Introducing: The Squamous Spectrum

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Bethesda 2001

Atypical Squamous Cells (ASC)

- of undetermined significance (ASC-US)

LSIL: Low-grade Squamous Intraepithelial Lesion

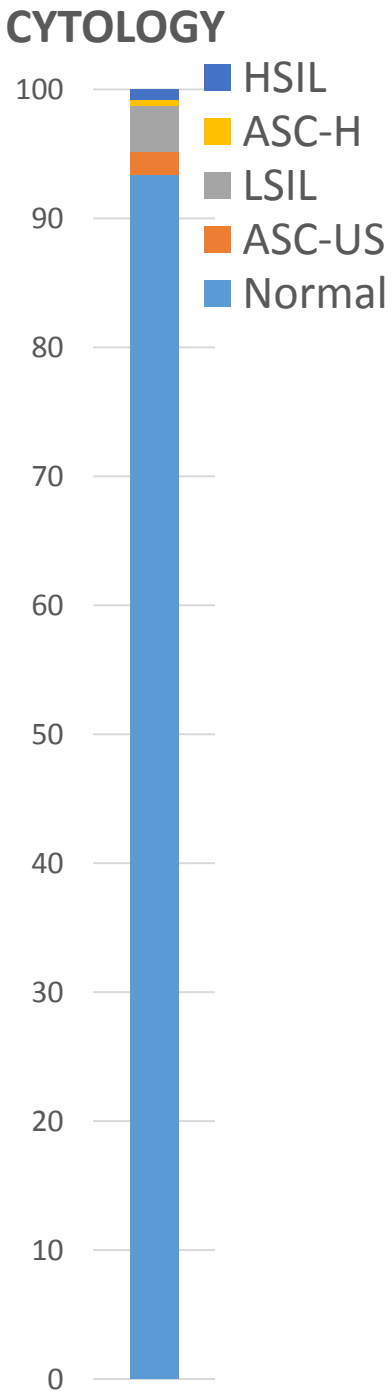
Atypical Squamous Cells (ASC)

- cannot exclude HSIL (ASC-H)

HSIL: High-grade Squamous Intraepithelial Lesion

(+/- with features suspicious for invasion)

Squamous Cell Carcinoma



Squamous abnormalities

Cytology	NZ samples *	
ASC-US	1.8%	
LSIL	3.5%	*Low-grade*
ASC-H	0.5%	*High-grade*
HSIL	0.8%	

- clinical outcome justifies cytology result categories
- ASC-US + LSIL cytology identifies almost as many HSIL histology cases as ASC-H + HSIL cytology

**%* *% of satisfactory samples Jan-June 2017 NCSP Monitoring Report 47*

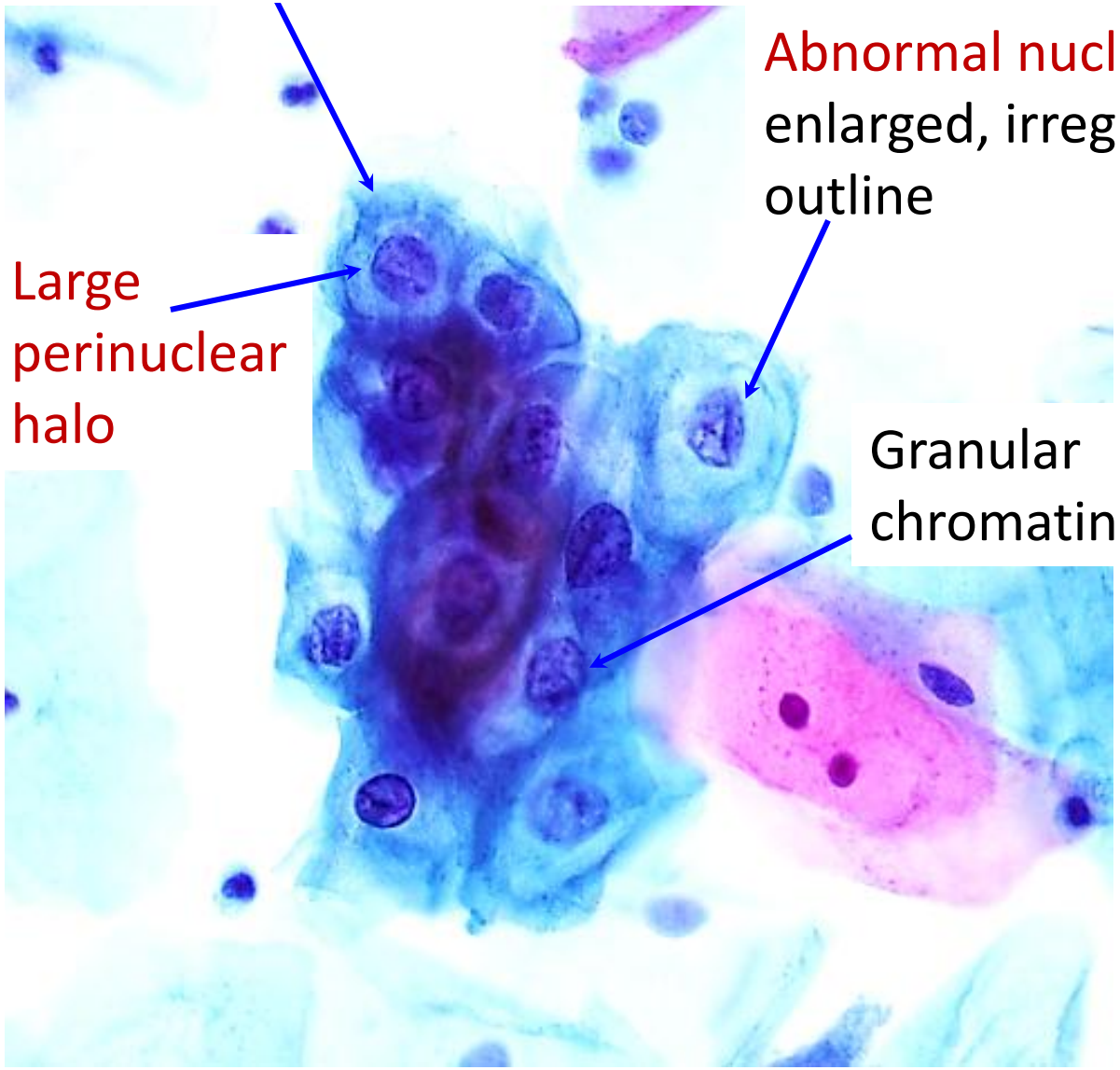
LSIL: classic koilocytes

Condensation of peripheral cytoplasm

Abnormal nucleus
enlarged, irregular outline

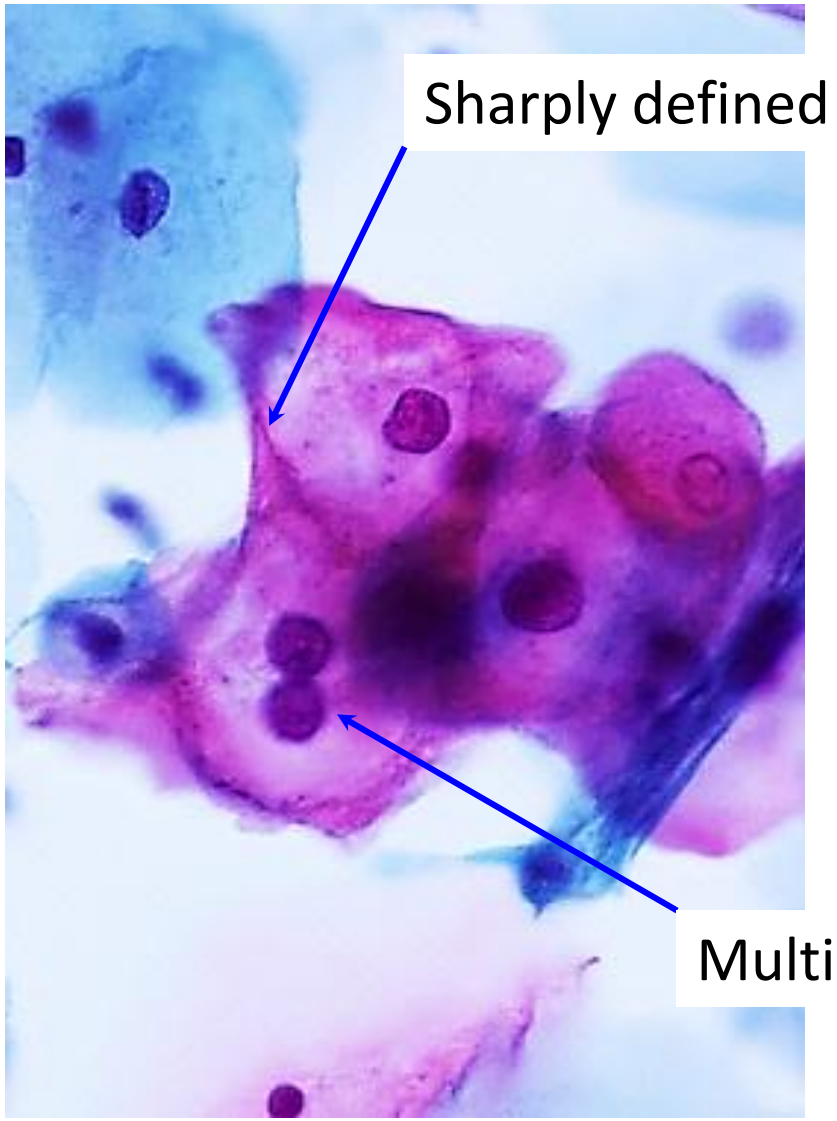
Large perinuclear halo

Granular chromatin



Sharply defined halo rim

Multinucleation



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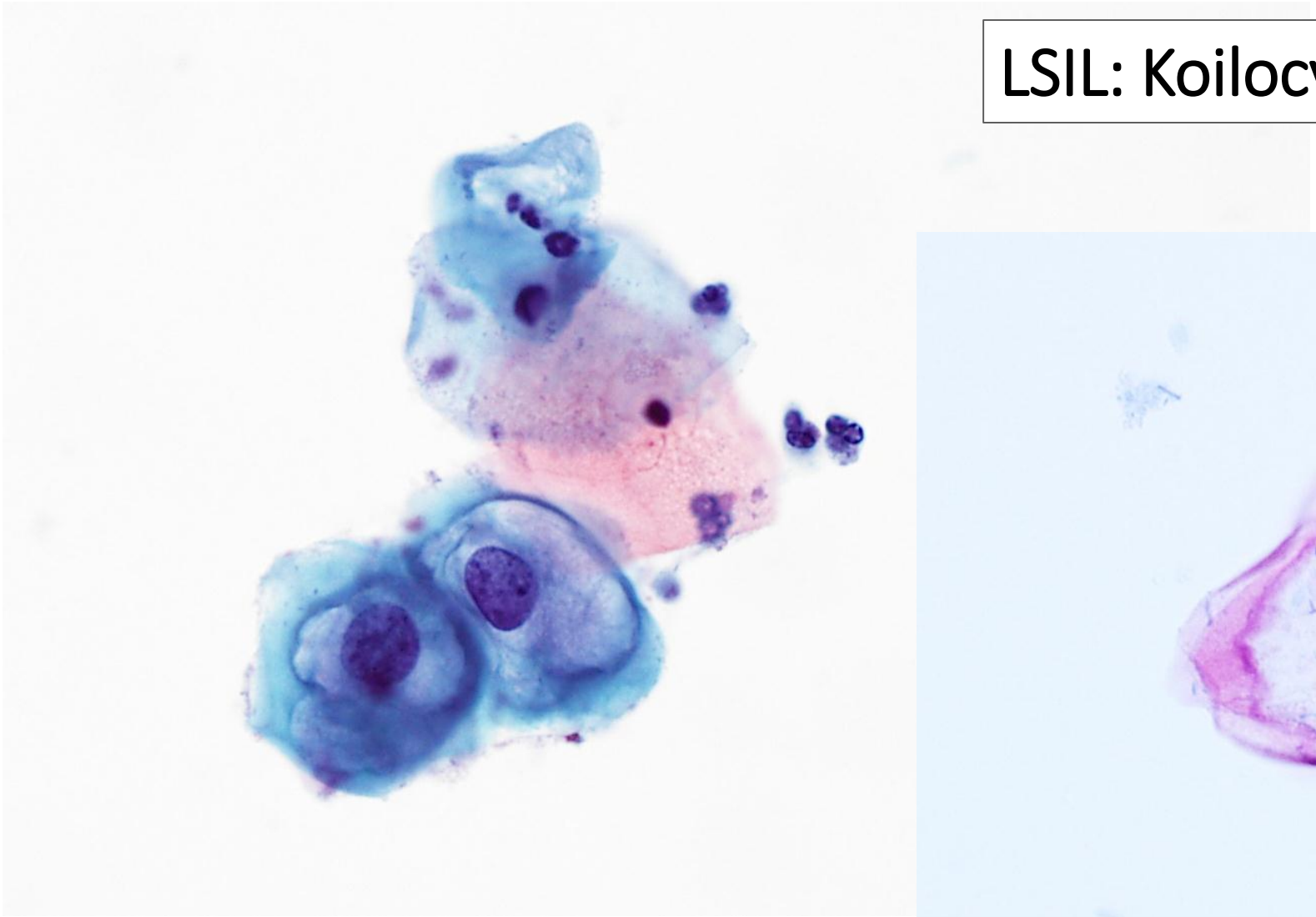
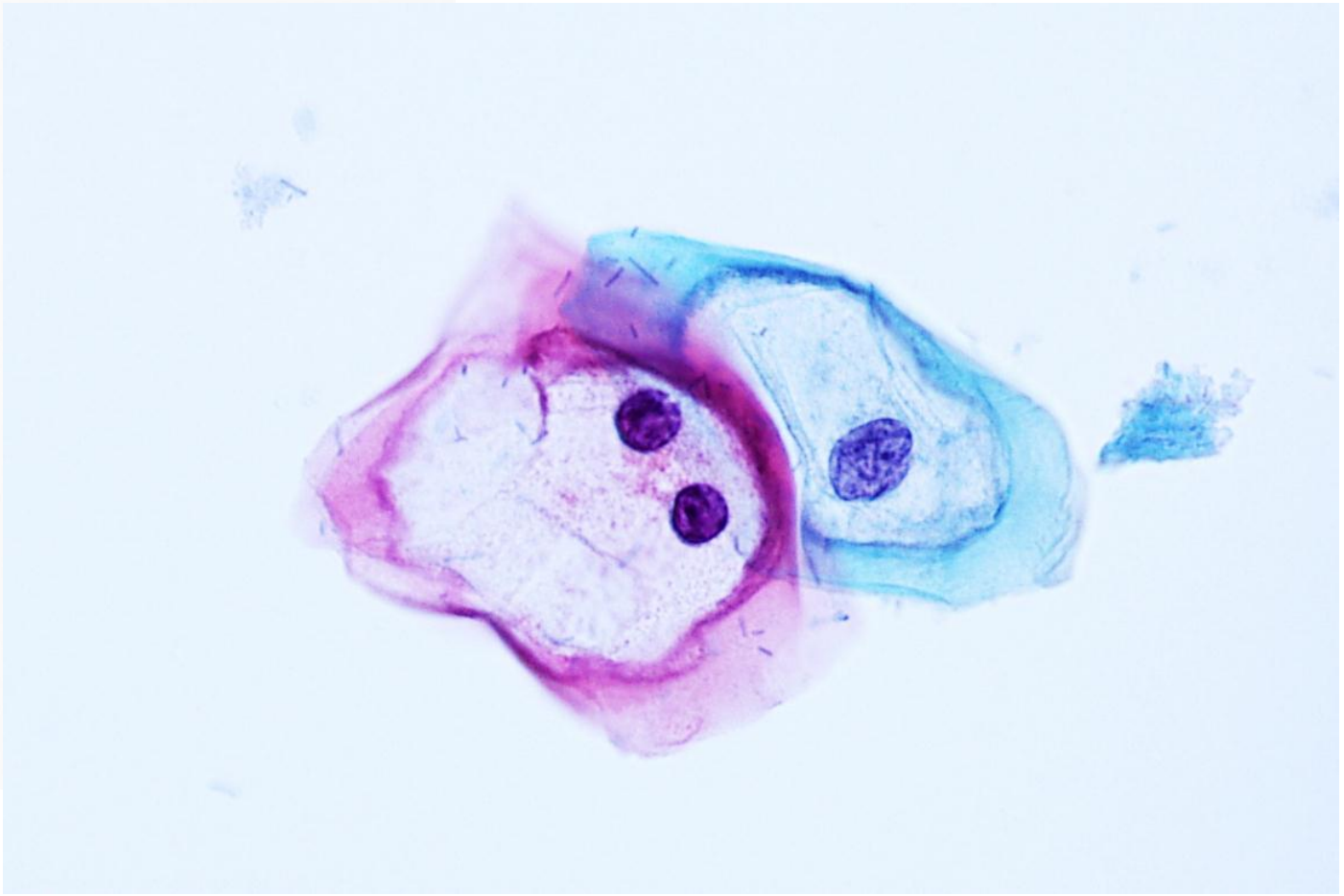
LSIL: Koilocytes





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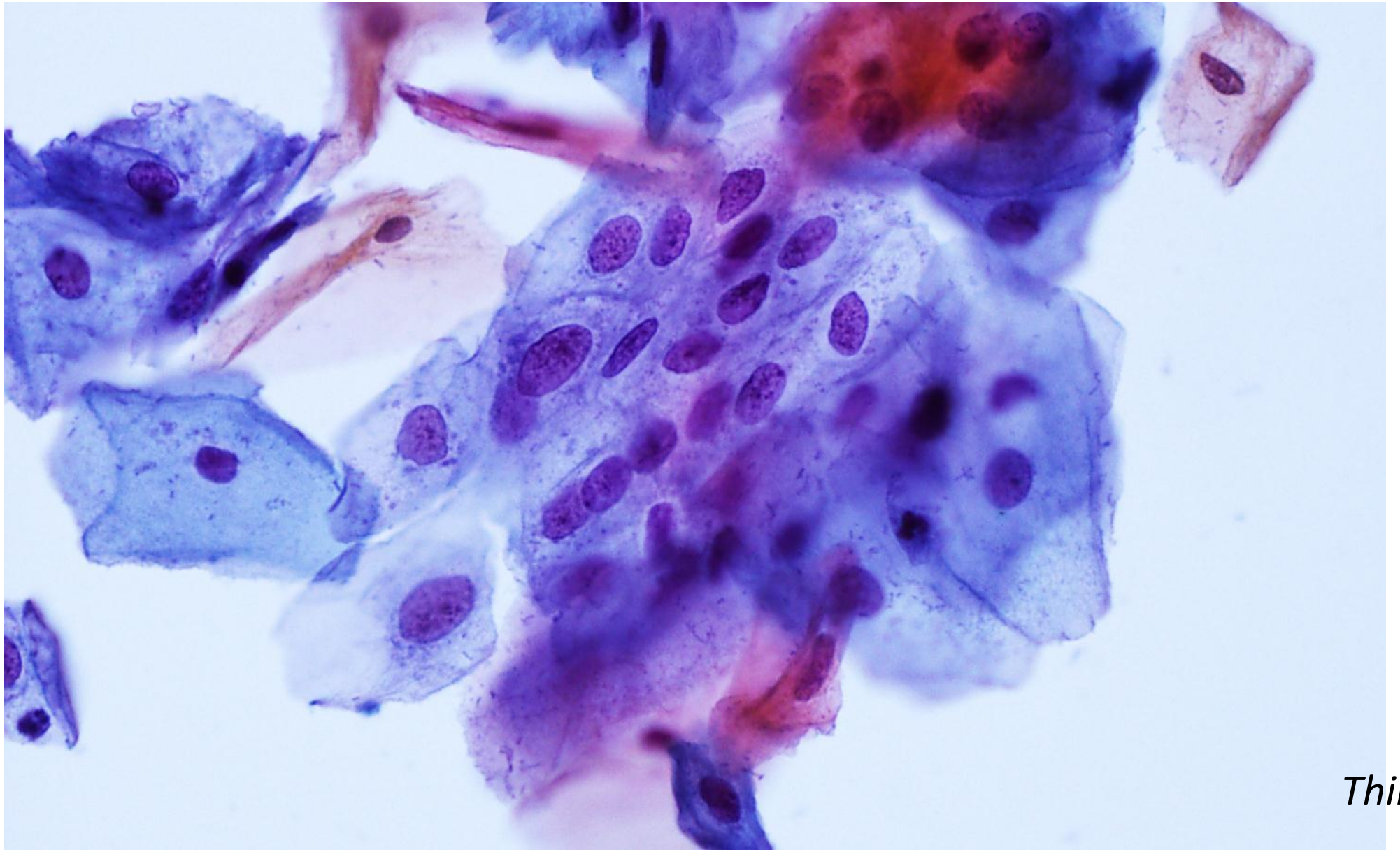
LSIL: not koilocytes



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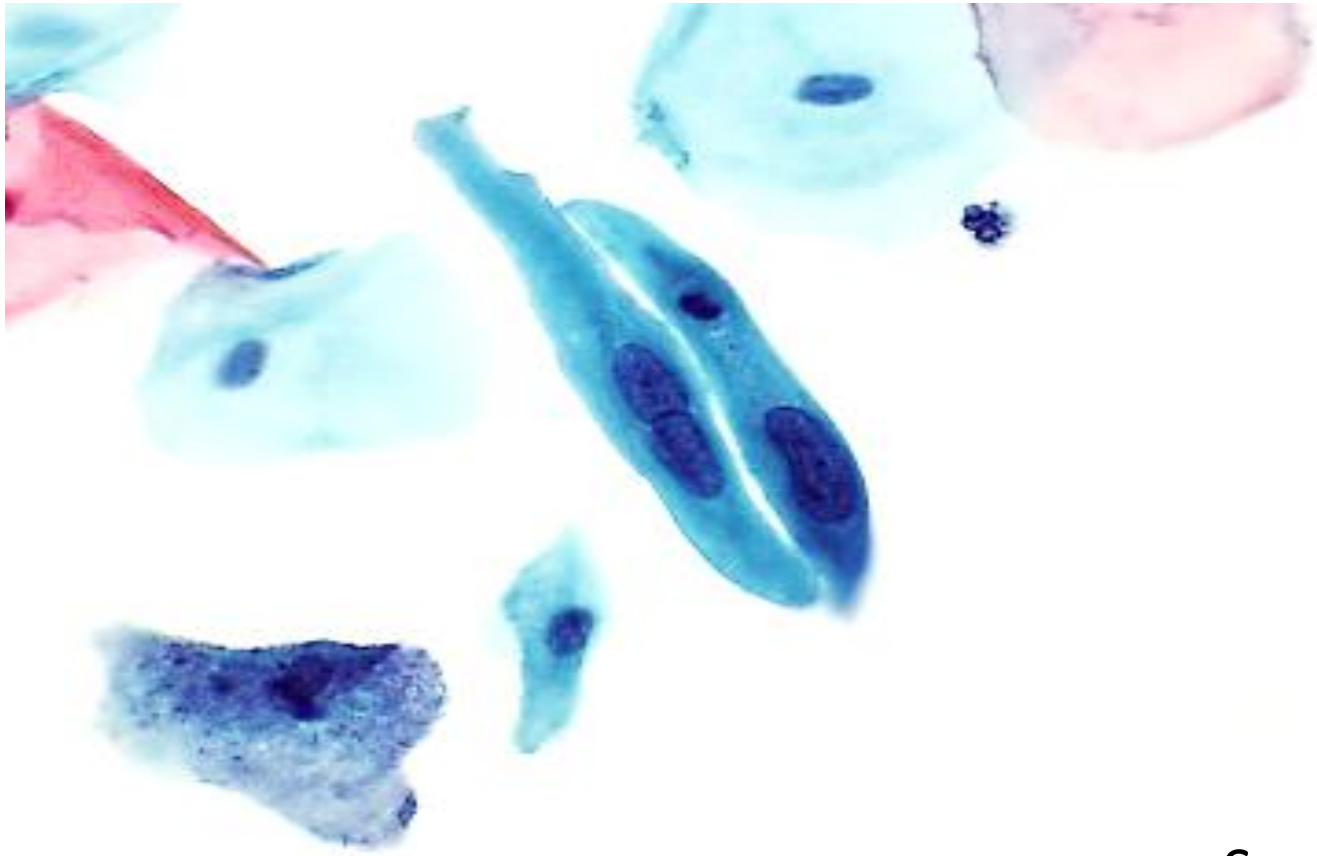
ASC-US
Atypical Squamous Cells of Undetermined Significance



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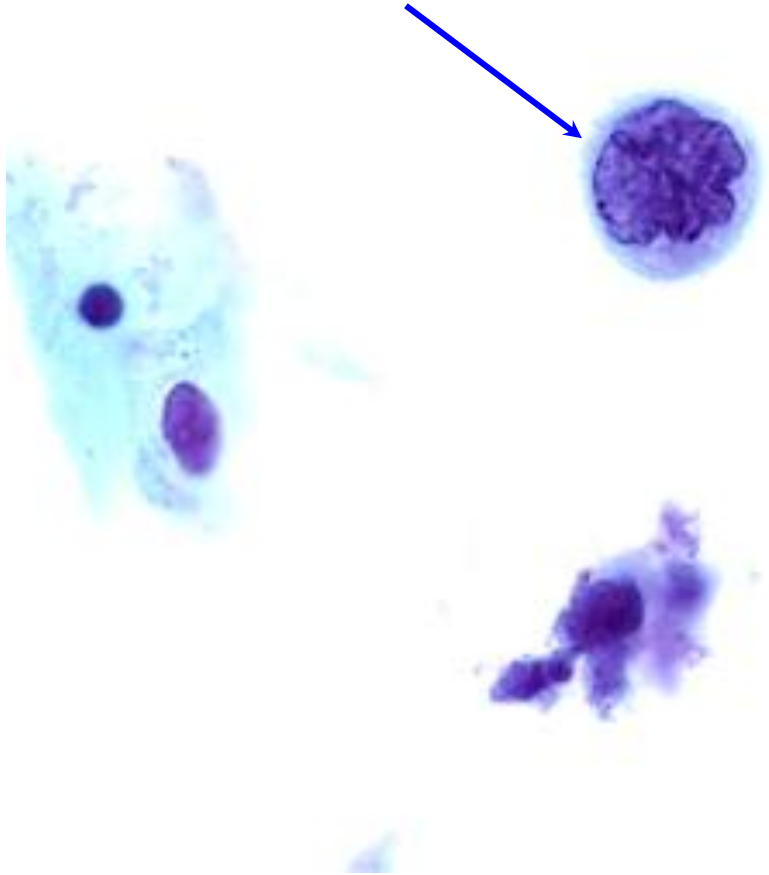
HSIL

High N:C ratio

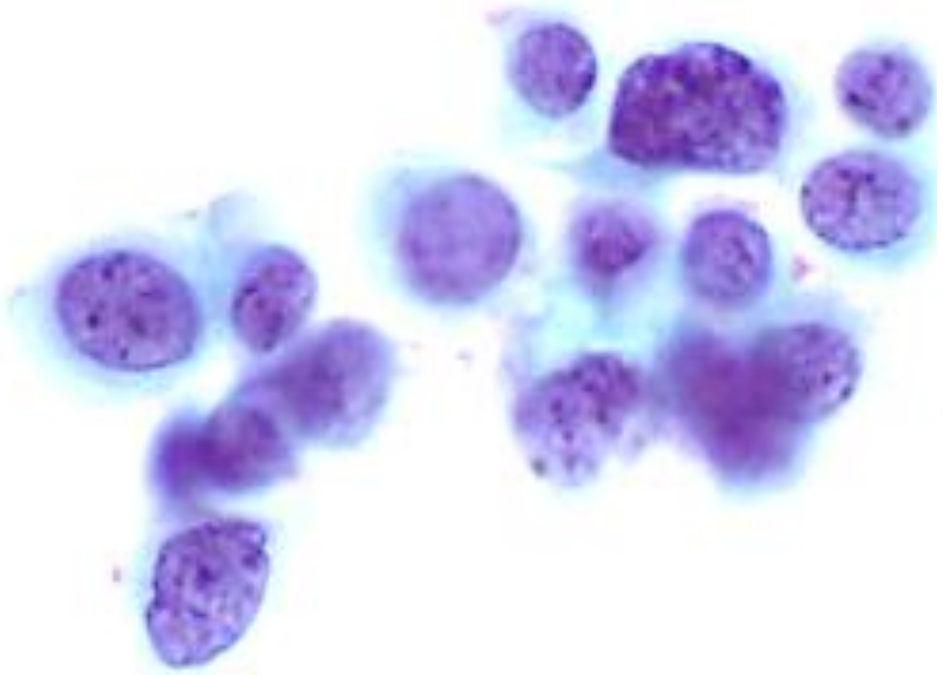
Hyperchromatic granular chromatin

Irregular nuclear outline



Nuclear Variation

Size, shape, chromatin, outline



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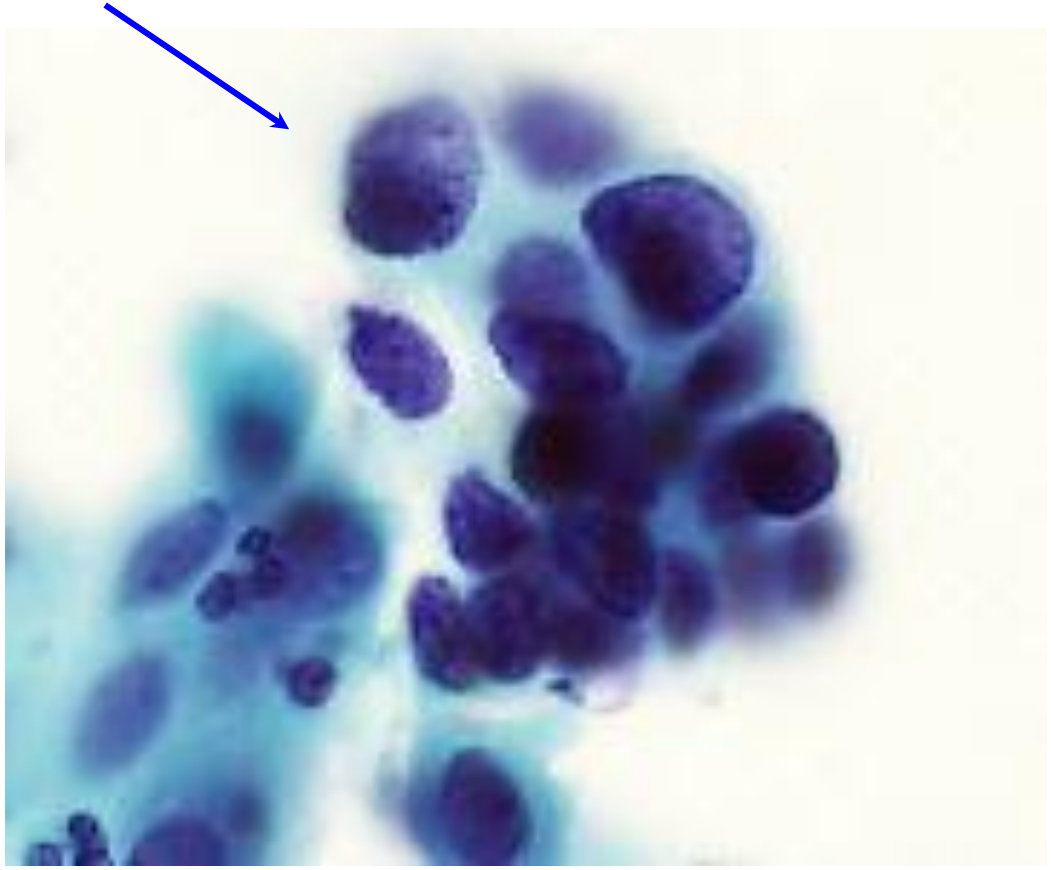
HSIL

High N:C ratio

Hyperchromatic granular chromatin

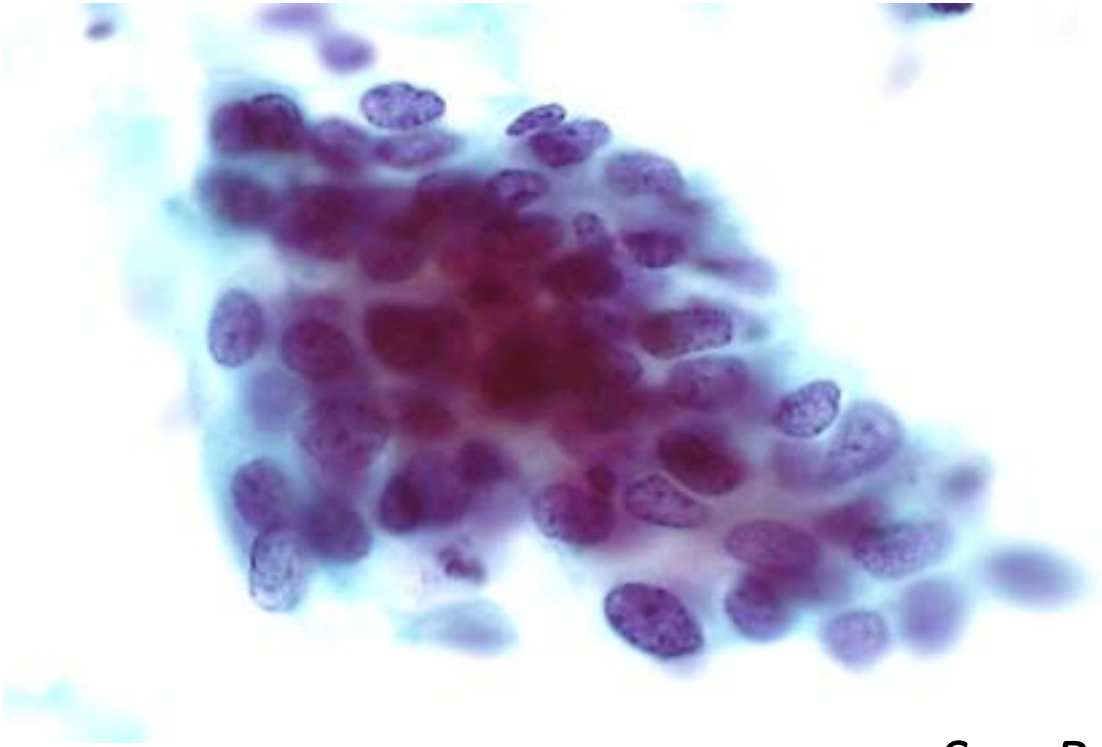
Irregular nuclear outlines

Nuclear variability



Crowded sheets

Thick, disorganised, high N:C cells, nuclear variability



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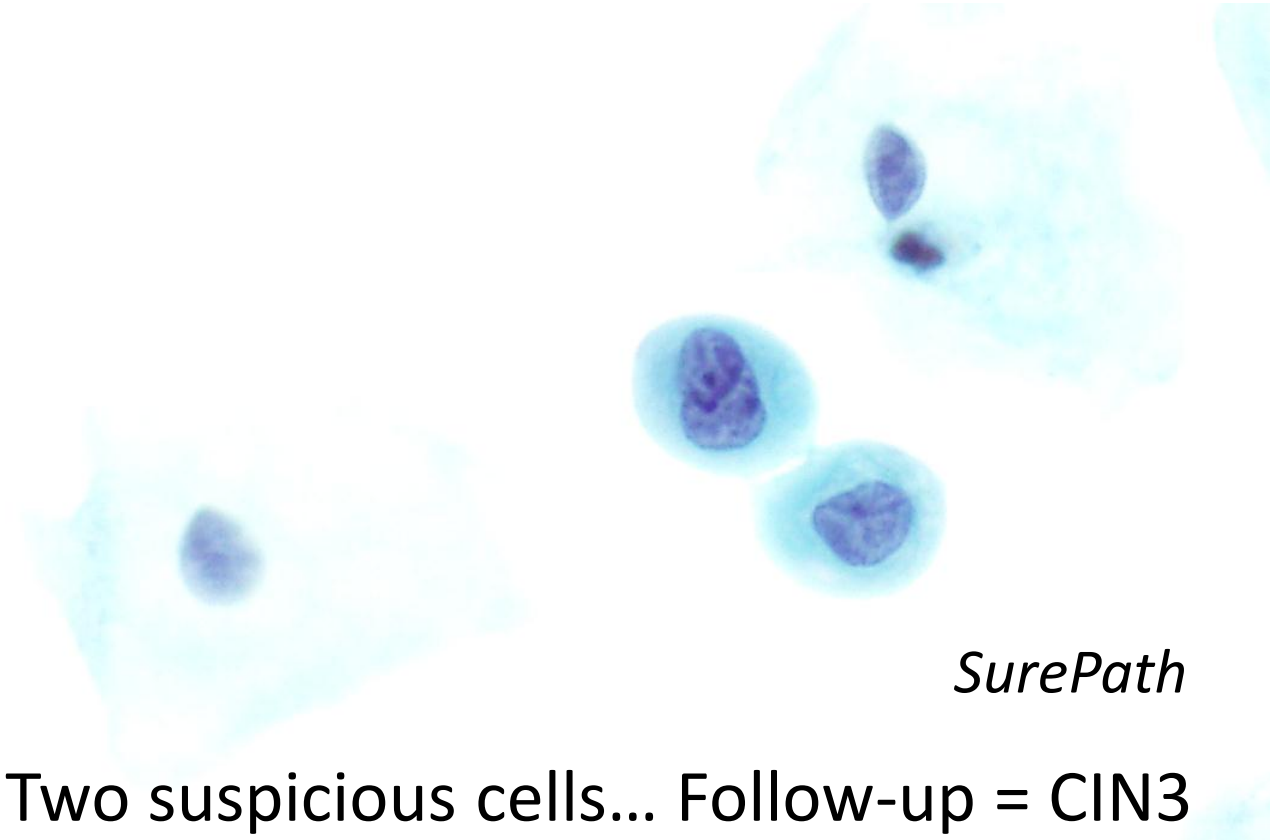
ASC-H
Atypical Squamous Cells, possible High-grade



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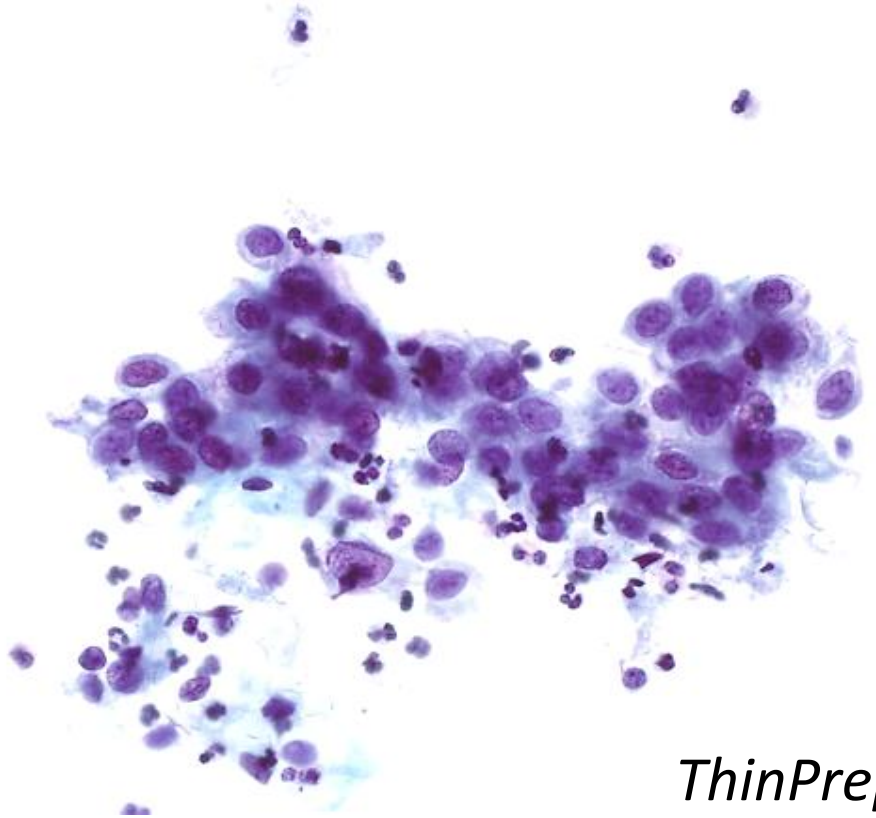
Two suspicious cells… Follow-up = CIN3



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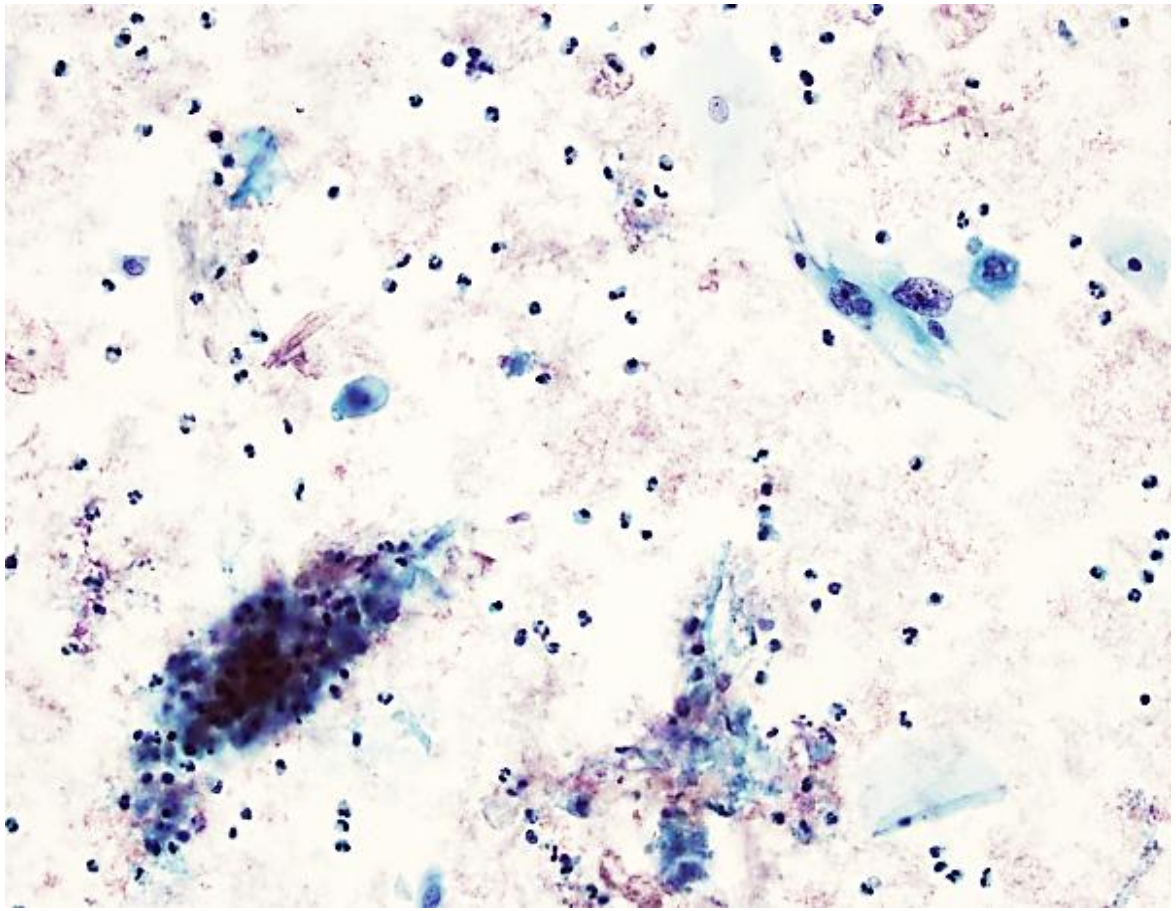
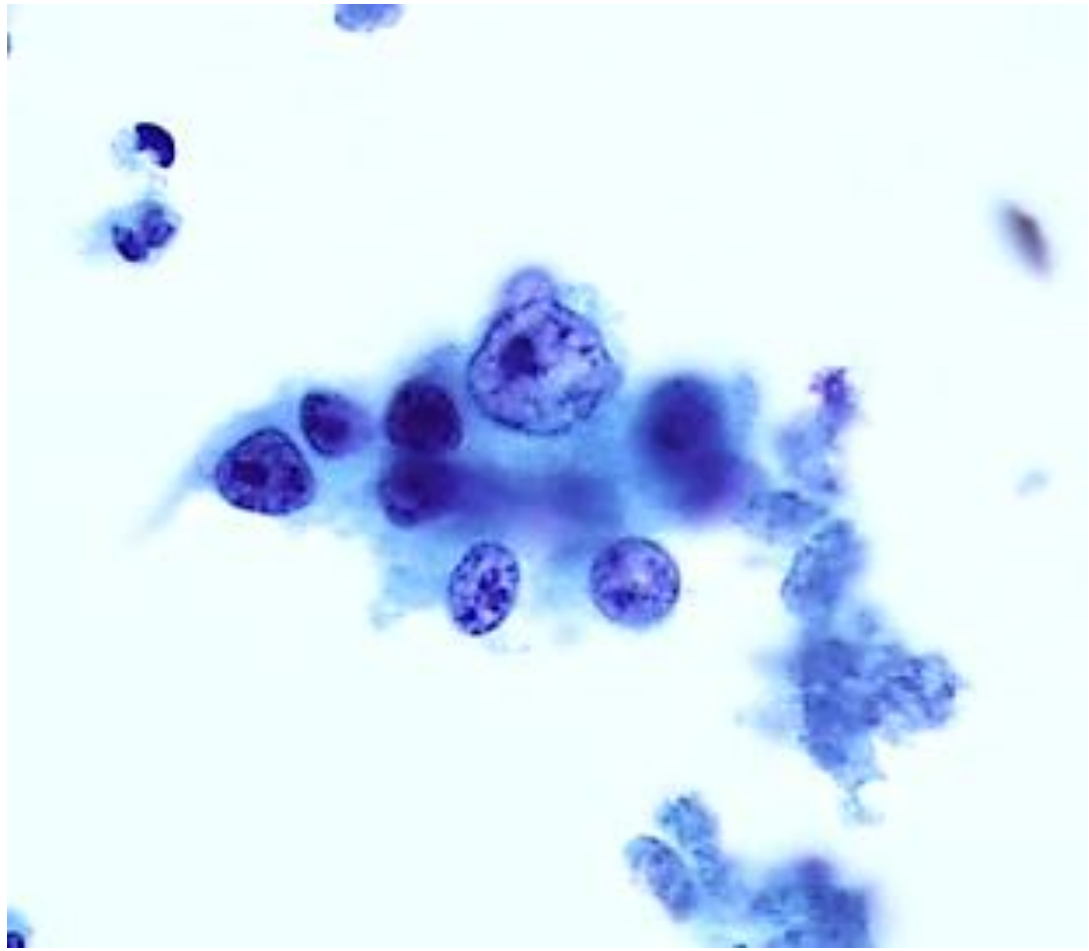
Suspicious, some reactive features
Follow-up = inflammation, cervicitis

Squamous cell carcinoma





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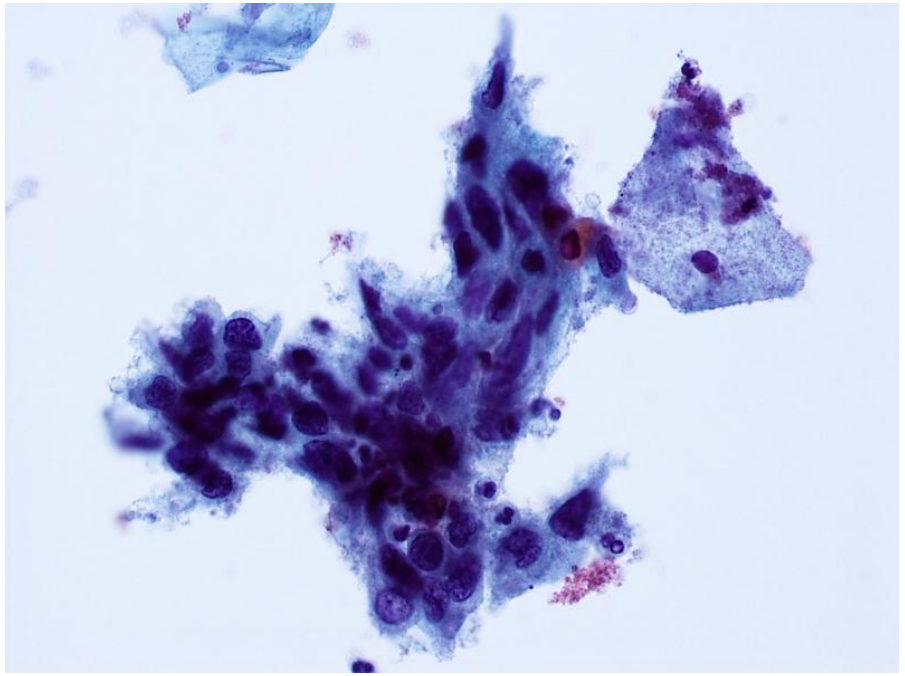
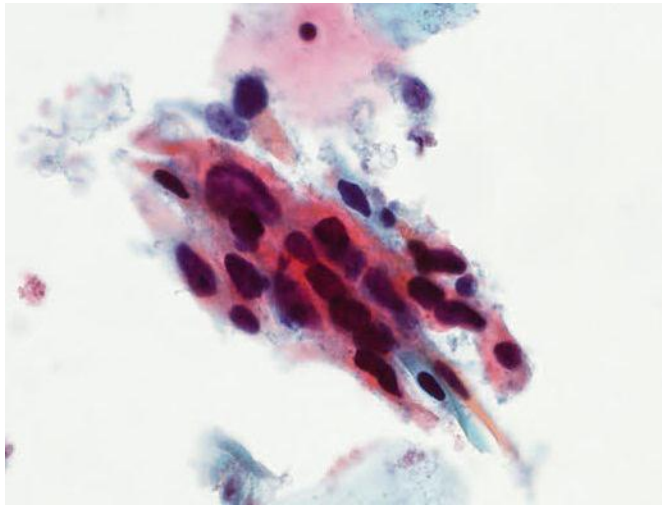
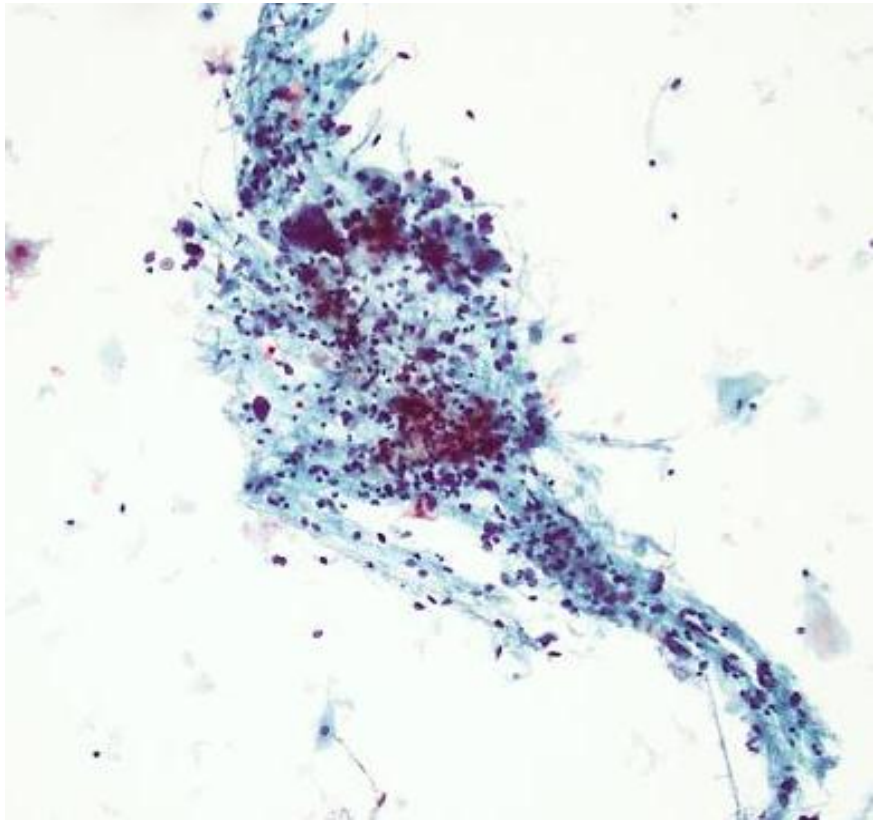
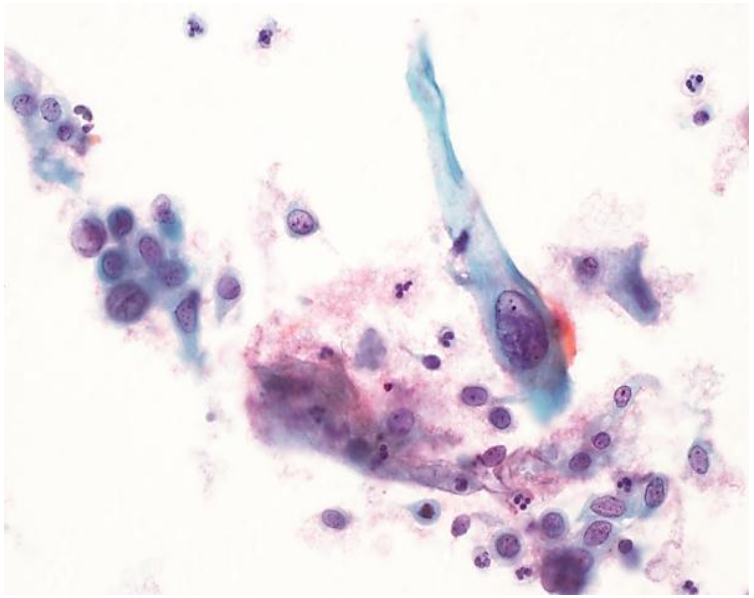
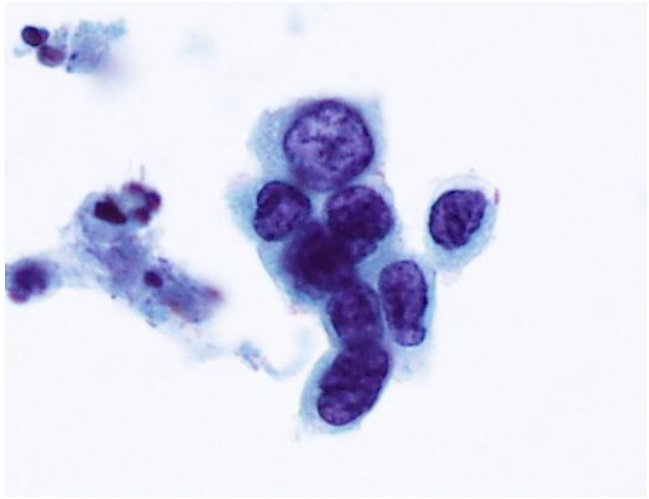
Squamous cell carcinoma











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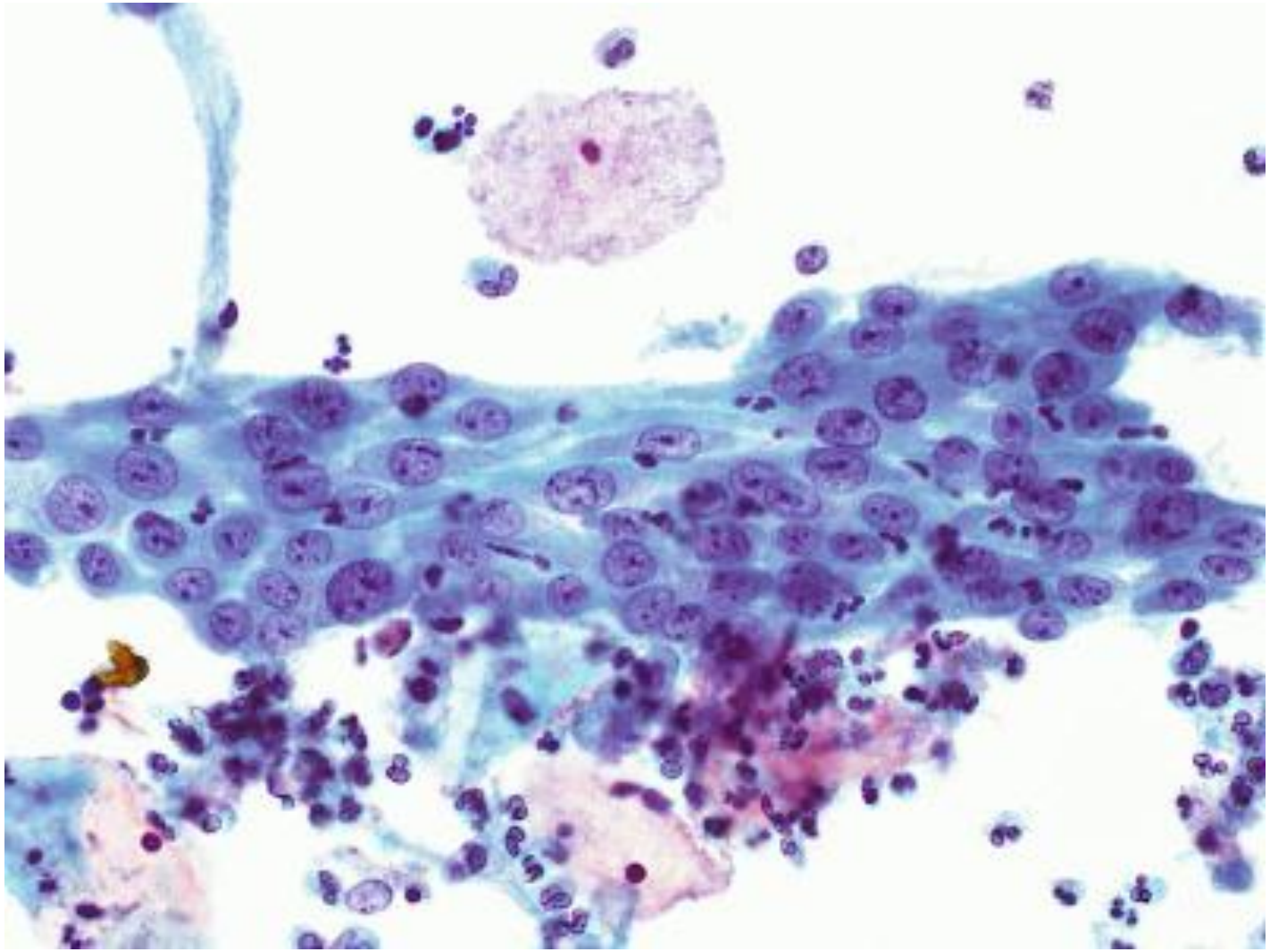
REACTIVE Sheet



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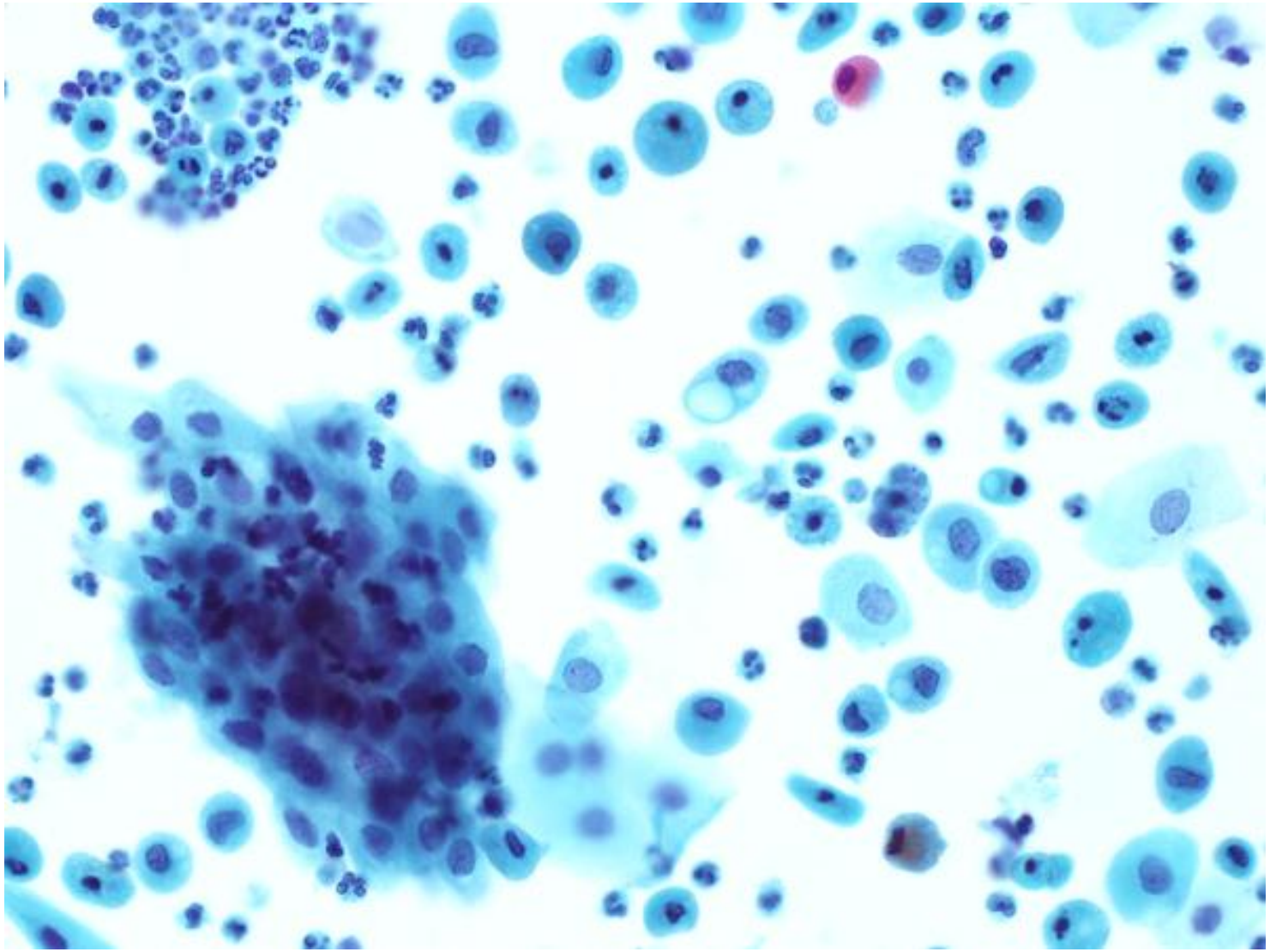

SurePath

See as many cases and images as you can