EVALUATION OF INTRAOPERATIVE HPV TEST AS AN EARLY MARKER OF RESIDUAL DISEASE AFTER HSIL SURGICAL TREATMENT. A PROSPECTIVE MULTICENTER STUDY. PRELIMINARY RESULTS

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Introduction/Background
Objective To evaluate if the intraoperative human papillomavirus (IOP-HPV) test has the same prognostic value as the HPV test performed 6 months after treatment of high-grade squamous intraepithelial lesion (HSIL) to predict treatment failure.

Methodology
Design Prospective multicenter cohort study

Results
After LEEP an HPV test was performed immediately after excision using a Cobas (83%) or other genotyping test. Subsequently, patients were followed with citology and HPV test, 6, 12 and 24 months after treatment. The IOP-HPV test was compared with HPV test 6 months after procedure and with surgical margins in order to detect residual disease.

Conclusion Preliminary results show that IOP HPV test could be a satisfactory prognostic factor of cervical HSIL treatment result.

PATIENTS WITH TP53 MUTATION FOLLOWED UP IN A HEREDITARY GYNAECOLOGICAL CANCER UNIT

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Conclusion Patients carrying TP53 mutations have a high risk of developing breast cancer and should be followed in specialized hereditary cancer units, in tertiary hospitals.