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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.

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.