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Prognostic value of human papillomavirus 16/18 genotyping in low-grade cervical lesions preceded by mildly abnormal cytology

Key words: Low-grade squamous intraepithelial lesion, Cervical intraepithelial neoplasia grade 1, Human papillomavirus(HPV), HPV16/18 genotyping, Prognostic value, Prospective study

Research Summary

1. Histological LSIL/CIN1 preceded by non-severe cytology are recommended for conservative follow-up, with no separated management.

2. This study assessed the triage value of human papillomavirus (HPV) 16/18 genotyping in this group of LSIL/CIN1s.

3. Based on our data, it makes sense to include HPV16/18 genotyping into the management of LSIL/CIN1 preceded by mildly abnormal cytology and aged 30 years or older.

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Innovation points

1. To our knowledge, this study is the first trial to assess the triage value of HPV16/18 genotyping in LSIL/CIN1 preceded by normal or mildly abnormal cytology.

2. More active managements, other than conservative follow-up, are rational for HPV16/18 positive LSIL/CIN1 preceded by mildly abnormal cytology and aged 30 years or older.

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