

IMPACT OF VAGINAL SELF-SAMPLES SUSPENSION VOLUME ON HUMAN PAPILLOMAVIRUS (HPV) TESTING



Giubbi C¹, Martinelli M¹, Monticciolo I¹, Di Meo M², Perdoni F¹, Musumeci R¹, Castriciano S³, Fruscio R^{1,2}, Landoni F^{1,2}, Cocuzza C¹



¹ Department of Medicine and Surgery, University of Milano-Bicocca, Monza, Italy
² San Gerardo Hospital, ASST Monza, Monza, Italy
³ Copan Italia SpA, Brescia, Italy



Background/Objectives:

Validation of Human Papillomavirus (HPV) testing in combination with self-collection devices offers the possibility to improve cervical cancer screening coverage rates, reaching women who do not attend screening programs. Moreover, the possibility of performing HPV testing on vaginal self-samples eluted in alternative media and suspension volumes as compared to the methanol-based media, presently used routinely to perform cervical cytology (Pap Test) for the triage of women HPV-positive, may further reduce screening costs. This ongoing study aims to evaluate the performance of HPV detection on self-collected vaginal samples suspended in two different non-alcohol-based media, eNat[®] and MSwab[®] (Copan), using two different resuspension volumes (2 ml and 5 ml).

Results (1):

Preliminary results showed HR-HPV positivity rates of 77.3% (17/22), 81.8% (18/22) and 81.8% (18/22) respectively in cervical swabs, vaginal self-samples resuspended in 2 ml and in 5 ml of women enrolled.

Percentages of positivity for HR-HPV in the group of women with vaginal-self samples suspended in eNat[®] and those from specimens suspended in MSwab[®] are reported in Table 1a and 1b; while genotypes distribution in the two groups of women are reported in Figure 1a and 1b.

	HR-HPV positivity rate % (n)		HR-HPV positivity rate % (n)
Cervical sample 20 ml ThinPrep [®] PreservCyt [®]	72,7% (8/11)	Cervical sample 20 ml ThinPrep [®] PreservCyt [®]	81,8% (9/11)
Vaginal self-sample 2 ml eNat [®]	81,8% (9/11)	Vaginal self-sample 2 ml MSwab [®]	81,8% (9/11)
Vaginal self-sample 5 ml eNat [®]	81,8% (9/11)	Vaginal self-sample 5 ml MSwab [®]	81,8% (9/11)

Table 1: HR-HPV positivity rate in cervical swabs and vaginal self-samples suspended in eNat[®] (1a, left) and MSwab[®] (1b, right).

Methods:

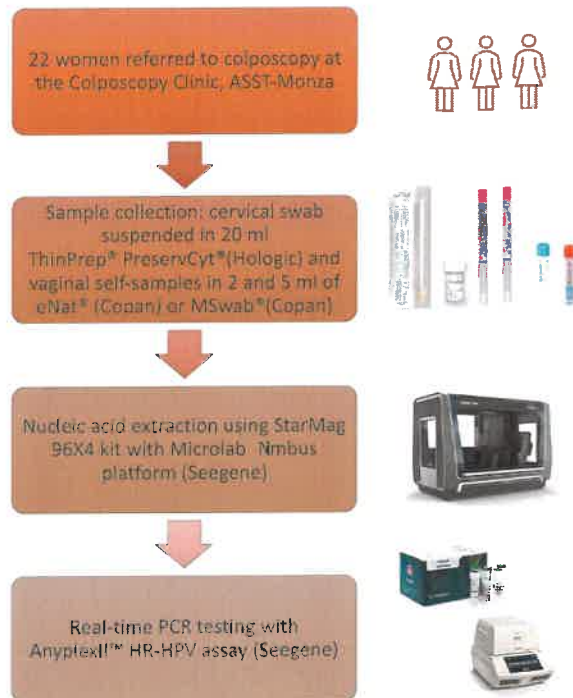
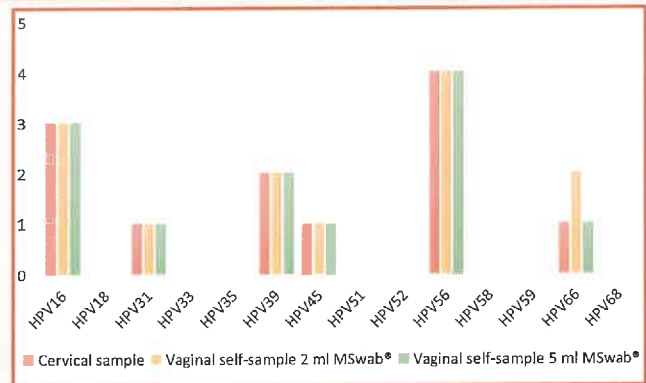
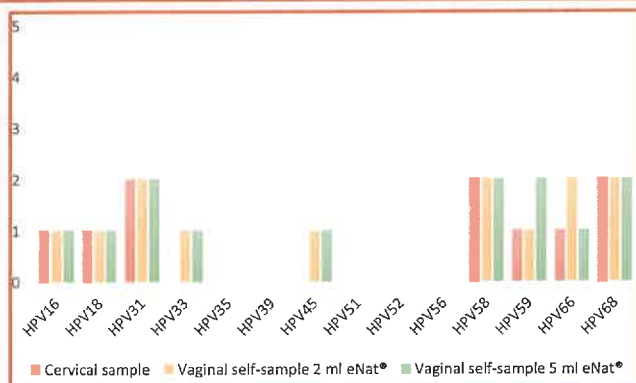


Figure 1: HR-HPV genotypes distribution in cervical and vaginal specimens suspended in 2 and 5 ml of eNat[®] (1a, left) and MSwab[®] (1b, right).



Results (2):

Independently from the suspension volume, the percentage of agreement between cervical and vaginal swabs was 95.45% (21/22). Data regarding agreement rates of cervical and vaginal specimens suspended in 2 and 5 ml of eNat[®] and MSwab[®] are shown respectively in Table 2a and Table 2b.

	Cervical sample	
	Concordance n (%)	Kap κ (95% CI)
Vaginal self-sample 2 ml eNat [®]	10 (90.91%)	0.774 (0.282 - 1.000)
Vaginal self-sample 5 ml eNat [®]	10 (90.91%)	0.774 (0.282 - 1.000)

	Cervical sample	
	Concordance n (%)	Kap κ (95% CI)
Vaginal self-sample 2 ml MSwab [®]	11 (100.00%)	1.000 (1.000-1.000)
Vaginal self-sample 5 ml MSwab [®]	11 (100.00%)	1.000 (1.000-1.000)

Table 2: agreement rates of cervical and vaginal specimens suspended in 2 and 5 ml of eNat[®] (2a, left) and MSwab[®] (2b, right).

Conclusions:

These preliminary data demonstrated a good agreement in HPV detection between cervical and vaginal self-collected samples independently from the suspension medium and/or volume used, supporting the possibility of introducing alternative safer and more cost-effective media for the implementation of vaginal self-sampling in cervical cancer screening programs. Studies on a larger set of samples could confirm these findings.