

Management of Low Grade CIN1

Treatment or Surveillance

Colposcopy Service
Patient information



Following your recent visit to the Colposcopy Clinic the findings suggest there are some mildly abnormal cell changes to your cervix which are known as CIN1, (Cervical Intraepithelial Neoplasia, Grade 1).

What is the significance of CIN1?

CIN1 is also defined as a **low grade** abnormality of the cervix, where the cells are considered to have developed into a minor pre cancerous condition.

This condition is usually kept under close surveillance. National Guidelines for the management of CIN1 by treatment or surveillance are based on research evidence showing that one out of every two of these low grade abnormalities are self-limiting. This means that, given time, CIN1 will return to normal without active treatment.

CIN is a pre-cancerous condition that can be subdivided into three grades: CIN1, CIN2 and CIN3. These grades can then be categorised into high risk (CIN2 and CIN3) and low risk (CIN1).

It is important to remember that all CIN does not develop into cancer, and that treating all grades of CIN would lead to overtreatment for many women.

Current data suggests that less than 1% of CIN1 goes on to develop into cervical cancer. Although it is not possible to predict at the outset the potential outcome for individual women, what we do know is that CIN1 has a tendency to return to normal in a significant number of women.

Based on such evidence, the National Guidelines state that CIN1 may either be treated or kept under close observation.

What does the management of low-grade abnormalities by surveillance involve?

You have been offered a conservative management option for a low-grade abnormality of the cervix in the hope that the cells will return to normal without active treatment.

Conservative management of low-grade abnormalities is completely safe. However, since this involves close observation until the cervical screening tests return to normal it is important that you keep your appointments. If CIN1 is diagnosed you will be discharged from the colposcopy service back to your G.P. for a further screening test in 12 months. Further follow up will be determined by that screening test result.

Although low-grade abnormalities can be managed indefinitely by surveillance, if it does not progress, our local policy is to suggest treatment if the abnormalities are still persisting after a period of two years, or to treat immediately if the abnormality progresses in grade or size.

It is very important that you attend the Colposcopy Clinic when any appointment is made for you.

If you cannot attend, for any reason, please let us know so the appointment can be used by someone else and we can arrange another appointment for you.

If you are unable to attend a clinic and wish to change your appointment, please contact our clerical staff:

- **The James Cook University Hospital – Tel: 01642 282790**
- **The Friarage Hospital – Tel: 01609 764813**

Please note: Both The James Cook University Hospital and the Friarage Hospital are teaching centres, therefore you may be asked permission for observers to be present throughout your appointment. If you would rather not be observed please inform a member of staff.

Further advice

We hope that you have found the information in this leaflet helpful. If you require any further advice regarding any aspect of your care please do not hesitate to ask the clinic staff. They are there to support you and are happy to help with any concerns or anxieties.

You can also contact a Nurse Colposcopist via one of the Nurse Advice Lines:

- For James Cook University Hospital, Middlesbrough:
01642 282790
- For the Friarage Hospital, Northallerton:
01609 764692

(24 hour answer-phone service if they are unable to answer your call immediately).

Useful web sites for further information

- Cancer Research UK: www.cruk.org
- www.cancerscreening.nhs.uk/cervical
- www.jostrust.org.uk and add:
- Healthtalkonline: www.healthtalkonline.org
- The British Society for Colposcopy and Cervical Pathology:
www.bsccp.org.uk

As South Tees Hospitals NHS Trust have not personally produced the websites listed above we therefore cannot accept any liability for their content.

References (further reading)

- Luesley D, Leeson S (Eds) (2010). Colposcopy and Programme Management. Guidelines for the NHS Cervical Screening Programme. 2nd Edition.
- Luesley D (Ed), Shafi M (Ed), Jordan J (Ed). Handbook of Colposcopy (1996). Publishers Chapman and Hall
- Remove this reference and replace with Public Health England, NHSCSP Colposcopy and Programme Management. Publication 20: 3rd edition, (March 2016)

Your notes

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Comments, compliments, concerns or complaints

South Tees Hospitals NHS Foundation Trust is concerned about the quality of care you receive and strives to maintain high standards of health care.

However we do appreciate that there may be an occasion where you, or your family, feel dissatisfied with the standard of service you receive. Please do not hesitate to tell us about your concerns as this helps us to learn from your experience and to improve services for future patients.

Patient Advice and Liaison Service (PALS)

This service aims to advise and support patients, families and carers and help sort out problems quickly on your behalf.

This service is available, and based, at The James Cook University Hospital but also covers the Friarage Hospital in Northallerton, our community hospitals and community health services. Please ask a member of staff for further information.

If you require this information in a different format please contact Freephone 0800 0282451

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