



CIN 2 Conservative management: 3 Year Follow up Study

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Objective :

To assess the safety and outcome of conservative management of cervical intraepithelial neoplasia grade 2 (CIN2) in women.

Method:

A retrospective cohort study done at DGH Hospital, UK. We reviewed patient records 'Infoflex' of 146 women with histologically proven CIN2 between 1st April 2019 and 30th April 2022. The analysis included rates of spontaneous regression of CIN2, the persistence of abnormality, the progression to CIN3 and cancer, the duration of conservative management, and patients that defaulted follow-up.

Results:

- Of 146 women with histologically proven CIN2, Fifty-six women were managed conservatively with colposcopy, cytology and cervical biopsy. 71% had successful conservative management with regression of high-grade lesions on colposcopy or negative cytology; 29% had failed conservative management had LLETZ, and 2.7% of defaulted follow-up.
- Only two cases in the conservative group had CIN 3 punch biopsy 6-month follow-up: with no woman developing cancer at a median follow-up of 24 months.
- In the conservative management group 26/56 (46.4%), 5/56 (8.9%), 2/56 (3.57%) and 1/56 were negative cytology at 6 months, 12 Months, 18-month and 24-month respectively.
- LLETZ group 10/90 and 1/90 had CIN 3 & cancer respectively.

Conclusion:

The Conservative management of CIN2 (4.7: Gov.uk. Website) doesn't mention upper or lower age cut off for conservative management. Earlier published studies included age group 25-30 years, but this study showed that CIN 2 conservative management is safe in women aged 25-40 years, with 71% showing regression rate. We have more cytology negative @ 6 monthly compared to histology downgrade means more women met the criteria to exit the Colposcopic follow up