EUROGIN INTERNATIONAL MULTIDISCIPLINARY HPV CONGRESS FEBRUARY 10 13 2027

Bologna Congress Center • Bologna, Italy

Specialized Workshop

Colposcopy Course

Wednesday, February 10 • 12.30 - 15.00

Coordinators



Jacob Bornstein
Israel
President-Elect of the IFCPC and Chair of its Nomenclature Committee



Long Chui
China
Director of the Cervical Disease Diagnosis and Treatment Center and Director of the Hysteroscopy Center at Fudan University

Welcome to the EUROGIN Colposcopy Course

The management of cervical precancer has advanced considerably in recent years, yet colposcopy remains its cornerstone. Performing colposcopy requires sound theoretical knowledge, technical skill, and clinical experience.

In this course, participants will learn the fundamentals of colposcopic practice, including the proper use of the colposcope, standard examination protocols, and the principles of diagnosing and treating precancerous cervical lesions.

The EUROGIN Colposcopy Course was founded by **Professor Albert Singer** and is currently led by **Professor Jacob Bornstein**, President-Elect of the IFCPC and Chair of its Nomenclature Committee, which developed the contemporary colposcopic terminology, and **Professor Long Sui**, Director of the Cervical Disease Diagnosis and Treatment Center and Director of the Hysteroscopy Center at Fudan University, Shanghai, China.

The faculty also includes **Dr. Elsa Diaz** from Mexico, Secretary General of the IFCPC, and **Dr. Gabi Haran** from Israel, Chair of the Israeli Society for Cervical Pathology and Colposcopy. Both are also highly experienced specialists in colposcopy. Colposcopy is the visual examination of the cervical epithelium using uni- or binocular magnification. Abnormalities associated with squamous and glandular precancer can be identified, particularly after the application of 3-5% acetic acid solution and Lugol's iodine, which highlight epithelial and vascular changes.

These alterations usually occur within the transformation zone, where glandular epithelium undergoes metaplasia to squamous epithelium. The upper limit of this process, the new squamocolumnar junction, should be fully visualized; otherwise, lesions may extend into the endocervical canal. Any visible abnormality can be sampled by punch biopsy.

Colposcopy remains indispensable in the diagnosis and management of cervical precancer. It is indicated in cases of abnormal cytology, high-risk HPV infection, or when clinical findings raise suspicion of early invasive disease.

Educational Objectives

Upon completion of this activity, participants should be able to:

- Describe the anatomy, cytology, histology, and colposcopic appearance of the cervix.
- Explain the pathophysiology of lower genital tract neoplasia and the role of HPV.
- Apply the IFCPC colposcopy terminology.
- Recognize the diagnostic features of minor and major cervical lesions, glandular lesions, and cervical cancer.
- Correlate cytologic, colposcopic, and histologic findings.
- Outline treatment options, including cryotherapy and LLETZ.
- Provide appropriate patient education and counseling.

Specialized Workshop

Colposcopy Course

I. Opening — 12.30 - 13.30

The normal and abnormal cervix and the colposcopic examination

J. Bornstein (Israel)

II. Treatment of cervical precancer and treatment-related complications — 13.30 - 14.00

G. Haran (Israel)

III. Guidelines for the management of abnormal cervical screening results — 14.00 - 14.25

E. Diaz (Mexico)

IV. Interactive case presentation — 14.25 - 14.55

L. Sui (China)

V. Conclusion — 14.55 - 15.00

J. Bornstein (Israel)
