**INTRODUCTION/BACKGROUND** The incidence of cervical carcinoma in Serbia is 20.11/100000, which means fourth in place in Europe this year. We would like to see the incidence of abnormal Pap smears in patients with low-grade squamous intraepithelial lesions (LGSIL) compared with the colposcope findings and in relation to the year of the patient’s life.

**Methodology** This was a retrospective study evaluating the results of the conventional Pap smear in 728 patients with LGSIL verified by analyzing samples taken by target biopsy between January 2008 and January 2012.

**RESULTS** The most common colposcopy abnormal image was mosaic (39.6%), with patients who had two or more abnormal colposcopy images 24.4% patients, the acetate-white epithelium (AW) (11.9%), atypical zone transformation (AZT) had 11.2%, leucoplakia 7.1%, punctuation had 3.2% and ectropion had 2.6%. Patients were from 18 to 64 years old. Distribution per age was till 20–5.9%, from 21 -30 was 40.1%, 31- 40;30.1%, 41–50;18.5% and over 51;5.4% patients. The number of patients with abnormal Pap smear compared to colposcopy images was: ectopia;42%, a typic transformation zone;46.4%, two or more colposcopy images; 46.6, AW 35.3%, leuokplakia; 28.3%, punctuation (ATZ); 16.6% and mosaic 13.9%. Incidence of abnormal Pap smear in patients till 20 years was 25%, from 21 -30 years was 67.3%, from 31 to 40 years was 27.6% and from 41–50 29.6% and over 50 was 38.5%.

**Conclusion** Our study showed that patients with LGSIL had abnormal Pap smears usually in populations from 21 to 30 years old and in groups who had two or more different colposcopy findings. This is very important because we need to extract this population in the beginning stadium of dysplasia for better and more intensive monitoring.

**Disclosures** Routine screenings in our country are cytology and coloscopy. Our problems are limited resources (women do not come to the examination) and HPV testing is not covered by regular insurance.

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**HPV AND ISTANBUL, AN INTERPRETATION OF THE HPV SCREENING IMPLEMENTED BY THE NATIONAL HEALTH MINISTRY**

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**INTRODUCTION/BACKGROUND** Screening for HPV is essential because it can detect the virus before it causes any symptoms or leads to the development of cancer. HPV screening is crucial in detecting HPV infections before they lead to the development of cancer and reducing the incidence and mortality of HPV-related cancers. In this study we analysed HPV screening data between 2015 and 2020.

**Methodology** In 2012 Turkish Ministry of Health started the screening program, and implemented HPV testing as the primary method for cervical cancer screening. In 2014 centralized HPV testing laboratories started to serve in Ankara and Istanbul. In order to achieve adequate coverage of population, screening procedures started to be performed by family health centers also all other government institutions. Cervical cancer screenings are performed in women the ages of 30–65 years. The interval for screening is 5 years. Two cervical specimens are collected simultaneously during the procedure, one for HPV isolation and sub-typing and one for the reflex cytologic evaluation if needed. Data gathered from National Health Ministry and HPVDNA data between 2015 and 2020 and the data was evaluated.

**Results** The HPV DNA positivity rate increased from 4.29% in 2015 to 8.9 in 2020. During the COVID-19 pandemic, many healthcare resources were diverted towards managing and treating COVID-19 patients, leading to a reduction in routine health services, including cervical cancer screening. Majority (54.59%) of HPV positive individuals in screening population were infected with more than one HPV subtypes. Most common subtypes were HPV16 (16.52%), HPV51 (8.17%), HPV31 (7.55%), HPV52 (6.08%), HPV66 (5.24%). These findings remained consistent within each age groups.

**Conclusion** With improved testing and the increasing population if immigrants in Istanbul, we believe that HPV screening and preventative measures such as vaccinations are more important that ever in screening HPV and preventing cervical cancer.

**Disclosures** There are no known conflict of interest among the authors.

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**TRICHLOROACETIC ACID FOR THE TREATMENT OF HIGH-GRADE SQUAMOUS INTRAEPITHELIAL LESION OF THE CERVIX – A RETROSPECTIVE ANALYSIS**

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