

## Letter to the Editor

---

### **Ki67 predicts progression in early CIN: Validation of a multivariate progression-risk model**

To the Editor,

Dr. Silvestrini raises several important questions pertaining to the validity, usefulness and daily use of quantitative molecular characteristics in the prediction of the behaviour of early Cervical Intra-epithelial Neoplasia (CIN) lesions [1]. These relate to the clinical importance of the progression risk of early CINs, the reproducibility of the quantitative pathology assessments, and the availability of the methodology. We agree that these points are important issues, reason why we have addressed these in detail in our editorial elsewhere in this issue [2].

#### **References**

- [1] A.J. Kruse, J.P. Baak, E.A. Janssen, K.H. Kjellevold, B. Fiane, K. Lovslett, J. Bergh and S. Robboy, Ki67 predicts progres-

sion in early CIN: validation of a multivariate progression-risk model, *Cell. Oncol.* **26**(1–2) (2004), 13–20.

- [2] J.P. Baak, A.J. Kruse, E. Janssen and B. van Diermen, Predictive testing of early CIN behaviour by molecular biomarkers, *Cell. Oncol.* **27**(5,6) (2005), 277–280.

Jan P.A. Baak<sup>a,b,c,\*</sup>  
Arnold-Jan Kruse<sup>a</sup>  
Emiel Janssen<sup>a</sup>  
Bianca van Diermen<sup>a</sup>

<sup>a</sup>*Department of Pathology, Stavanger University Hospital, Stavanger, Norway*

<sup>b</sup>*The Gade Institute, University of Bergen, Norway*

<sup>c</sup>*Free University, Amsterdam, The Netherlands*

---

\*Corresponding author. E-mail: baja@sir.no.