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**Long term follow up of loop electrosurgical excision procedure on cervical intra epithelia neoplasia 2+ in a single institution****Hsu-Peng Chen and Kim-Seng Law**

Tung's Taichung Metro Harbor Hospital, Taiwan

Following the national coverage of pap smear since 1995, dramatic decline of invasive cervical cancer has been seen in Taiwan, however, the incidence of cervical intraepithelial neoplasia 2+ at the same time has seen a steady increasing trend due to early detection. The effective treatment of CIN 2+ with Loop Electrosurgical Excision Procedure (LEEP) has been utilized in our hospital for treatment of CIN 2+ for years. Regular follow up with pap smear and/or HPV has been practice in our hospital at an interval of every 3 months for the first 6 months and once a year after one year should the result come out negative. By retrospectively analyses a total of 408 patients afflicted with CIN 2+ from 2006 to 2010 and follow up to December 2016, we studied the risk factors associated with disease recurrence with recurrent rate of 14.7% (60/408) and among them 44 proceed to hysterectomy. By utilizing Cox linear regression model, the risk factors of recurrence are positive surgical margin (HR 1.987 with CI 1.125-3.507) age greater than 35 years old (HR 2.516 with CI 1.190-5.320) and positive glandular involvement in the specimens (HR 3.135 with CI 1.715-5.730). The addition of HPV status after LEEP conization for the prediction of recurrence should be evaluate in addition to those noted above in order to better delineate those with high risk of recurrence.

kimsenglaw@gmail.com