

# THE PATHCARE NEWS

## Bethesda reporting system update for gynaecological Cytology

PathCare uses the Bethesda system (TBS) for the reporting of cervical Cytology specimens. Some changes and recommendations were introduced in 2014. The most important changes are the age at which 'benign-appearing endometrial cells' should be reported, and also the use of the terms 'interpretation' or 'results' rather than 'diagnosis' in the cervical Cytology report.

### **Recommendation: Use of the terms interpretation or result.**

*The terms 'interpretation' or 'result' were recommended instead of 'diagnosis' in the heading of the cervical cytology report, because it was believed that cervical cytology should be viewed primarily as a 'screening test, which in some instances may serve as a medical consultation by providing an interpretation that contributes to a diagnosis. The final diagnosis and management plan should integrate the cervical cytology with patient history, clinical findings, and results of other laboratory tests such as cervical biopsy'.*

### **Change: Reporting of 'benign-appearing' endometrial cells:**

*'Reporting of Benign-Appearing Endometrial Cells Is Now Recommended for Women Aged  $\geq 45$  Years'.*

*Rationale: Although exfoliated endometrial cells are a normal finding during menses and the proliferative phase of the menstrual cycle, in postmenopausal women, their presence is considered abnormal and raises the possibility of endometrial neoplasia. Thus, TBS-1988 recommended reporting cytological benign-appearing endometrial cells in postmenopausal women to alert clinicians to the possibility of an endometrial abnormality.*

*In 2001, because menopausal status is often unclear, inaccurate, or unknown to the laboratory, it was suggested that this reporting should be done in women aged  $\geq 40$  years to maximize the likelihood of including all postmenopausal women and that clinical correlation should be left to the ordering physician's discretion.*

*Evaluation of this TBS-2001 recommendation in clinical practice indicated that, although endometrial investigation increased, the predictive value for endometrial hyperplasia/carcinoma decreased significantly compared with the pre-TBS-2001 experience.*

*In the 2012 management guidelines, the ASCCP advised using histologic endometrial assessment only in postmenopausal women.*

*During the TBS-2014 update, after literature review and public comment consensus, it was decided that, to increase the predictive value of this category, cytological 'benign-appearing' endometrial cells should be reported in women aged  $\geq 45$  years, and the suggested educational note should specify that endometrial evaluation be done only in postmenopausal women.*

### **PathCare Gynaecological Cytology reports:**

PathCare will change the gynaecological Cytology report to reflect the above. The heading 'Diagnosis' will change to 'Interpretation' and the reporting of 'benign-appearing' endometrial cells will also be implemented. For any queries please contact your local specialist histo- and cytopathologist.

### **References:**

Nayar, R. & Wilbur, D.C. (2015) The Pap Test and Bethesda 2014. *Acta Cytologica*, 59, pp. 121-132.

# DIE PATHCARE NUUS

## Opdatering van Bethesda rapporteringsstelsel

PathCare gebruik die Bethesda rapporteringsstelsel (TBS) vir servikale Sitologie monsters. Enkele veranderinge en aanbevelings is aangebring in 2014. Die belangrikste veranderinge is die ouderdom van die pasiënt wanneer die aanwesigheid van endometriële selle met 'n 'normale voorkoms' rapporteer moet word asook die gebruik van die terme 'interpretasie' of 'uitslae' eerder as 'diagnose' in die Sitologie verslag.

### Sitologie verslag aanbeveling:

*The terms 'interpretation' or 'result' were recommended instead of 'diagnosis' in the heading of the cervical cytology report, because it was believed that cervical cytology should be viewed primarily as a 'screening test, which in some instances may serve as a medical consultation by providing an interpretation that contributes to a diagnosis. The final diagnosis and management plan should integrate the cervical cytology with patient history, clinical findings, and results of other laboratory tests such as cervical biopsy'.*

### Rapportering van 'normale' endometriële selle:

*'Reporting of Benign-Appearing Endometrial Cells Is Now Recommended for Women Aged  $\geq 45$  Years'.*

*Rationale: Although exfoliated endometrial cells are a normal finding during menses and the proliferative phase of the menstrual cycle, in postmenopausal women, their presence is considered abnormal and raises the possibility of endometrial neoplasia. Thus, TBS-1988 recommended reporting cytological benign-appearing endometrial cells in postmenopausal women to alert clinicians to the possibility of an endometrial abnormality.*

*In 2001, because menopausal status is often unclear, inaccurate, or unknown to the laboratory, it was suggested that this reporting should be done in women aged  $\geq 40$  years to maximize the likelihood of including all postmenopausal women and that clinical correlation should be left to the ordering physician's discretion.*

*Evaluation of this TBS-2001 recommendation in clinical practice indicated that, although endometrial investigation increased, the predictive value for endometrial hyperplasia/carcinoma decreased significantly compared with the pre-TBS-2001 experience.*

*In the 2012 management guidelines, the ASCCP advised using histologic endometrial assessment only in postmenopausal women.*

*During the TBS-2014 update, after literature review and public comment consensus, it was decided that, to increase the predictive value of this category, cytological 'benign-appearing' endometrial cells should be reported in women aged  $\geq 45$  years, and the suggested educational note should specify that endometrial evaluation be done only in postmenopausal women.*

### PathCare Sitologie verslae:

PathCare sal die Sitologie ginekologie verslag verander om bogenoemde weer te gee. Die opskrif 'Diagnose' sal verander na 'Interpretasie' asook die rapportering van endometriële selle met 'n 'normale voorkoms' sal geïmplementeer word. Vir enige navrae, kontak asseblief u plaaslike spesialis histo- en sitopatoloog.

### Verwysings:

*Nayar, R. & Wilbur, D.C. (2015) The Pap Test and Bethesda 2014. Acta Cytologica, 59, pp. 121-132.*