

EFFICACY OF THERMAL ABLATION IN HPV16,18 POSITIVE FEMALES



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WORLD CONGRESS OF
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VERSAILLES - FRANCE
PALAIS DES CONGRÈS

WORKING TO ELIMINATE
LOWER GENITAL TRACT CANCERS

OBJECTIVE & FOCUS OF THE STUDY

- To assess the **clinical efficacy of thermal ablation** in HPV 16 & 18 positive women
- Target group: **Females aged 30–45 years**
- Aim:
- Clearance of HPV infection
- Prevention of Invasive Cervical Disease
- Emphasis on **low-resource, practical treatment approach.**



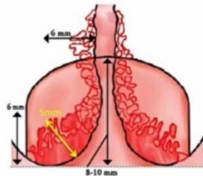
METHODOLOGY

- **Study sample:** 110 HPV 16/18 positive women
- Diagnosis confirmed using **Cobas 4800 test**
- **Selection Criteria:**
- Type 1 transformation zone
- Lesions confined to **one cervical quadrant**

- **Exclusion:**
- Microinvasive disease
- Glandular lesions
- STIs / PID
- **Intervention:**
- Thermal ablation using **thermocoagulator device**
- **Follow-up schedule:**
- 15 days (early healing)
- 2 months (short-term outcome)
- 1 year (Test of Cure – HPV status)

Principles of Treatment

Treat up to adequate depth



RESULT & KEY FINDING

- **Baseline Findings:**
- Majority (78) → Normal colposcopy
- 30 → Low-grade lesions
- 2 → High-grade lesions
- **Biopsy Results:**
- LSIL: 25
- Chronic cervicitis: 5
- HSIL: 2
- **Post-treatment Outcomes (1 year):**
- **95.5% (105 women) → HPV negative**
- 5 → Persistent HPV but **no lesion progression**
- **Clinical Outcomes:**
- No adverse post-procedure symptoms
- Significant reduction in **leucorrhoea**
- Good patient tolerance and safety profile

CONCLUSION & IMPLICATIONS

- Thermal ablation is:
 - **Highly effective** for HPV clearance
 - **Safe** with minimal complications
 - **Cost-effective and feasible** in low-resource settings
- Success depends on:
 - Proper **case selection**
 - Full visibility of **squamocolumnar junction**
- **Clinical Implications:**
 - Can be used as a **primary treatment option**
 - Reduces burden on advanced healthcare facilities
 - Must be combined with:
 - **HPV vaccination awareness**
 - **Regular follow-up (Test of Cure)**