

Low Risk HPV types in CIN 2-3 and in Invasive Cervical Cancer patients



Efraim Siegler^{1,2}, Yael Reichman², Nir Kugelman¹, Ludmila Ostrovsky¹, Pninit Saked-Misan³, Lena Machulki¹, Ofer Lavie^{1,2}, Yakir Segev ^{1,2}

¹Department of Obstetrics and Gynecology, Carmel Medical Center, ²Rappaport Faculty of Medicine, Technion-Israel Institute of Technology, ³Serology and Virology Laboratory, Carmel Medical Center, Haifa Israel.

OBJECTIVES

95–99% of patients with invasive cervical cancer are positive to human papilloma virus (HPV). The objective of the current study was to evaluate the incidence of Low Risk (LR-HPV) types among women with Cervical Intra-epithelial Neoplasia 2-3 (CIN 2-3) and cervical cancer (CC).

MATERIALS AND METHODS

We conducted a nested cohort study of patients diagnosed with CIN 2-3 or CC from May 2008 until October 2017

RESULTS

We collected clinical data on 608 women of whom 402 were with CIN 2-3 and 206 with diagnosis of cervical cancer (CC). Of patients with CIN 2-3, 90.3% were found positive to at least one type of HR-HPV, compared to 89.3% of CC patients. 4.5% of patients with CIN 2-3 and 3.9% of those with CIN2-3 were positive to only one LR-HPV, or to some of a few LR-HPV types. Among 5.2% with CIN 2-3 and 6.3% of those with CC no HPV types were detected.

Table 1: HPV types among High SIL and cervical cancer patients

	High SIL (n=402)	Cervical cancer (n=206)		
HR-HPV single	276 (68.7%)	164 (79.6%)		
Multiple strains	86 (21.4%)	21 (10.2%)		
HR HPV-16, 18	229 (57%)	130 (63.1%) 54 (26.2%) 6 (2.9%)		
HR HPV- 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 66, 68	132 (32.8%)			
LR HPV-6, 11, 26, 32, 40, 42, 44, 53, 54, 55, 61, 62, 64, 67, 70, 72, 73, 82	19 (4.7%)			
Negative	21 (5.2%)	13 (6.3%)		
Unknown	0 (0%)	2 (1%)		

Table 2:
HPV type by age group in the population of northern Israel

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HPV type	High SIL					Cervical cancer						
	<25	25-29	30-34	35-54	54>	Total	<25	25-29	30-34	35-54	>54	Total
HR HPV	12	67	90	158	20	347	0	7 (4%)	14	92	63	176
	(3%)	(19%)	(26%)	(46%)	(6%)				(8%)	(52%)	(36%)	
HR-16, 18 7	7	52	60	98	11	228	0	6 (5%)	11	69	40	126
	(3%)	(23%)	(26%)	(43%)	(5%)				(9%)	(55%)	(31%)	
I R	1	6	4	17	4	32	0	0	4	3	5	12
	(3%)	(18%)	(12%	(51%)	(12%)				(33%)	(25%)	(42%)	12
Negative	0	1	3	15	2	21	21 0	0 0	1	5	10	16
	U	(4.7%)	(14%)	(71%)	(9%)		U		(6%)	(30%)	(74%)	
Unknown	0	0	0	0	1	1	0	0	0	3	1	4

CONCLUSION

- The prevalence of the LR-HPV is low but it could not be ignored due to the expected decrease in CC caused by HPV types that are included in the bi-, quadri-, and nanovalent vaccine.
- The CIN 2-3 and CC patients with LR-HPV types and with negative HPV challenging the sensitivity of HPV screening that is based a limited number of HR-HPV types.