

**“DATI PRELIMINARI  
STUDIO SVEDESE  
FOLLOW-UP”**

**Torino, 22 Ottobre 2007**

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**Having a prior CIS diagnosis increased the risk for invasive cervical cancer compared with the general female population (SIR= 2.34, 95 % CI =2.18 to 2.50).**

The increased risk shows a decreasing trend with time of follow up for women treated later than 1970 but is **still elevated after 20 - 25 years**

Strander et al BMJ in press

How do these findings translate into clinical recommendations?

The important question is how different follow-up schedules compare in terms of effectiveness and cost in preventing the excess risk of cancer.

Unfortunately, we have no direct evidence to answer this question, as no large study of the risk of cancer has also reported women's individual follow-up history.

Ronco G, Sideri GM, Ciatto S. BMJ in press.

Case-control studies comparing the follow-up of women who developed cancer with those who did not might provide crucial information in the short term.

The interval since the last normal cytology result is the key variable, and studying the risk of cancer according to this interval and time since treatment might identify the best regimen.

Ronco G, Sideri GM, Ciatto S. BMJ in press.