



5th European Congress for Colposcopy and Cervical Pathology

The 5th Congress of the European Federation for Colposcopy took place in Berlin, from 27th to 29th of May 2010. 642 participants from 54 countries joined the meeting. Although the majority came from Europe, representatives from all five continents attended. More than 240 abstracts were submitted for the Scientific Programme with its 8 major sessions. The programme, and some presentations, are still available on www.efc2010.de for free downloads. The huge interest in well defined European standards in colposcopy and in new concepts for the prevention of gynaecological malignancy is reflected by the dominance of the hot topics of Screening, HPV vaccination and standards of training and quality assessment in colposcopy.

The Congress had a special session on “Screening strategies in Europe“. Presentations from Georgia, Sweden, Italy, Germany and Poland on their national programmes to prevent cervical cancer made it clear that European countries differ significantly in the structure of their screening concepts and their results have already shown progress. Some countries lack screening programmes others, like Georgia, have just started screening, whilst most Western European countries enjoy dramatic decreases in cervical cancer incidence as a result of programmes that were introduced 30-40 years ago. The Nordic countries, The Netherlands, as well as UK and parts of Italy, have organised screening programmes within their own registries and an invitation system whilst other Western European countries favour opportunistic screening.

Marc Arbyn, Brussels, presented a meta-analysis of 8 randomised controlled trials that evaluated HPV testing as primary screening test in the prevention of cervical cancer. This analysis confirmed that HPV testing is superior to cytology in detecting CIN3+, in reducing cervical cancer incidence and improving the negative predictive value (NPV). However, HPV testing should only be used in organised screening-programmes for women who are 30 years old or over and with screening intervals of at least 5 years. Italy seems to be the first country to switch to HPV screening in some regions but such a change is being discussed in a number of other countries from Georgia to Sweden.

The next topic, HPV vaccination, again showed a remarkable difference throughout Europe. Whilst more than 80% of the target population of 12 to 14 year old girls are already vaccinated in Scotland, the corresponding rates are below 30% in Germany

and Austria. Based on the accumulated data of more than 60 million doses, scientific presentations during the conference clearly demonstrated that both licensed vaccines are very safe and efficient. Cross protection seems to offer a greater than expected prevention of diseases induced even by some HPV types not included in the vaccines, but even at best it is estimated that only 80% of cervical cancer may be preventable with current HPV vaccines. Maggie Cruickshank, UK, showed that the vaccines may have a direct impact on colposcopy. The typical colposcopy pictures of high-grade lesions after the application of acetic acid seems to be especially common in HPV 16 positive CIN2+, whilst lesions associated with other HPV-types may be underestimated by colposcopy evaluation. S. Jagu, USA, presented a completely new concept of HPV vaccination. Whilst current vaccines are based on the major HPV capsid protein called L1, the new vaccine uses the L2 protein. In comparison with L1 proteins that are type specific, the L2 proteins are very similar for all papillomavirus types, including even animal types. Although L2 is not as immunogenic as L1, it is very likely that L2 vaccines will be available in the near future. Nobel prize laureate Professor zur Hausen showed in his presentation that vaccinations could prevent the 20% of all cancers that are linked to infectious diseases. Hepatocellular cancer in children and adolescents provided the initial evidence; once common in endemic areas this cancer was almost eradicated with the introduction of hepatitis B vaccination.

In face of the expected changes in the prevention of cervical cancer, the future role of colposcopy was a central question during the congress. Pierre Martin-Hirsch, UK presented the updated results of the TOMBOLA studies. These large randomized controlled trials demonstrated, with a high level of evidence, that colposcopy with biopsies is as safe as immediate loop excision in detecting underlying CIN3 in women with Pap smears showing low-grade atypia. Thus colposcopy can help to prevent damage from over diagnosis and over treatment. The discrepancy between TOMBOLA and smaller cohort studies showed that a low sensitivity of colposcopically guided biopsies for CIN2+ is in part explained by the higher quality of the TOMBOLA study design, but it is very likely that a better level of training too influenced better results of colposcopy.

Education, training and quality assessment in colposcopy was another hot topic at the Congress. 51 core competencies in colposcopy are listed by EFC as an essential part of education (www.e-f-c.org) and are already in use in most national educational programmes in colposcopy. The huge interest in high quality education and training was obvious throughout the conference. Training courses held in three different languages by EFC, IFCPC and GSCCP were well visited. During the conference, there was a debate entitled “European Colposcopy Diploma should be the central aim of EFC” which sparked a lively plenary discussion. Those opposing the motion argued that such a certificate would be premature and the beyond the resources of the EFC, but finally there was a consensus that the matter was so important, that EFC should work on a concept of a standardized education, training and quality control in colposcopy in Europe that still will allow and respect national peculiarities.

The remaining 5 major sessions not mentioned here had many high quality presentations - please use the link www.efc2010.de . One focus in the therapy

session was a new meta-analysis showing that cold knife conization especially is associated with an increased risk of premature labour and perinatal mortality.

During the General Assembly Professor Ulrich Petry, Wolfsburg, Germany followed Prof. Santiago Dexeus as President of the European Federation for Colposcopy, Dr Christine Bergeron, Paris, France became President Elect, Professor Peter Bosze, Budapest, Hungary became Secretary and Mr. Charles Redman, UK, became Treasurer of the EFC. For details see the protocol of the General Assembly. The next EFC conferences will be 2013 in Prague and 2016 in Istanbul.