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## Conventional Cytology and Different Liquid Base Cytology Methods: Are They All Similar in Sensitivity When Detecting Cervical Cancer?

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Recently, a publication looked at the effectiveness of liquid based cytology within the cervical cancer screening program of the Netherlands.

The analysis was based upon the cancer registry available in the Netherlands and the use of the PALGA database, which is a national registry of all cytology and histology reports related to the detection of cancer, including cervical cancer.

This previous publication reported that SurePath cytology found an increase in both low grade cervical lesions, or CIN1, as well as high-grade lesions, or CIN2+, relative to the use of the conventional smears.

Conversely, the same publication showed that the use of ThinPrep liquid based cytology did not change the detection of either low-grade or high-grade cervical lesions relative to the use of the conventional smear.

The current publication was an evaluation of the clinical significance of the increased detection of CIN2+ with the use of SurePath liquid based cytology.

The publication analyzed the effectiveness of liquid based cytology in comparison to conventional Pap smears by evaluating the likelihood that negative cervical cytology results would lead to the detection of biopsy-confirmed cervical cancer during the next round of screening, at five years, with data analyzed at year 6. Cervical cancer was either detected as clinically symptomatic cancer or cervical cancer detected by cytology.

The paper showed the following results:

- The use of SurePath resulted in a 27% lower likelihood of developing clinically symptomatic cervical cancer vs. the conventional smear.
- Conversely the use of ThinPrep was associated with a 56% increased likelihood of developing cervical cancer during the screening period vs the conventional smear.
- Direct comparison between SurePath and ThinPrep showed that SurePath vs. ThinPrep led to a 24% decrease in the detection of clinical cervical cancer and a 39% decrease in the detection of screen-detected cervical cancer.
- The use of SurePath as a primary test method resulted in 94.4 extra CIN diagnoses per 100 thousand screening samples.
- This was accompanied by a decrease of 11.9 cervical cancer cases per 100,000 in the 72-month cumulative incidence of cervical cancer.
- However, the use of ThinPrep versus conventional cytology showed quite different results.
- While the number of CIN diagnoses was similar to that with conventional cytology, the 72-month cumulative incidence of cervical cancer increased by 8.5 instances per 100,000 in the ThinPrep-tested group.

The authors concluded that these results strongly suggested that the sensitivity of SurePath to detect progressive CIN lesions was higher. The use of ThinPrep compared with the use of conventional cytology seemed to be associated with a higher cumulative cancer incidence, suggesting that the sensitivity to detect progressive CIN lesions was lower, although these results were non-significant. Say the authors, "Our findings should provoke reconsideration of the assumed similarity in the sensitivity for progressive CIN between the different types of liquid based cytology tests and conventional cytology."

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