

**Background:** Cervical cancers are some of the leading causes of deaths among women of reproductive age in the developing world and are commonly either diagnosed late or misdiagnosed. Abnormal cervical cytological results in HIV-positive women are much higher than what is found in the general population. Though Papanicolaou (Pap) smear is the gold standard in screening for cervical cancers, the method is not being used widely in the resource constrained countries. The methods that are currently being used are visual inspection with acetic acid (VIA) and visual inspection with Lugol's iodine (VILI

**Broad objective:** The objective of the study was to investigate Pap smear cytological outcomes in HIV positive women referred for visual inspection tests in Murang'a District Hospital.

**Methods:**in this comparative cross sectional study, 78 HIV positive women attending the reproductive health section of the CCC aged between 18 and 50 years were subjected to Pap smear VIA and VILI after consenting.

**Results:** The results showed majority of the HIV positive women (about 49%) were in monogamous marriage and about 24% were single and never married. The rest were either separated or widowed. Most respondents had less than 2 recent sexual partners. The positivity of Pap smear in this study was 11.5 %. Socio demographic characteristics and Pap smear results were not correlated in the study population. The positivity of both VIA and VILI in this study was 3.8 %. There was 100% concordance in results for VIA and

VILI. There were more abnormalities detected on Pap smear than on VIA/VILI (11.5% vs. 3.8%). The degree of agreement between Pap smear and VIA/VILI was weak, with a kappa (k) of -0.061.

**Conclusion:**There were no respondents found to be in polygamous marriage. Pap smear detected more abnormalities than VIA/VILI.

VIA/VILI shouldn't replace Pap smear as the primary screening tool for universal screening in Murang'a District Hospital.