

BENEFITS OF ADDITIONAL MARKERS

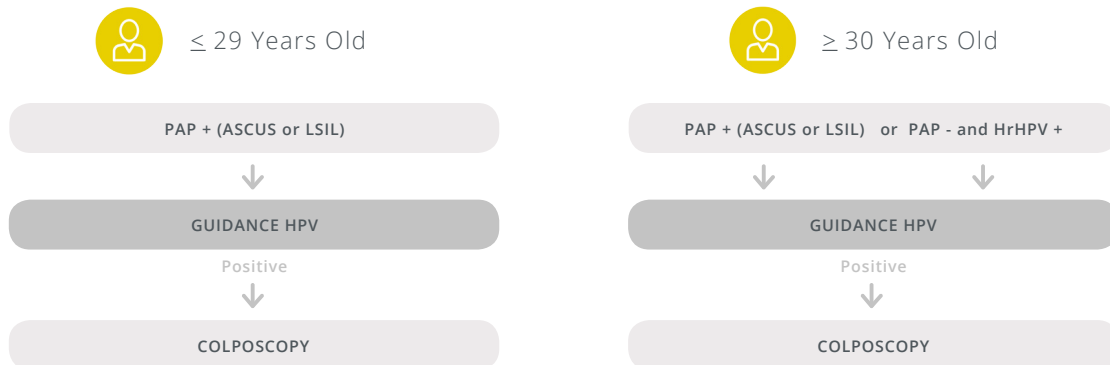
MARKER(S)	SENSITIVITY	SPECIFICITY	PPV	NPV
High Risk HPV	94.0%	25.6%	2.0%	99.2%
p16 + Ki-67	89.4%	82.1%	54.7%	95.1%
TERC + cMyc	78.0%	95.3%	89.7%	97.1%

■ PPV = Positive Predictive Value ■ NPV = Negative Predictive Value

- P16 is associated with HPV induced dysplasia and malignant progression²
- Ki-67 is associated with cell proliferation⁶
- TERC gene amplification is associated with progression to CIN3 or invasive cervical cancer⁴
- cMyc is the common site of HPV integration and is amplified in precancerous lesions

GUIDANCE HPV

A powerful tool for stratifying borderline patients




KNOWING WHICH STEP TO TAKE – COLPOSCOPY OR WAIT

Since colposcopy procedures can be costly and waiting can be anxiety producing for your patient, wouldn't it be beneficial to know whether the procedure is the best next step?

HOW TO ORDER

The Guidance HPV is run on liquid-based ThinPrep Pap samples. Simply order the Guidance HPV on the pap sample and the markers will appropriately reflex.

QUESTIONS ABOUT PATHNOSTICS' GUIDANCE HPV?

 Contact Us at 800.493.4490

References:

1. Blatt, A. K. (2015). Comparison of cervical cancer screening results among 256,648 women in multiple clinical practices. *Cytopathology*, 282–288.
2. Bergeron, C. R. (2015). The clinical impact of using p16 INK4a immunocytochemistry in cervical histopathology and cytology: An update of recent developments. *International Jo*, 2741–2751.
3. Chen, S. Y. (2012). Genomic amplification patterns of human telomerase RNA gene and C-MYC in liquid-based cytological specimens used for the detection of high-grade cervical intraepithelial neoplasia. *Diagnostic Pathology*, 1–12.
4. Obermann, E. P. (2013). Prediction of outcome in patients with low-grade squamous intraepithelial lesions by fluorescence in situ hybridization analysis of human papillomavirus, TERC, and MYC. *Cancer Cytopathology*, 423–431.
5. Petry, K. S.-L. (2011). Triaging Pap cytology negative, HPV positive cervical cancer screening results with p16/Ki-67 Dual stained cytology. *Gynecologic oncology*, 505-509.
6. Waldström, M. C. (2013). Evaluation of p16INK4a/Ki-67 dual stain in comparison with an mRNA human papillomavirus test on liquid-based cytology samples with low-grade squamous intraepithelial lesion. *Cancer Cytopathology*, 136–145.