

Risk of noncervical anogenital cancer up with history of CIN2/3

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(HealthDay)—Women with a history of cervical intraepithelial neoplasia

(CIN)2 or CIN3 have increased risks of subsequent development of anal, vulvar, and vaginal cancers, according to a study published online June 29 in *Cancer Epidemiology, Biomarkers & Prevention*.

Freja Laerke Sand, from the Danish Cancer Society Research Center in Copenhagen, and colleagues conducted a nationwide cohort study involving 2.8 million women born from 1918 to 1990. Women were followed from the age of 18 years, date of immigration, or January 1978 until emigration; death; Dec. 31, 2012; or date of first diagnosis of anogenital or rectal [cancer](#).

The researchers found that the risks for subsequent anal, vulvar, and vaginal cancer were increased for women with a history of CIN2 or CIN3 compared with those with no such history; the relative risks were higher for CIN3 than for CIN2. There was no indication of excess risk for rectal cancer. In analyses that accounted for the time since first CIN3, the relative risks for anal, vulvar, and vaginal cancers were increased 25 years or longer after CIN3 diagnosis (hazard ratios, 4.8, 3.2, and 5.5, respectively).

"Women with a history of CIN2 or CIN3 have a long-term increased relative risk for developing anal, vulvar, and vaginal cancer due to an impaired ability to control a persistent HPV infection," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract](#)
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