



AVAIL THE POWER
OF HPV DNA TEST
FOR CERTAINTY AND CONFIDENCE.
EASIER DECISION-MAKING



HELP THEM TO HAVE A BETTER LIFE

CERVICAL CANCER SCREENING BY HPV DNA TEST

"There is sufficient evidence that testing for human Papilloma virus as the primary screening modality can reduce cervical cancer incidence and mortality rates."

IARC / WHO, 2005

THE GOLD STANDARD IN CERVICAL CANCER SCREENING

- US FDA approved and in Europe CE-marked
- Over 300 publications for HC2 HPV DNA test
- Multiple Clinical trials involving over 800,000 women
- Clinically validated against CIN 2+
- Sensitivity is 98% for CIN 2+ and 100% for CIN 3+

INDICATIONS FOR OUR TEST

- Primary screening for women of age > 30
- In case of doubtful PAP / ASCUS
- Past history of CIN 2+
- Post-vaccine screening of women age > 30
- Test of cure for regressed cancers

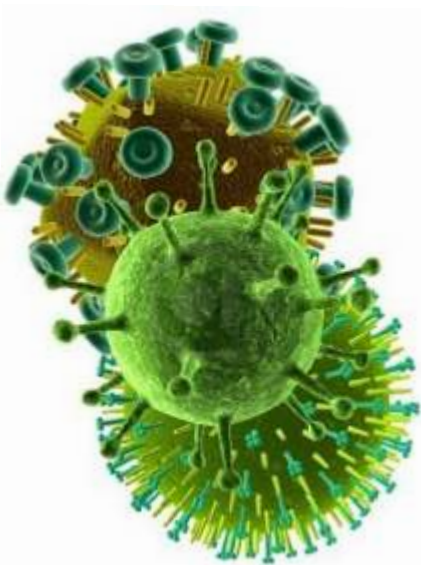
digene HPV DNA TEST VS PAP

WHY *digene* HPV DNA TEST?

- Our test has much higher sensitivity over cytology
- It is cost effective. Negative test result helps in reducing screening frequency (once in 3 to 5 years).
- Clearly differentiates between infection & disease allowing for better risk assessment with certainty & confidence.
- This test helps in detecting pre-cancers, thus reducing mortality by 50% and help in saving lives.
- Co-testing with Pap increases sensitivity to 100%
- It has a "high negative predictive value" with 99.7% certainty.

Limitations of PAP

- Factors like clumping of cells, blood, air bubbles, improper staining, inadequate cells can affect the slide quality and result interpretation
- Low sensitivity (~55%)
- Extensive training is required to get good reliable results
- Not suitable for mass screening programs



WHAT DOES THE TEST RESULT MEAN?

Negative

- Negligible risk of cancer with a 99.7% certainty
- Reduce screening interval to once in every 3 to 5 years

Positive

- Increased risk of progression due to high-risk HPV
- Immediate follow-up is essential
- Repeat the test in 12 months

DOES ONE NEED TO DO THE TEST EVEN AFTER HPV VACCINES?

Yes. Vaccines protect against only 2 high-risk (HR) HPV types of the 18 HR types that cause cervical cancer and 2 low-risk (LR) types that cause genital warts. Vaccines are good as prophylactic for women in the age group of 12-25 years. Unfortunately women who have active infection, especially over the age of 30, show little or no benefit of vaccine. Secondly, no real data on long term protection from vaccines is yet available as vaccines are only 5 to 6 years old in the market. So screening is still important as every second woman gets infected with HPV in her life-time.



BLOG FOR CERVICAL CANCER AWARENESS & PREVENTION
<http://ayugen.wordpress.com>

To order for the test, please call on our numbers below
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