

# **Detection of HPV in first-void urine using an E6/E7** HPV mRNA assay in women referred for colposcopy



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<b>Objective</b> Methods	
<ul> <li>High correlates between HPV</li> <li>DNA in first-void urine (FVU) and cervical samples have been</li> <li>Women referred for colposcopy (NCT02714127) were asked to collect a FVU sample (Day 0) (Colli-Pee<sup>™</sup>, Novosanis) prior to their visit with the gynecologist for a cervical smear and colposcopy.</li> <li>Cervical smear and colposcopy results (w/ biopsy if indicated) originate from samples taken at Day 0 ± 3 months.</li> </ul>	
cervical samples have been found. However, because First-void urine (FVU)	
detecting E6/E7 HPV mRNA in Cervical smears has proven to be	
as sensitive as HPV DNA testing, delivering fewer false positive results, this study seeks to	

results, to this study seeks elaborate on the detection of E6/E7 HPV mRNA in FVU.

 Aptima<sup>®</sup> HPV assay (Hologic, Panther) • HPV16/18/31/33/35/39/45/51/52/56/58/ **59**/66/68<sup>a</sup>

HPV genotyping (n=98)

Nv

**98** m

• 4ml FVU + Urine Conservation Medium  $(2:1 \text{ ratio}) \rightarrow \text{Amicon filtration}$  (Merck Millipore) followed by NucliSENS<sup>®</sup>

easyMAG<sup>®</sup> DNA extraction (bioMérieux) [1]

• Riatol qPCR HPV genotyping assay [2]

• HPV6/11/16/18/31/33/ **35/39/45/51/52/**53**/56**/ **58/59/**66/67/68<sup>a</sup>

• ThinPrep<sup>®</sup> Pap Test (Hologic) – Shandon<sup>™</sup> /PreservCyt<sup>®</sup> collection medium (Thermo **Colposcopy** (n=93) Fisher/Hologic)

• Nomenclature: Bethesda classification

**HPV genotyping** (n=95)

• Riatol qPCR HPV genotyping assay [2]

**Histology** (n=35) • HPV6/11/16/18/31/33/35/39/45/51/52/5 3/56/58/59/66/67/68ª • UZA, pathology



• Nomenclature: CIN (Cervical Intraepithelial Neoplasia) grade 0 (negative) / 3+

abnormal lesion

• Performed by 2 gynecologists from the

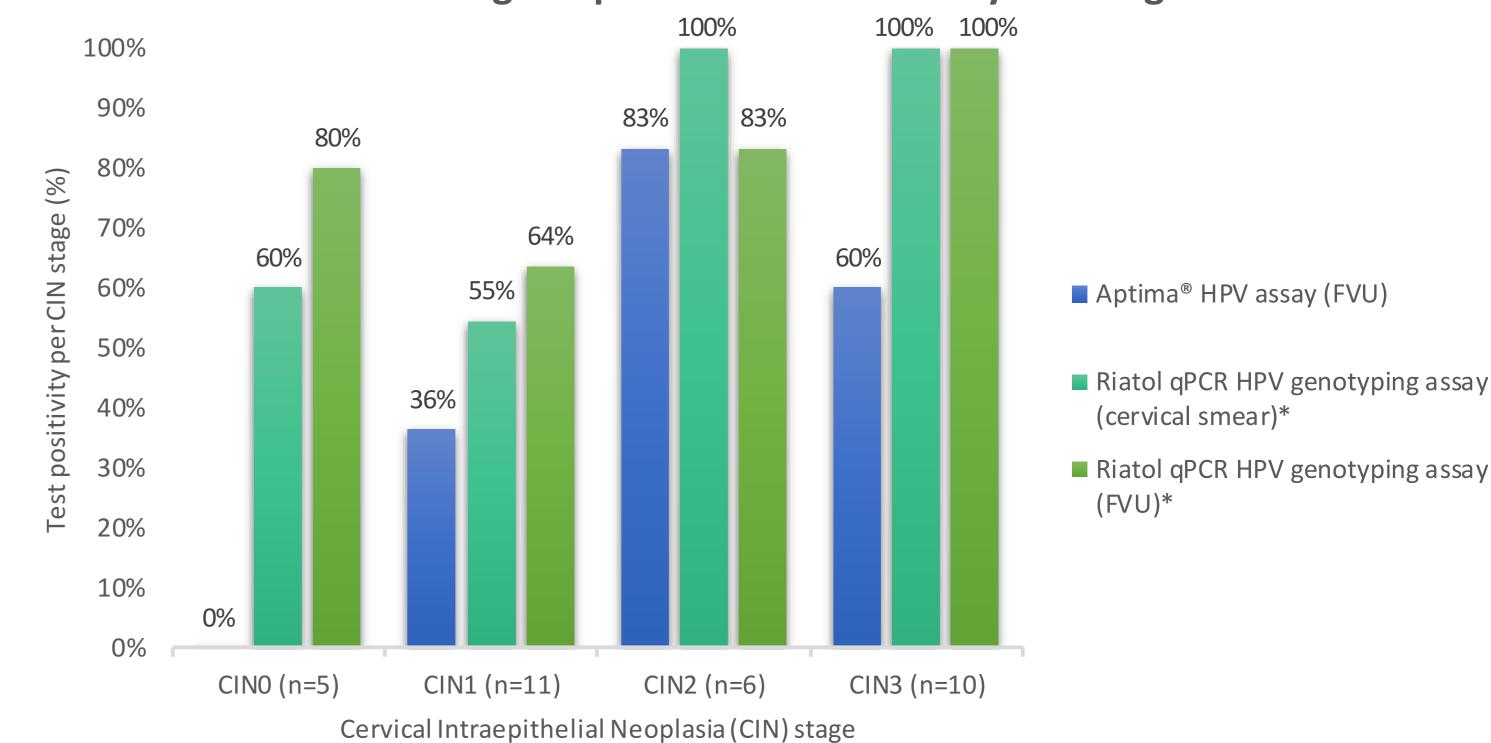
• Nomenclature: normal, low-, high-grade

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<sup>a</sup>High-risk HPV types according to the HPV classification from the International Agency for Cancer Research on (IARC) 2012 are displayed in bold (class 1). HPV68 is classified as probably high-risk (class 2A), HPV66/67 as possibly high-risk (class 2B).

## Results

- N=98 paired E6/E7 HPV mRNA (Aptima<sup>®</sup> HPV assay) and HPV DNA (Riatol qPCR HPV genotyping assay) results in FVU samples (18.73ml (95% CI: 18.49-18.98ml)).
- HPV was detected in 40.82% (E6/E7 HPV mRNA in FVU; n=40/98), 74.49% (HPV DNA in FVU; n=73/98), and 75.79% (HPV DNA in cervical smear; n=72/95) of the samples\*.
- A reasonable agreement (kappa value: 0.372 (95% CI: 0.064-0.680)) was found for the Aptima<sup>®</sup> HPV assay in FVU samples and CIN2+ lesions.
- Histology results are available for 35/98 women, from whom 32 paired FVU, cervical smear, and histology results are available (figure below).



## Percentage of positive test results by CIN stage

Sensitivity and specificity values of the Aptima<sup>®</sup> HPV assay with reference to HPV DNA, liquid based cytology (LBC), colposcopy class, and histology results are illustrated in the table below.

		E6/E7 HPV mRNA (FVU)			Kappa (95% CI)	Chi- Square	Sensitivity (95% Cl)	Specificity (95% Cl)	<sup>§</sup> Samples positive for E6/E7 HPV mRNA (FVU) and negative for HPV DNA in FVU and cervical
		Neg.	Pos.	Total		Square	(5578 CI)	(55% CI)	smears (CS) originate from 4 - different women:
	Neg.	23	2 <sup>§</sup>	25	0.307				FVU-/CS+:
HPV DNA (FVU)*	Pos.	35	38	73	(0.168- 0.446) <	<0.001			, LBC: NILM; Colposcopy: LSIL; Histology: /; HPV DNA: HPV39
	Total	58	40	98					LBC: LSIL; Colposcopy: HSIL;
HPV DNA	Neg.	21	2 <sup>§</sup>	23	0.275				Histology: CIN2; HPV DNA: HPV52
(cervical smear)*	Pos.	36	36	72	(0.138- 0.412)	<0.001			FVU+/CS-:
	Total	57	38	95					LBC: NILM; Colposcopy: normal; Histology: /; HPV DNA: HPV33/68
LBC (≥ASC-US)	Neg.	35	16	51	0.199	0.049	51.11 (35.77- 66.30)	68.63 (54.11- 80.89)	LBC: ASC-US; Colposcopy normal;
	Pos.	22	23	45	(-1.761- 2.159-				Histology: CIN0; HPV DNA: HPV45 /59/66
	Total	57	39	96				,	
Colposcopy	Neg.	16	7	23	0.078 (-0.073-		42.03	69.57	-
class	Pos.	40	29	69	0.229)	0.324	(30.24-	(47.08-	
(≥LSIL)	Total	56	36	92			54.52)	86.79)	
Colposcopy	Neg.	49	27	76	0.139		56.25	64.47	*The Riatol qPCR HPV genotyping
class	Pos.	7	9	16	(-0.043- 0.321)	0.123	(29.88-	(52.66-	assay was scored test positive
(≥HSIL)	Total	56	36	92	0.321)		80.25)	75.12)	solely for the HPV types included in the Aptima <sup>®</sup> HPV assay
Histology (CIN2+)	Neg.	12	5	17	0.372		66.67	70 50	(HPV16/18/31/33/35/39/45/51/5 2/56/58/59/66/68). Statistically
	Pos.	6	12	18	(0.064- 0.680)	0.028	66.67 70.59 (40.99- (44.04- 86.66) 89.69)	(44.04-	significant associations are dis- played in purple (Chi-square test;
	Total	18	17	35			80.00)	85.057	p-value < 0.05). ¥ The fisher exact
Histology (CIN3+)	Neg.	14	11	25	0.132		60.00		test was used to correct for >20% of cells with an expected count
	Pos.	4	6	10	(-0.170- 0.434)	0.471 <sup>¥</sup>	60.00 (26.24- 87.84)	56.00 (34.93- 75.60)	less than 5. Biopsies where both CIN1 and 2, or CIN2 and 3 lesions
	Total	18	17	35			07.047	75.007	were identified were classified as respectively CIN2 and CIN3.

\*The Riatol qPCR HPV genotyping assay was scored test positive solely for the HPV types included in the Aptima® HPV assay (HPV16/18/31/33/35/39/45/51/52/56/58/59/66/68). Biopsies where both CIN1 and 2, or CIN2 and 3 lesions were identified were classified as respectively CIN2 and CIN3.

## Conclusion

- This study illustrates that it is feasible to detect E6/E7 HPV mRNA in first-void urine samples from 25 to 64 year old women referred for colposcopy in Belgium.
- Further study is required to evaluate the clinical performance of the Aptima<sup>®</sup> HPV assay in FVU samples.

## References

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2. Micalessi IM, Boulet GAV, Bogers JJ, Benoy IH, Depuydt CE. High-throughput detection, genotyping and quantification of the human papillomavirus using real-time PCR. Clin Chem Lab Med. 2012;50(4):655-61.

### **Acknowledgements & Conflicts of interest**

We would like to thank all women who volunteered and thank the gynecologists (W. A. A. Tjalma and L. Ameryckx) for their assistance in this study.

This work was supported by the Industrial Research Fund of the University of Antwerp (PS ID 32387). S. Van Keer is supported by a Ph. D. fellowship of the Research Foundation – Flanders (FWO) (1120816N). We thank Novosanis and Hologic for providing Colli-Pee<sup>™</sup> devices and testing the FVU specimens with the Aptima<sup>®</sup> HPV assay respectively.

A. Vorsters and P. Van Damme are co-founders of Novosanis (Belgium).



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