Hiostological examination	25/793 (3.1%)	[0.3 (0.18–0.48)]
Moubayed et al. (1994); Dar El Salaam, United Republic of Tanzania; 1988–1990	4520 cervical biopsies from cancer registry with histologically confirmed cervical carcinoma	1945 cervical biopsies from cancer registry with non-cancerous lesions	Histological examination	76/4520 (1.7%)	[0.4 (0.3–0.5)]
Parkin et al. (1994); Bulawayo, Zimbabwe; 1963–77	1263 cancer registry cases with cervical cancer	2347 cancer registry cases with malignant tumours with exclusion of cancers of the breast, corpus uteri, and uterus unspecified	Clinical history of bilharzia or haematuria	NR	Schistosomiasis was not considered a significant risk factor for cervical cancer

* Odd ratio calculated by the Working Group