

Figures and Legends

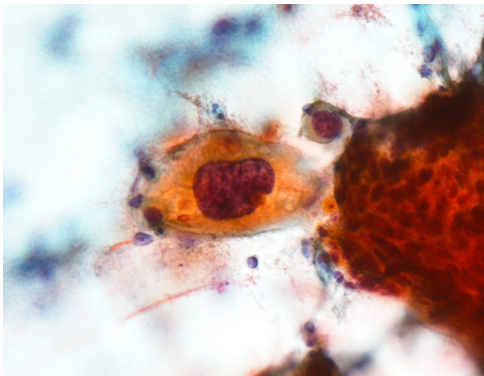


Figure 1. First cervical cytology: squamous cell carcinoma ($\times 40$ Pap smear).

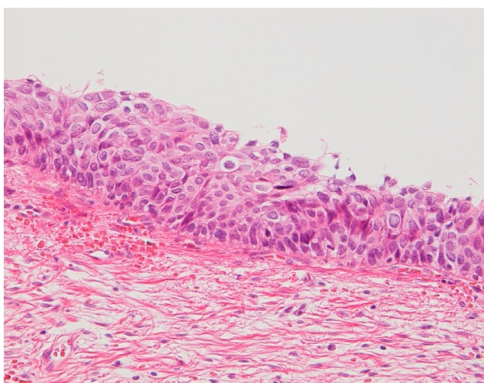


Figure 2. Pathological specimen from conization: carcinoma in situ ($\times 20$ hematoxylin and eosin stain).

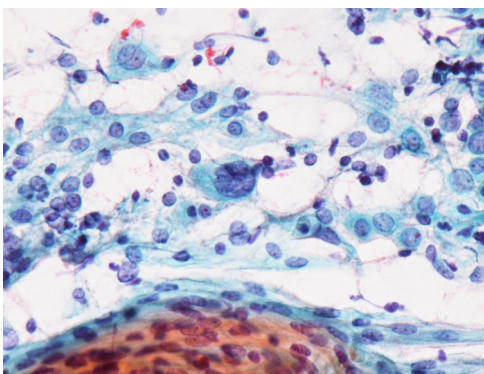


Figure 3. Cervical cytology 4 months after the second allogeneic stem cell

transplantation: high-grade squamous intraepithelial lesion ($\times 40$ Pap smear).

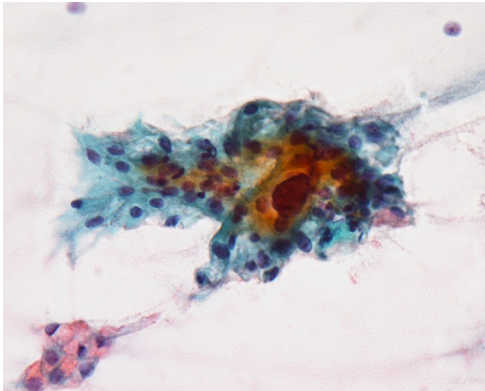


Figure 4. Cervical cytology 11 months after the second allogenic stem cell transplantation: atypical squamous cells of undetermined significance ($\times 40$ Pap smear).

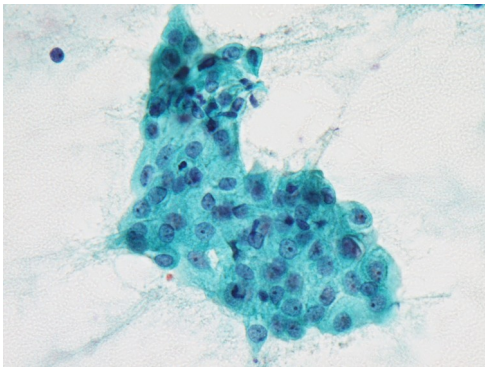


Figure 5. Cervical cytology 16 months after the second allogenic stem cell transplantation: negative for intraepithelial lesion or malignancy ($\times 40$ Pap smear).

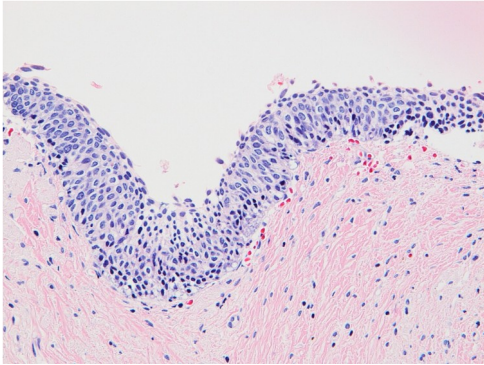


Figure 6. Pathological specimen from hysterectomy: cervical intraepithelial neoplasia, grade 3/HSIL ($\times 20$ hematoxylin and eosin stain).

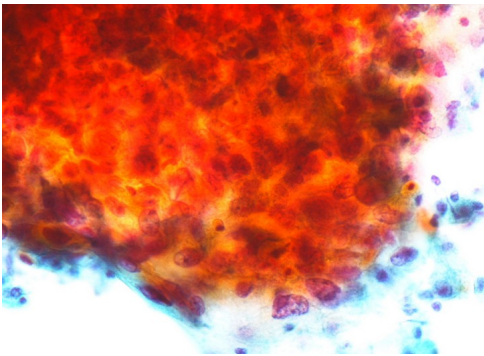


Figure 7. Cervical cytology 2 months after hysterectomy: squamous cell carcinoma ($\times 40$ Pap smear).

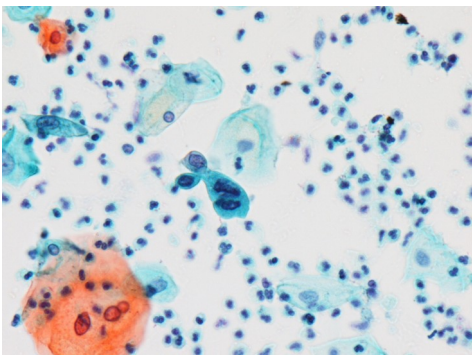


Figure 8. Cervical cytology 5 months later after hysterectomy: high-grade squamous intraepithelial lesion ($\times 40$ Pap stain).

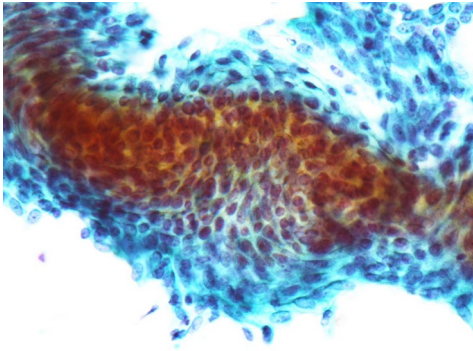


Figure 9. Cervical cytology 3 years after hysterectomy: negative for intraepithelial lesion or malignancy ($\times 40$ Pap stain).

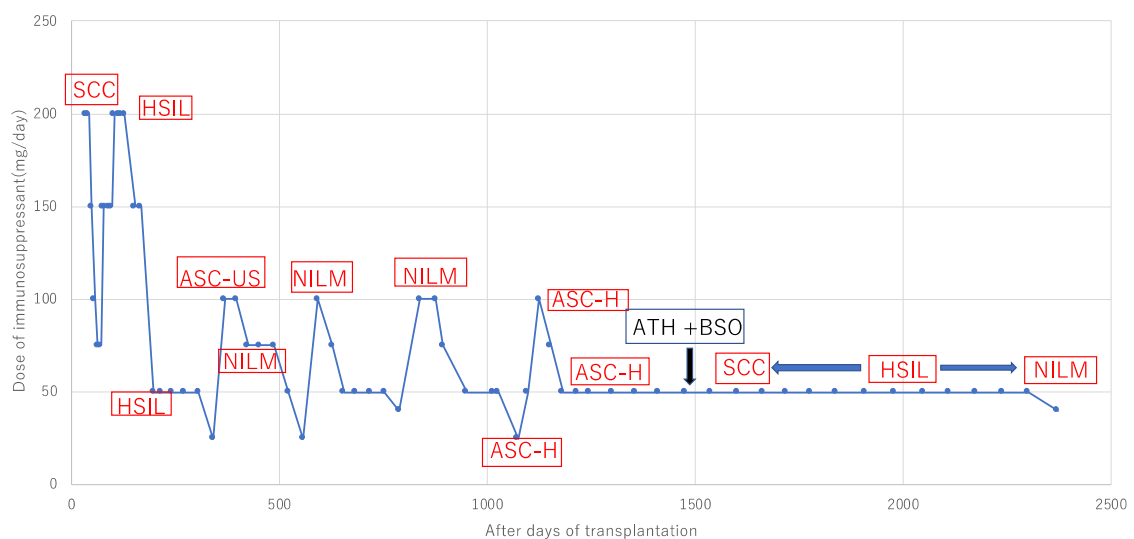


Figure 10. Course of cervical cytology and dose of immunosuppressant. ASC-H, atypical squamous cells cannot exclude HSIL; ASC-US, atypical squamous cells of undetermined significance; ATH+BSO, abdominal total hysterectomy and bilateral salpingo-oophorectomy; HSIL, high-grade squamous intraepithelial lesion; NILM, negative for intraepithelial lesion or malignancy; SCC, squamous cell carcinoma.