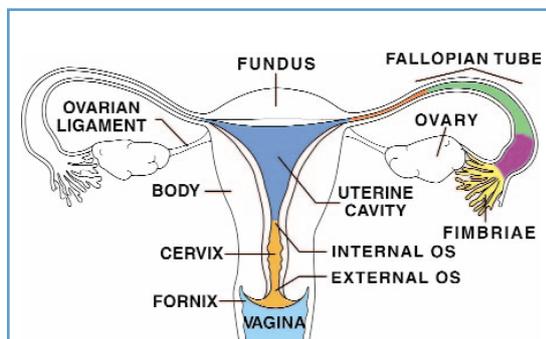


AGUS

Your Diagnosis

Atypical Glandular Cells of Undetermined Significance (AGUS)

The Pap test your clinician recently performed has shown some abnormal cell changes of the cervix called Atypical Glandular Cells of



Undetermined Significance (AGUS). AGUS may arise from the endocervix (glandular portion of the cervix) or the endometrium (uterine lining tissue). Although AGUS is an abnormal result that requires additional follow-up, it is important to understand that a diagnosis of AGUS

does not necessarily mean that you have cervical or uterine cancer.

Pap Test Background Information

All women 18 and over (and younger women who are sexually active) should have a pelvic examination at least once a year. An important part of the pelvic examination is the Pap test. It is performed so that a medical laboratory can examine cells from your cervix. The Pap test is important because it can help prevent cervical cancer by detecting cell changes at an early stage. Most of these early abnormalities are completely curable.

- Dr. George Papanicolaou developed the Pap test in the 1940s.
- Since the Pap test was introduced, the number of annual deaths from cancer of the cervix in the United States has declined by over 70%.
- Most women who die from cervical cancer today have not had Pap tests on a regular basis to detect early signs of disease.
- The American Cancer Society estimates that approximately 13,000 new cases of cervical cancer will be diagnosed this year.
- The five-year survival rate for cervical cancer is greater than 90%.
- Risk factors for cervical cancer include, but are not limited to: infection with Human Papillomavirus (HPV), sexual activity at a young age, a history of multiple sexual partners, smoking and conditions which compromise the immune system, such as HIV infection.

Follow-up Options for AGUS

Colposcopy In this procedure, a magnifying instrument that looks like a pair of binoculars (colposcope) is positioned at the entrance of the vagina. Your clinician will be able to view the surface of the vagina and the cervix clearly during this procedure and will look for abnormal areas.

Biopsy If abnormal areas are seen during the colposcopy, your clinician may perform a biopsy (remove a small tissue sample) and send it to a laboratory for study under a microscope. Usually, multiple areas of the cervix are biopsied during the procedure.

Endocervical Curettage (ECC) In this procedure, your clinician will scrape cells from the wall of your cervical canal. The cells are then sent to a laboratory and studied for abnormal changes. ECCs and biopsies are often performed as a combined procedure.

Endometrial Biopsy Your clinician may also decide to obtain a tissue sample from the endometrium, the lining of the uterus.

Important Questions to Ask Your Doctor

- For my condition, what follow-up options do I have?
- What do you suggest and why?
- What are the potential risks or side effects to this option?
- When do you recommend a repeat Pap test?

Sources for Additional Information

- Associated Pathology Medical Group: www.apmglab.com or 800-848-2764
- American Cancer Society: www.cancer.org or 800-227-2345
- National Cancer Institute: www.nci.nih.gov or 800-4-CANCER



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