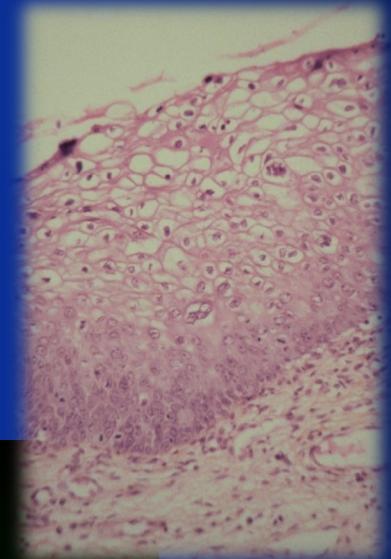


Cytologie anormale et Colposcopie Normale ou ... sans lésion visible

J-L Mergui



Unité de colposcopie & d'endoscopie gynécologique
Hôpital de la Pitié Salpêtrière
Paris

www.igogyneco.com



Mme H. Anita 61 ans

THM=0

ATCD conisation pour CIN1 2007

FCV ASC-H

→ Attitude ?

FCV contrôle sous E²

Colposcopie sous E²

Test HPV?

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curetage endocol impossible



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Attitude?
Conisation diag.
Contrôle cyto + viro?



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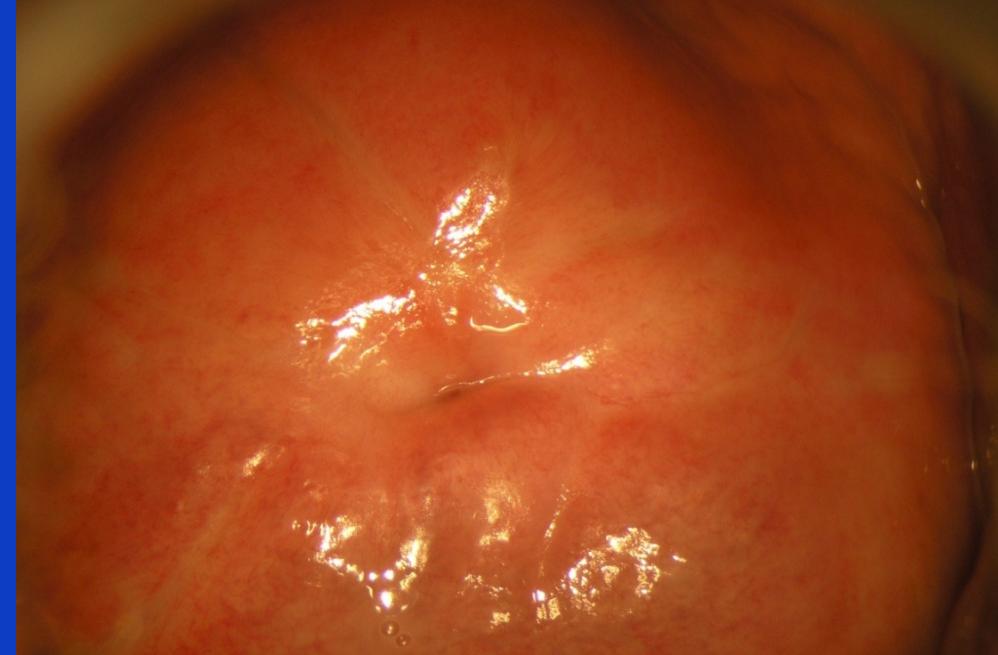
FCV ASC-H

Attitude?:

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Colposcopie sous E²

Test HPV?



Colpo col Normal JNV

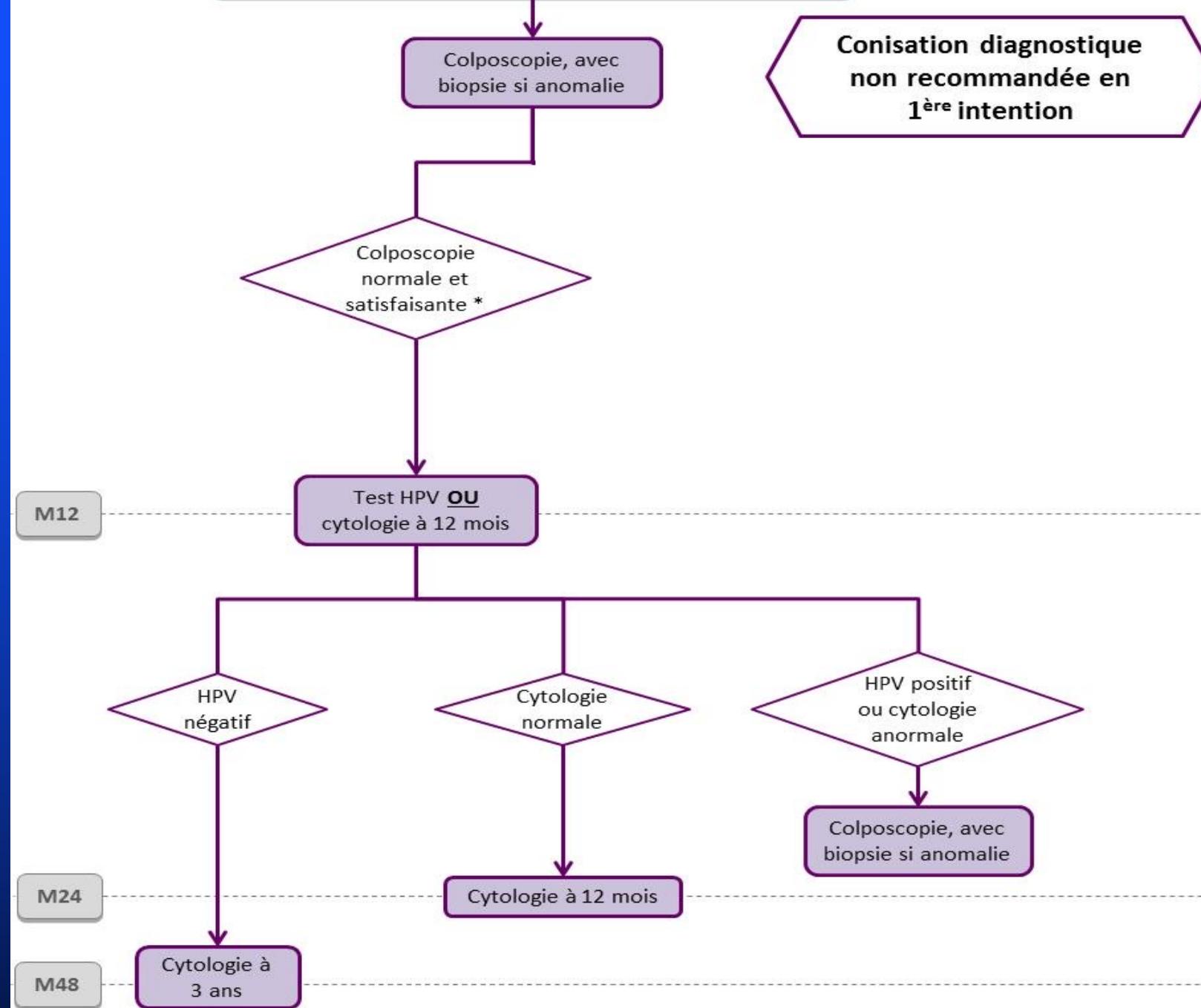
curetage endocol impossible

Attitude?

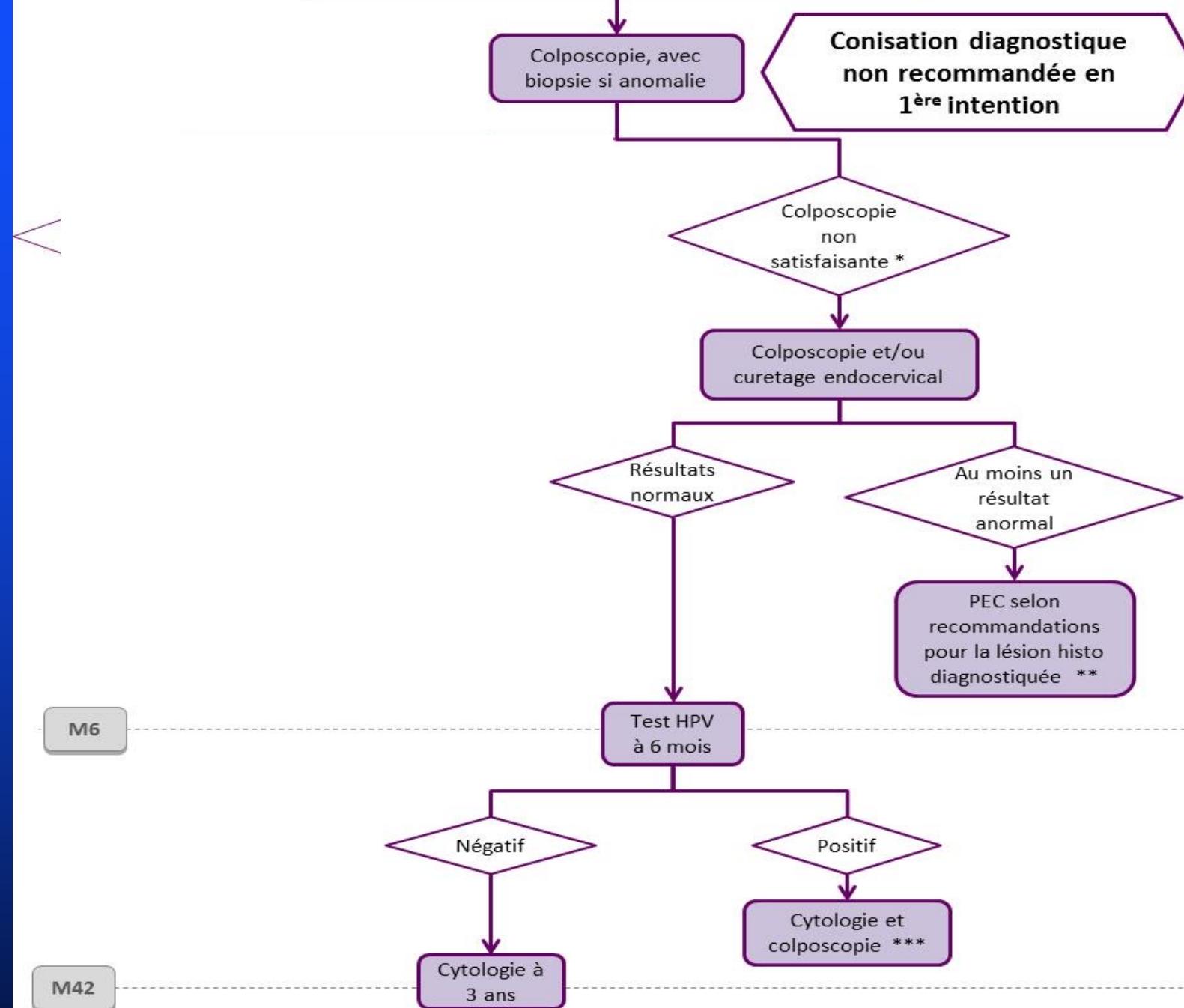
Conisation diag.

Contrôle cyto + viro : FCV Normal sous E² & Test HPV neg.

Cytologie ASC-H initiale



Cytologie ASC-H initiale



Cytopathology. 2015 Jun;26(3):178-87. doi: 10.1111/cyt.12173. Epub 2014 Aug 6.
A **normal colposcopy examination fails to provide psychological reassurance**
for women who have had low-grade abnormal cervical cytology.
Cotton SC, Sharp L, Little J, Gray NM, Walker LG, Whynes DK, Cruickshank
ME; TOMBOLA Group.

→Une colposcopie normale ne rassure pas tout le monde

727 women.

All **psychological measures** (except depression) had high prevalence at recruitment, falling substantially by 12 months.

During follow-up, the cumulative prevalence of
significant anxiety was 27%
significant depression was 21%.

The most frequently reported worry was that the next cytology test would be abnormal (cumulative prevalence of 71%; point prevalence of ≥50% at 12 and 18 months).

The cumulative prevalence values of worries about
cervical cancer 33%,
having sex 20%
Future fertility 16%





Mme Elisabeth L. 41 ans

- GOPO
- Tabac 10pqt/année
- CO aucune
- Aucun ATCD cytologique
- FCV = LIEHG

–Quelle attitude?

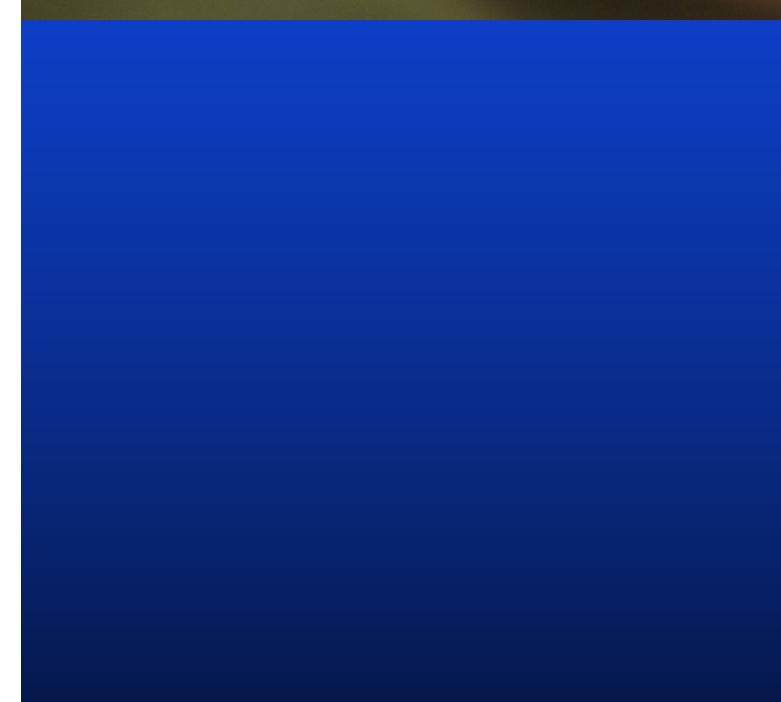
- » Contrôle cyto à 3-6 mois
- » Colposcopie
- » Test HPV

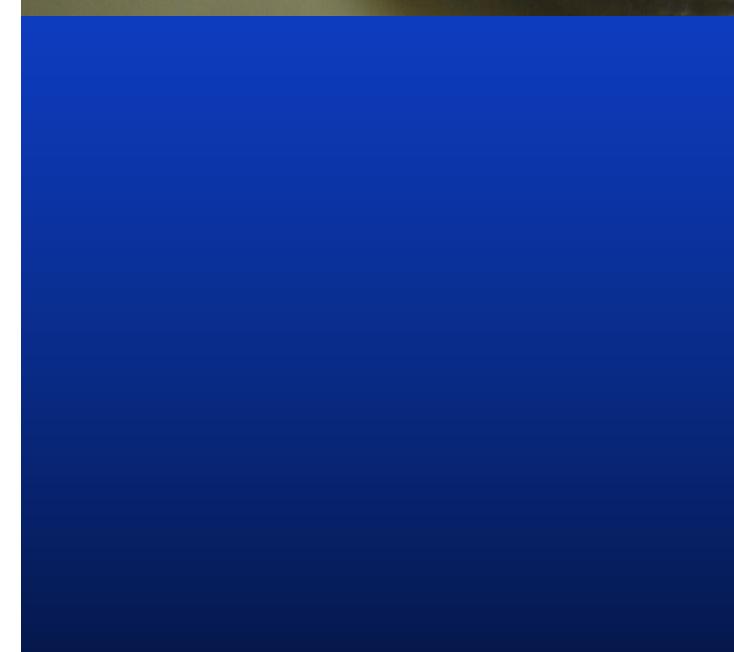
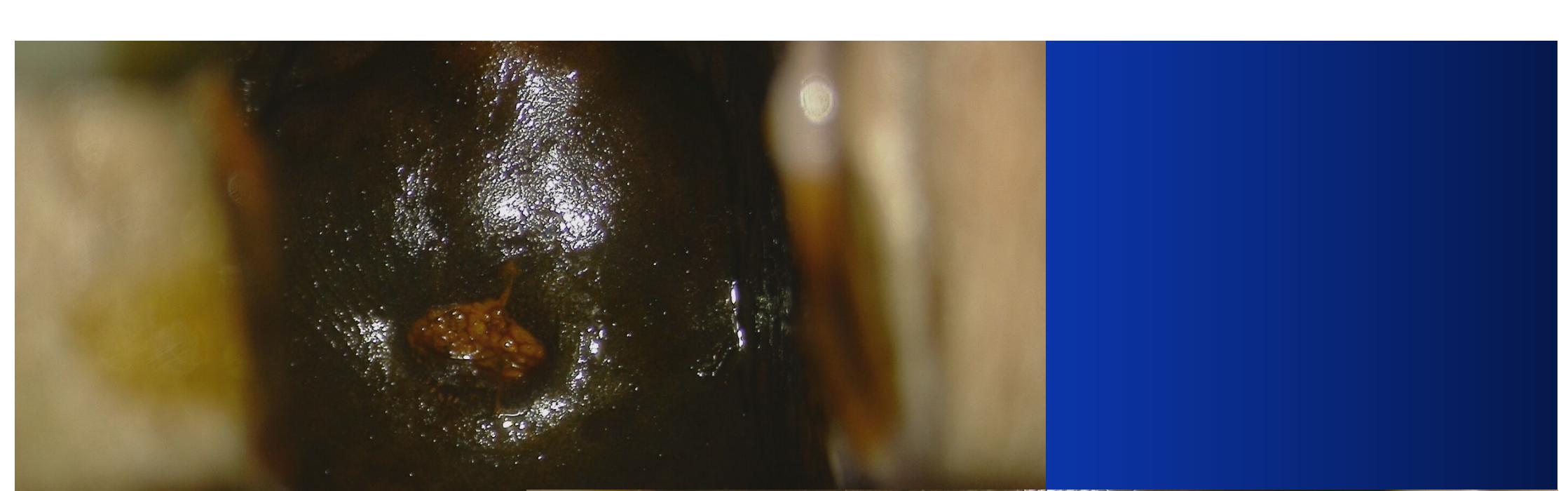
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–Quelle attitude?

- » Contrôle cyto à 3-6 mois
- » Colposcopie
- » Test HPV





Mme E. L. 41 ans FCU LIEHG

**Colposcopie Normale
TZ1 jonction vue**

Quelle attitude ?

- contrôle cytologique après 6 mois**
- appel au laboratoire**
- curetage endocol**
- Biopsies aux 4 quadrants**
- colposcopie de seconde ligne**

Mme E. L. 41 ans FCU LIEHG

**Colposcopie Normale
TZ1 jonction vue**

Quelle attitude ?

contrôle cytologique après 6 mois

appel au laboratoire

curetage endocol

Biopsies aux 4 quadrants

colposcopie de seconde ligne

Mme E. L. 41 ans FCU LIEHG

**Colposcopie Normale
TZ1 jonction vue**

Quelle attitude ?

contrôle cytologique après 6 mois

appel au laboratoire: confirmation du diagnostic

curetage endocol

Biopsies aux 4 quadrants

colposcopie de seconde ligne

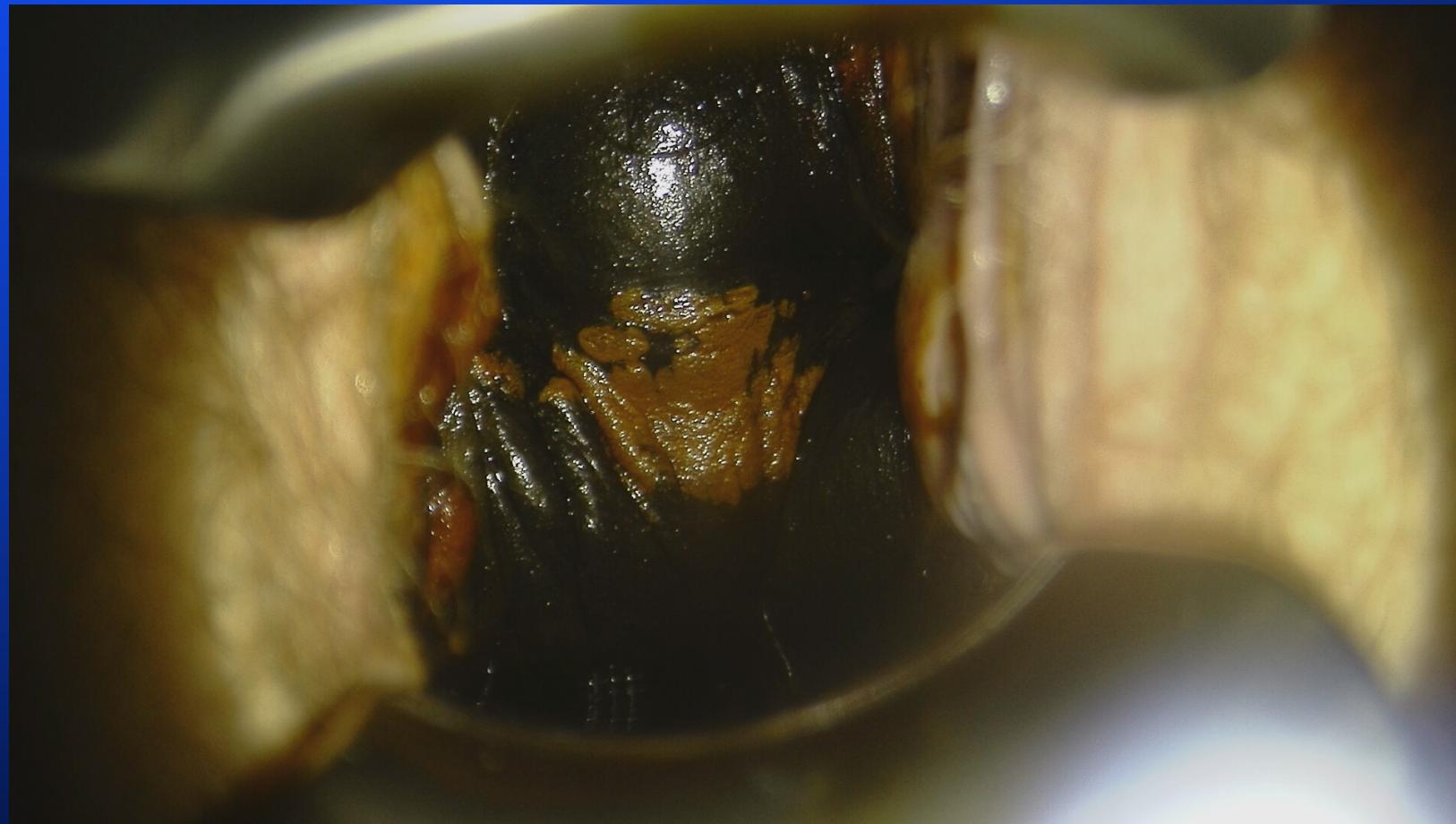
Mme E. L. 41 ans FCU LIEHG

colposcopie de seconde ligne

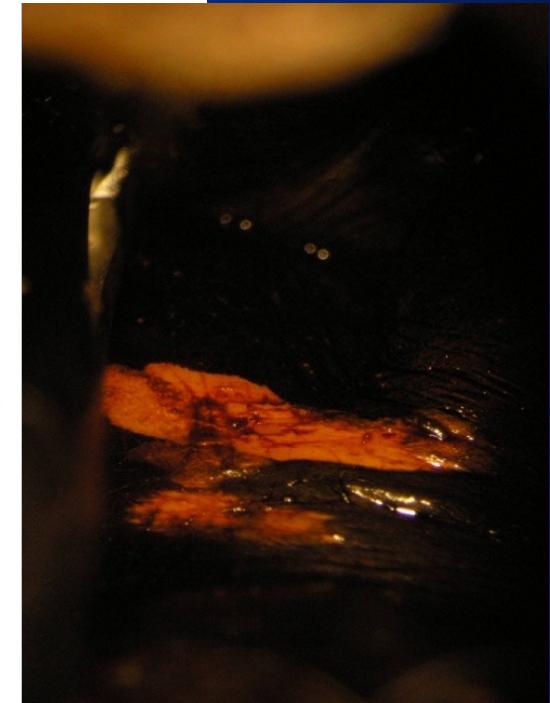
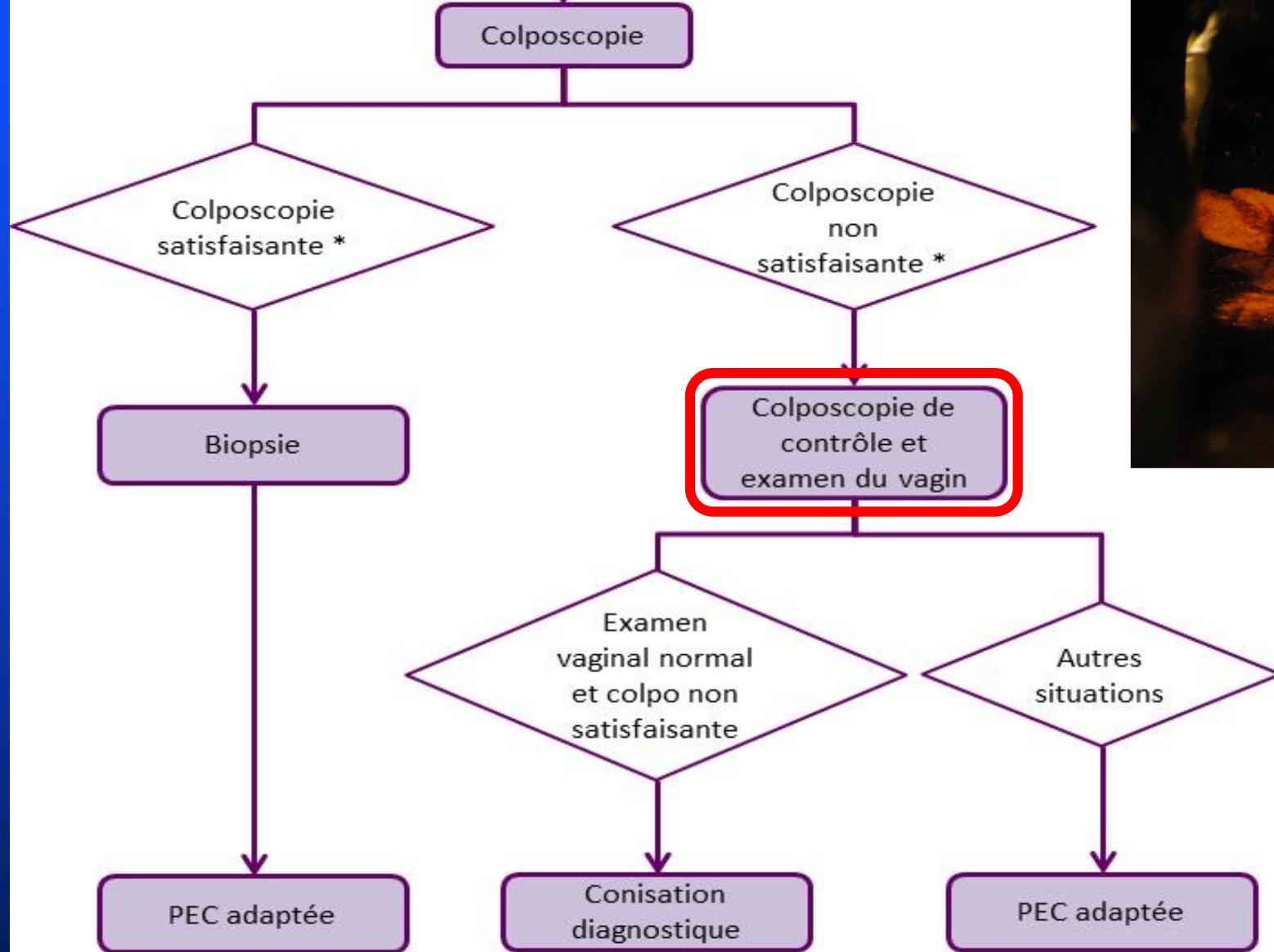


Mme E. L. 41 ans FCU LIEHG

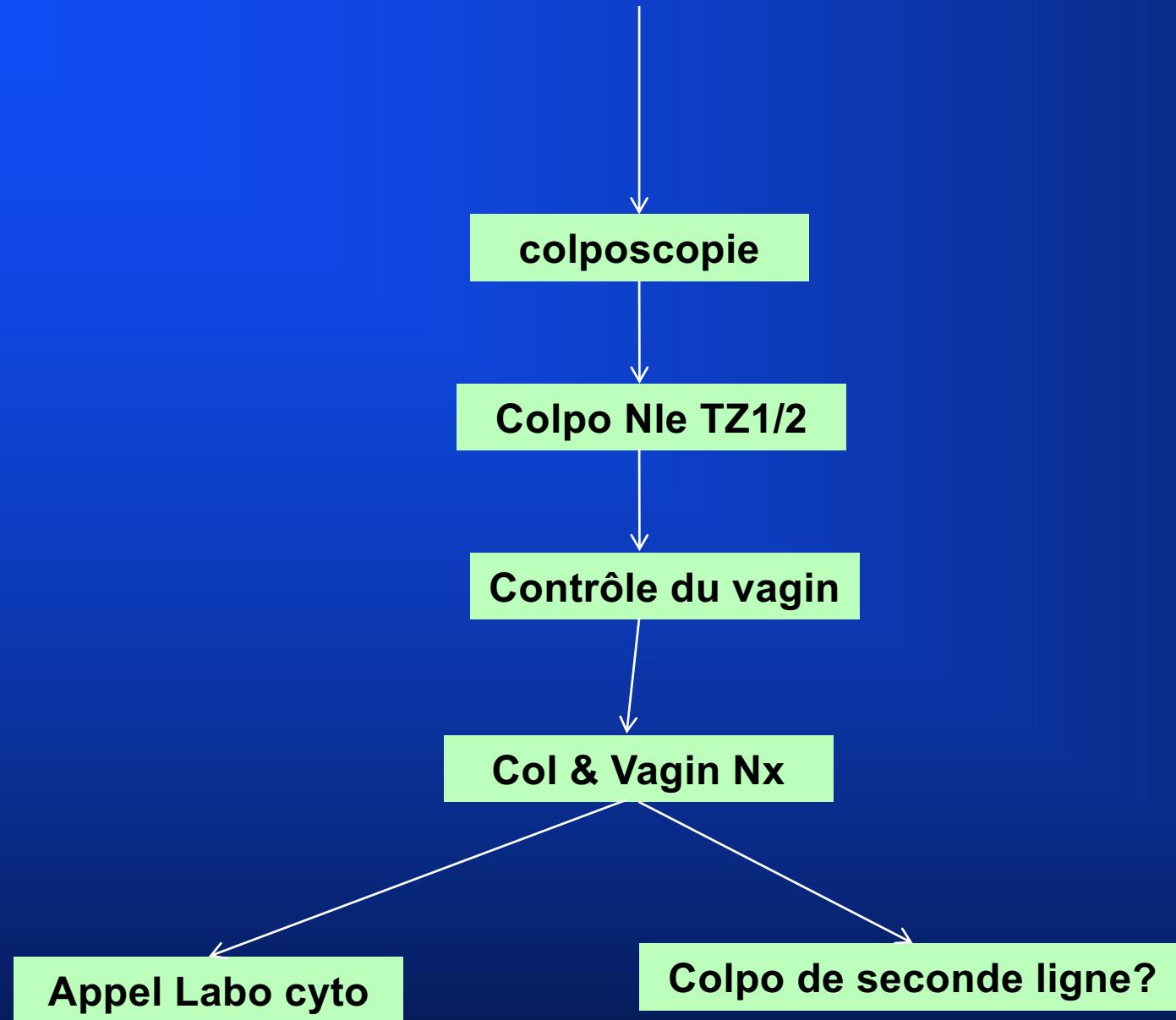
colposcopie de seconde ligne



Cytologie HSIL initiale



FCU LIE Haut Grade



Colposcopy and additive diagnostic value of biopsies from colposcopy-negative areas to detect cervical dysplasia

INGRID BAASLAND¹, BJØRN HAGEN^{2,3}, CHRISTINA VOGT^{3,4}, MARIT VALLA^{1,4} &
PÅL R. ROMUNDSTAD¹

Table 3. Colposcopy results by visibility of the squamocolumnar junction (SCJ) irrespective of histology.

	All women (<i>n</i> = 297)			Total <i>n</i>	
	Negative colposcopy results	Positive colposcopy results	<i>n</i>	%	
Visibility of SCJ					
SCJ not visible	29	94	2	6	31
SCJ partly visible	26	44	33	56	59
SCJ fully visible	92	44	115	56	207

Please cite this article as: Baasland I, Hagen B, Vogt C, Valla M, Romundstad PR. Colposcopy and additive diagnostic value of biopsies from colposcopy-negative areas to detect cervical dysplasia. *Acta Obstet Gynecol Scand* 2016; 95:1258–1263.

Table 4. Colposcopy results by histology in all women and in women with the squamocolumnar junction fully visible.

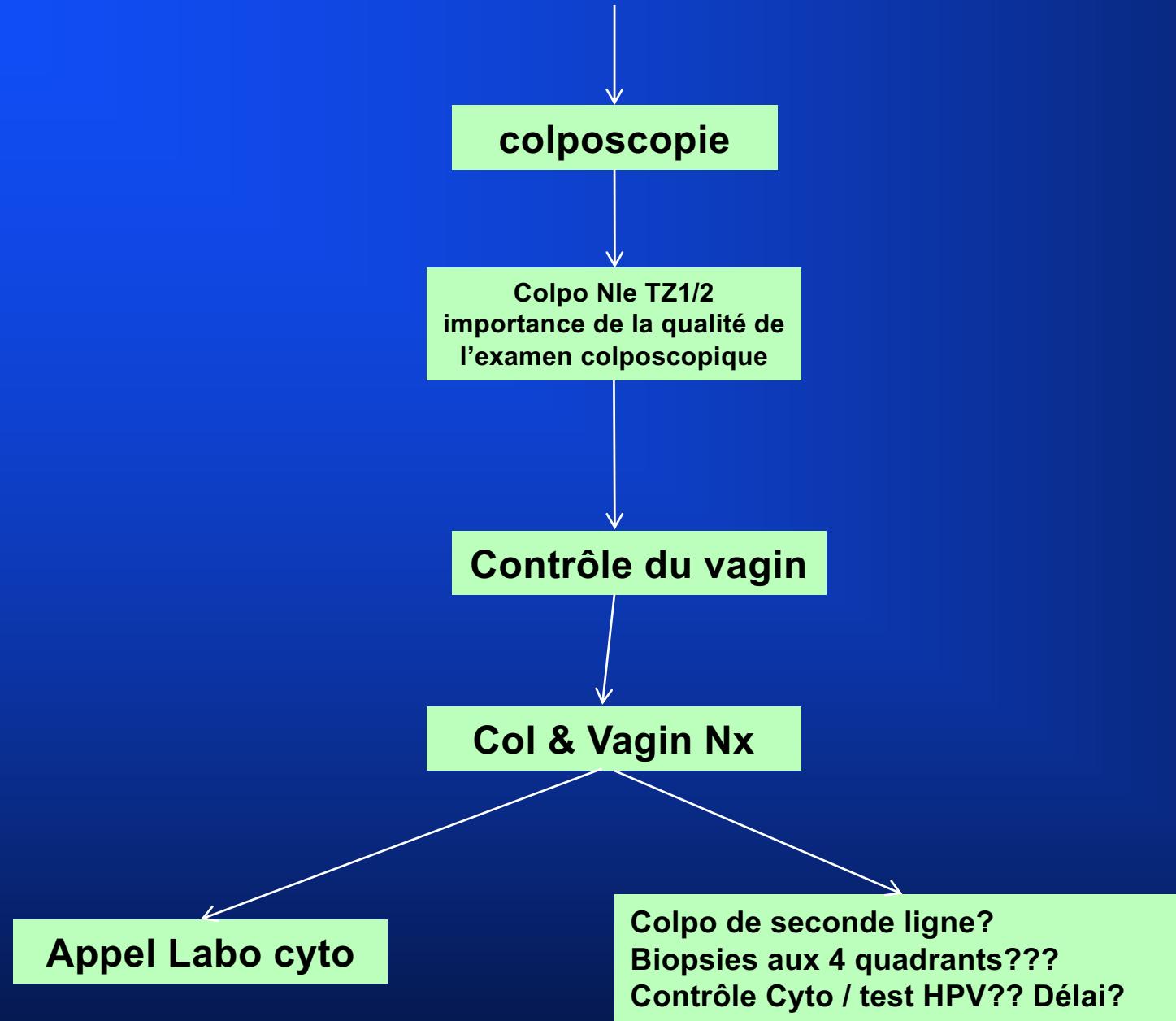
		Histology				
<CIN2		CIN2		CIN3/ACIS		
	n	%	n	%	n	%
All women						
Colposcopy results						
Negative	85	70	19	51	43	31
Positive	37	30	18	49	95	69
Total (%)	122	100	37	100	138	100
Women with the squamocolumnar junction fully visible						
Colposcopy results						
Negative	49	64	13	48	30	29
Positive	28	36	14	52	73	71
Total	77	100	27	100	103	100

Table 5. The distribution of diagnostic biopsies according to colposcopy results in women with histologically confirmed high-grade dysplasia and fully visible squamocolumnar junction ($n = 130$).

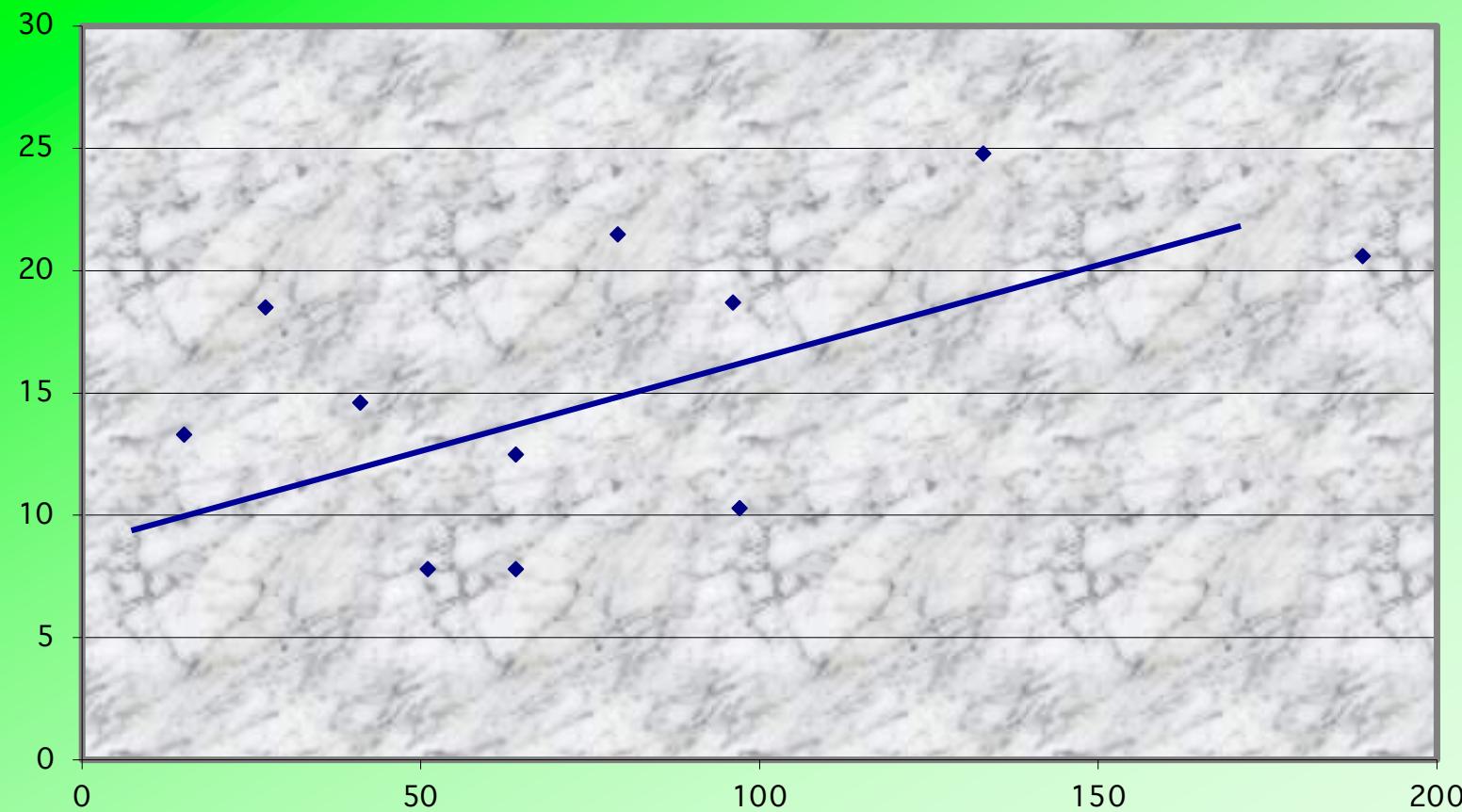
	Histology					
	CIN2		CIN3/ACIS		CIN2+	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Source of diagnostic biopsy						
Colposcopy-negative women	13	48	30	29	43	33
Colposcopy-positive women						
Biopsy outside lesion	2	7	6	6	8	6
Biopsy inside lesion	12	45	67	65	79	61
Total	27	100	103	100	130	100

- Pretorius et al. reported an additional CIN2+ yield of 37.4% by taking biopsies from both colposcopy-negative and colposcopy-positive quadrants.
- Our results among women with satisfactory colposcopy are similar, as we found an additional yield of CIN2+ of 39% from colposcopy-negative quadrants.
- In the ATHENA trial, one colposcopy-negative biopsy obtained from women with negative colposcopy detected 21% of CIN2+
- Nakamura 2015 only 1.2% de biopsies au hazard

FCU LIE Haut Grade



%CIN2-3

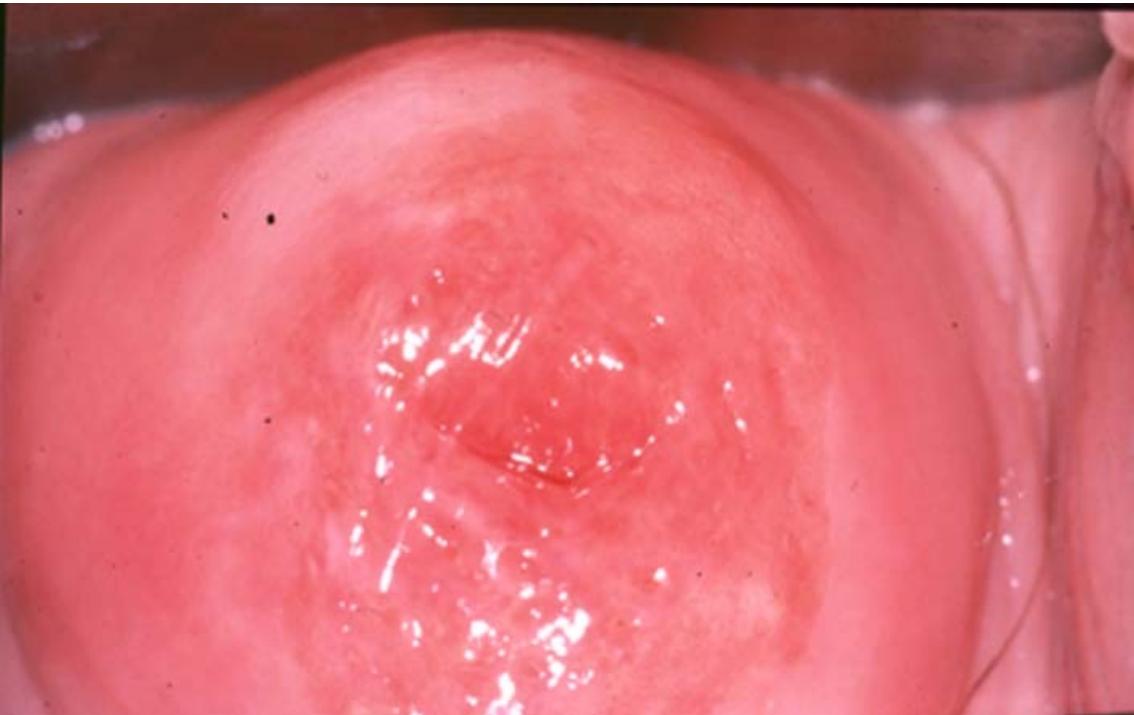


**Enquête
menée en 2005
par le groupe d'enseignement Nord-Picardie-Champagne**

JC Boulanger

Expertise de 60 dossiers colpo

→Experts versus praticiens

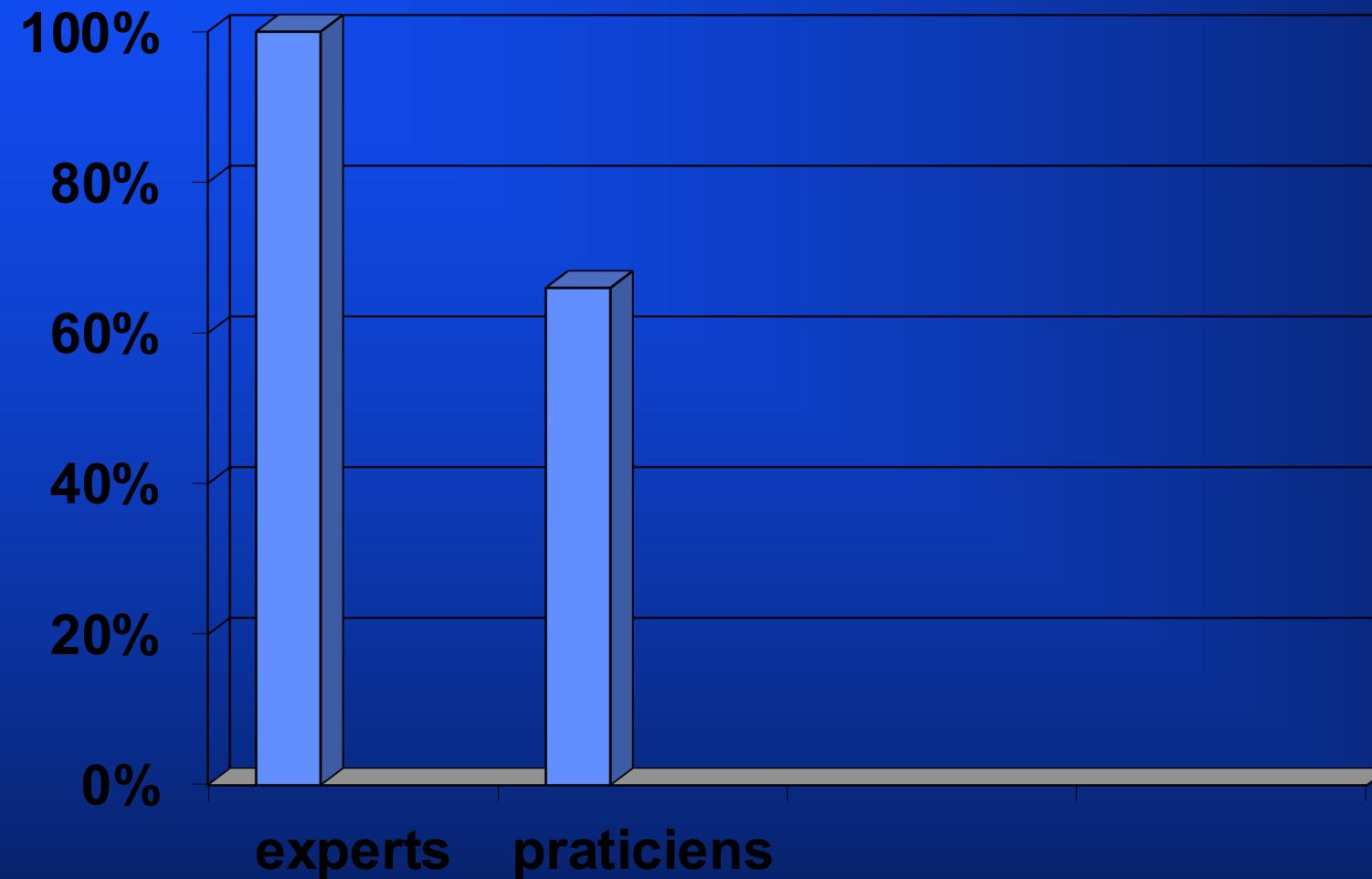


Cas n° 46

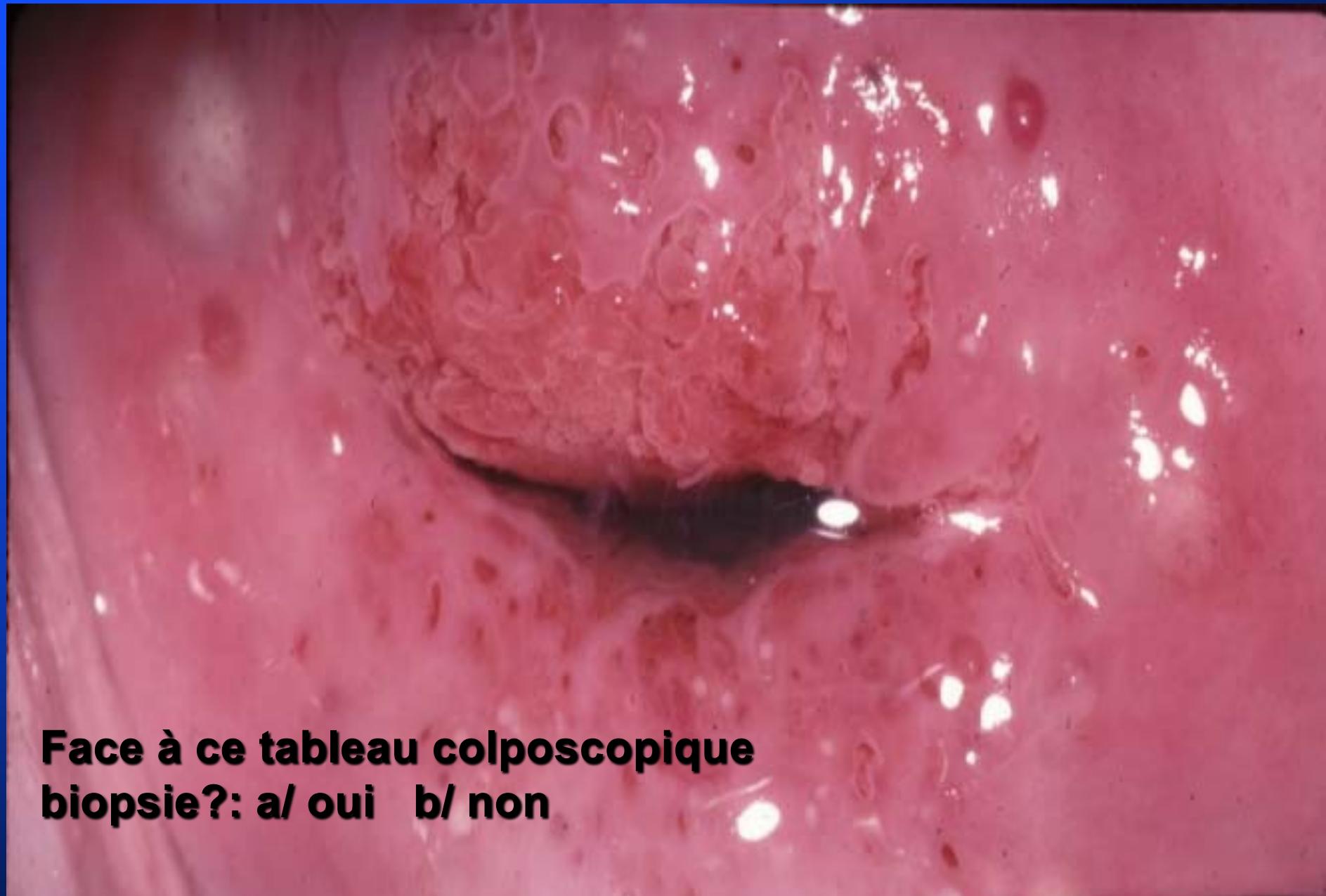
Face à ce tableau colposcopique, vous évoquez :

- a/ normal ou dystrophie
 - b/ TAG1
 - c/ TAG2
 - d/ suspicion d'invasion (ou de microinvasion)
- 

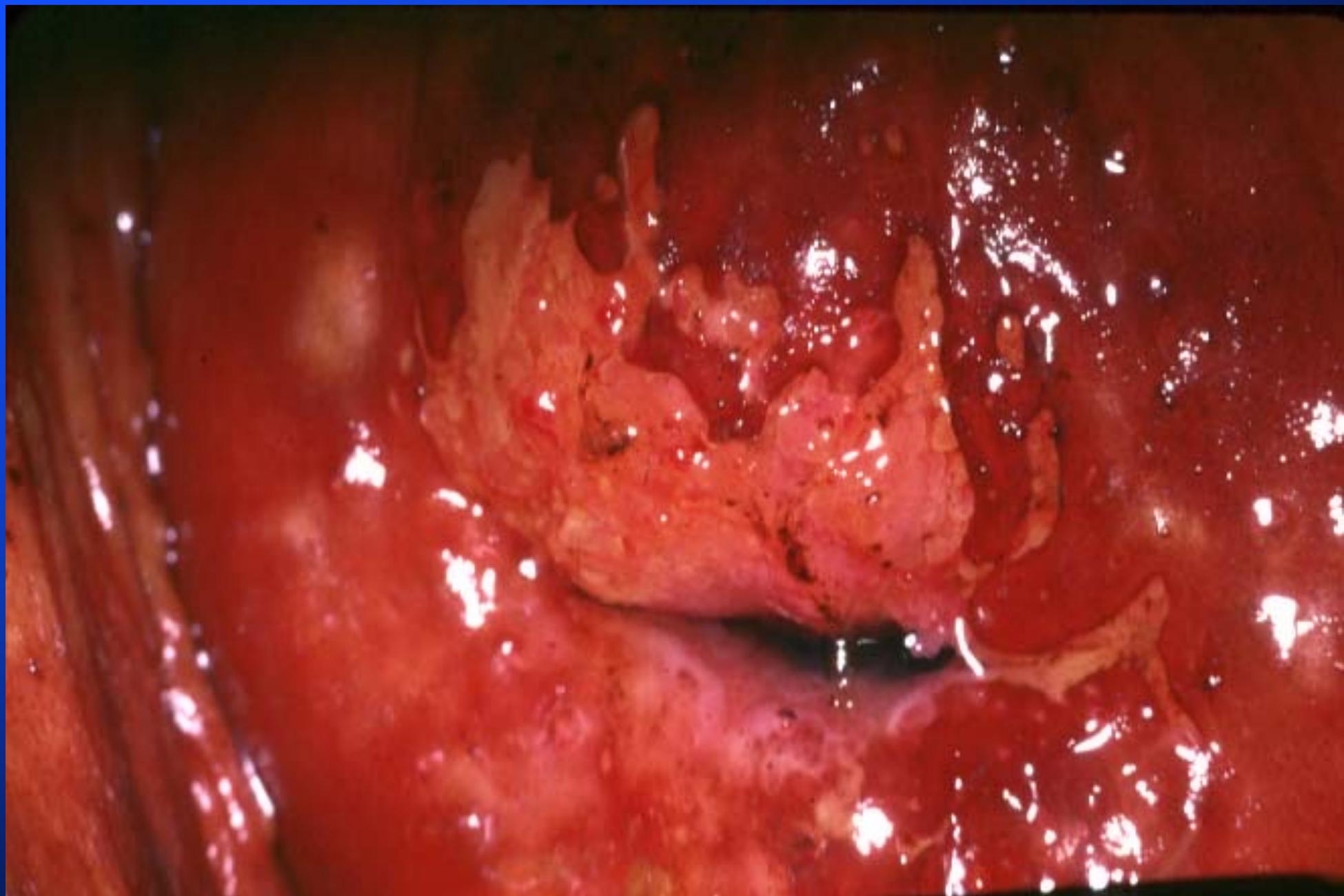
Résultats dossier 46: TAG 2



Cas n° 27



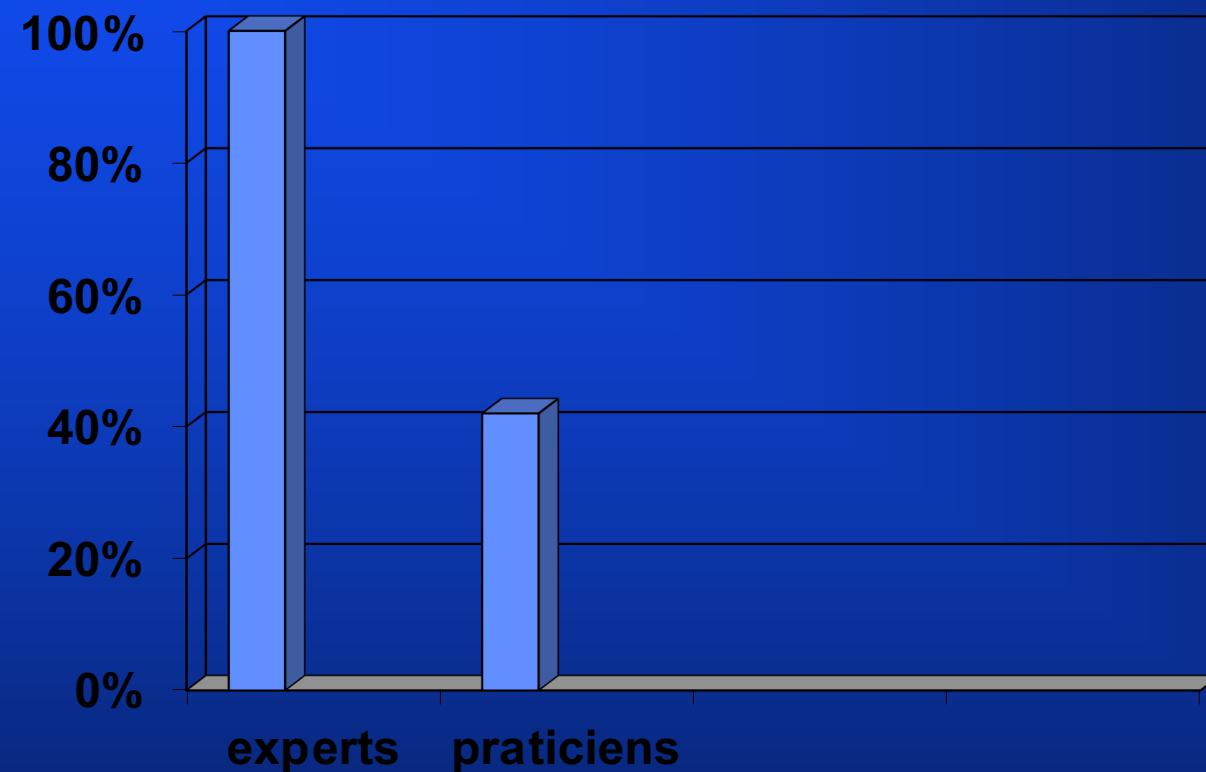
**Face à ce tableau colposcopique
biopsie?: a/ oui b/ non**



Cas n° 27

Résultats dossier 27

Pas de biopsie



Critères de qualité de l'examen colposcopique



#36108392

Critères de la Charte:

- formation initiale de qualité: DU
- activité personnelle suffisante: 50 nouveaux cas par an
- formation continue

Colposcopie Normale

MERCI
DE
VOTRE
ATTENTION

