

Compatibility of Genefirst PapilloplexTM HR-HPV genotyping assay for testing first void urine specimens.



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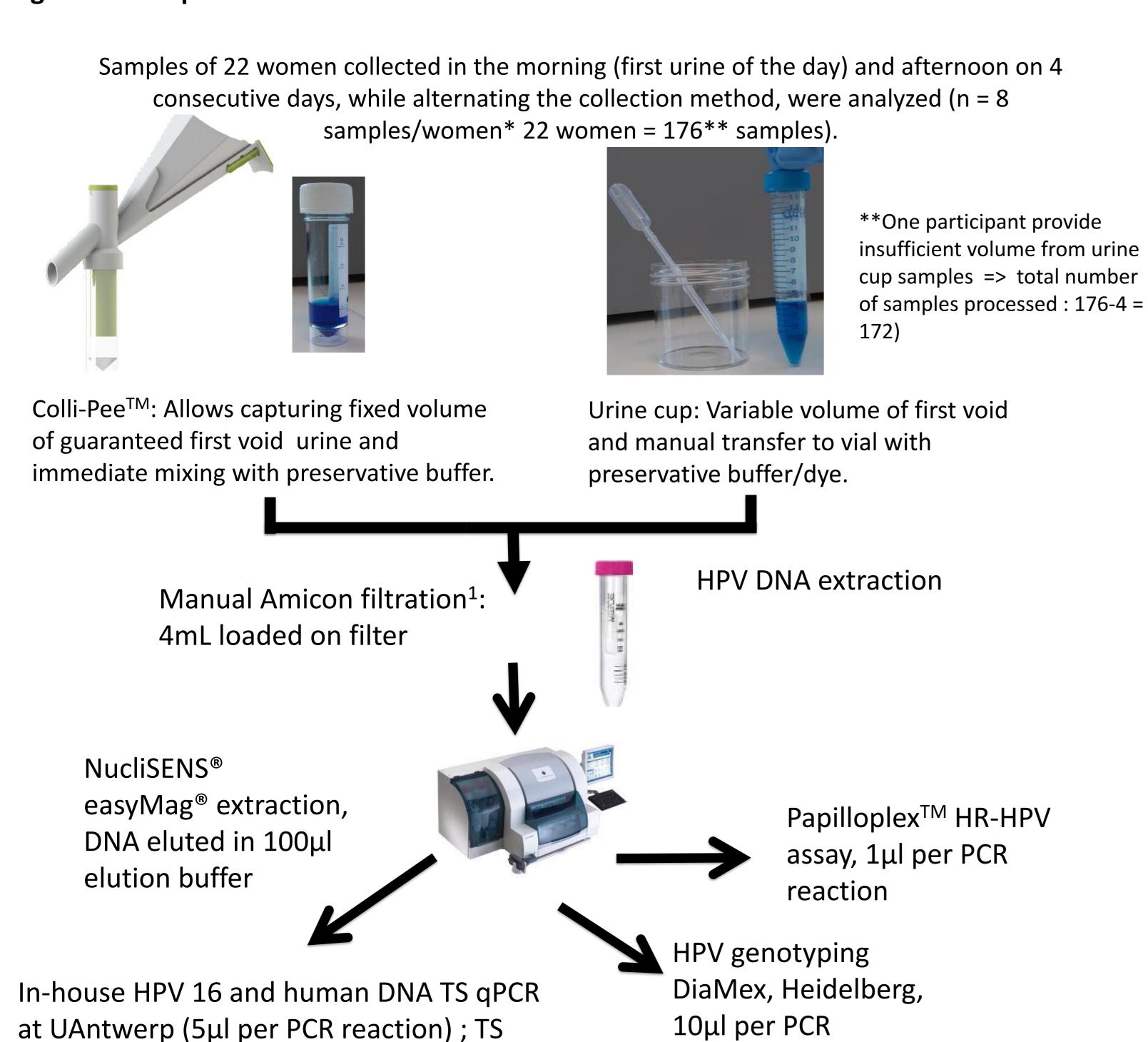
Introduction and objectives:

- HPV urine testing has been proposed for monitoring impact of HPV vaccination, follow-up of treatment and/or reaching women not participating in cervical cancer screening programmes
- Use of first void urine collection device Colli-PeeTM (Novosanis, Belgium) and UCM (Urine Collection Medium, UAntwerp, Belgium) has enhanced the analytical detection of HPV DNA in female urine
- Genefirst PapilloplexTM HR-HPV assay can genotype and quantify all 14 high risk HPV types in a single closed tube real-time PCR reaction
- This assay has been previously evaluated on liquid based cytology (LBC) cervical screening samples but not on urine samples for HPV detection
- The aim of this pilot study is to determine Genefirst Papilloplex[™] HR-HPV test's compatibility with self-collected first void urine specimens and to investigate the effect of the sampling method.

Methods:

- Study population: 22 women with self-reported prior HPV positive test result
- 176 first void urine samples (from 22 women), were collected using either the Colli-PeeTM, first void urine collection device (n=88), or directly into a urine cup (n=88). Participants alternated the collection times (morning and late afternoon) over 4 consecutive days.
- Samples were collected by the participants at home and were sent uncooled by mail to the University of Antwerp.
- Sample collection and processing is shown in figure 1; prior to the PCR tests 4ml of urine/UCM mixture was concentrated on an ultrafiltration membrane and extracted with easyMag® (bioMérieux).

Figure 1. Sample Collection and Workflow



Conclusions:

- These preliminary results confirm that the PapilloplexTM HR-HPV assay is compatible with self-collected first void urine.
- Colli-Pee collected first urine contains higher concentrations of human and HPV
 DNA compared to urine cup collected first void urine.

reaction

Clinical cut-off determination will be addressed in future studies.

References:

- 1) A. Vorsters, et al. Optimization of HPV DNA detection in urine by improving collection, storage, and extraction. Eur J Clin Microbiol Infect Dis. 2014
- 2) Vorsters A, et al. HPV DNA detection in urine: Effect of a first-void urine collection device and time of collection. In: 30th International Papillomavirus Conference. Lisbon, Portugal; 2015.

Results:

- Good agreement of 0.676 and 0.669 of Papilloplex[™] HR-HPV assay with AML TS qPCR and Optiplex HPV genotyping kits respectively for the HR HPV genotypes (table 1).
- High positive correlation recorded for the CT values from our in-house human DNA (GAPDH) qPCR and the human DNA control of the PapilloplexTM HR-HPV assay (Figure 2).
- A very high positive correlation for HPV 16 DNA CT values between the two assays observed as in Figure 3.
- Impact of collection method observed in Figure 4 and 5.
- Average CT values reported in Colli-Pee collected urine for human DNA (Figure 4), and HPV DNA (Figure 5) found to be lower than the CT values from urine cup collected samples.

Table 1: Agreement between Papilloplex, Optiplex and the in-house TS qPCR.

Type HPV DNA // Alternative assay	Papilloplex+ Alternative+			Papilloplex- Alternative-	Kappa (CI95%)
All HR HPV DNA // AML TS qPCR	106	14	10	42	0.676 (0.556– 0.796)
All HR HPV DNA //Optiplex HPV	108	12	12	40	0.669 (0.547 – 0.790)

Figure 2. Correlation CT values for human DNA, Papilloplex versus in-house qPCR.

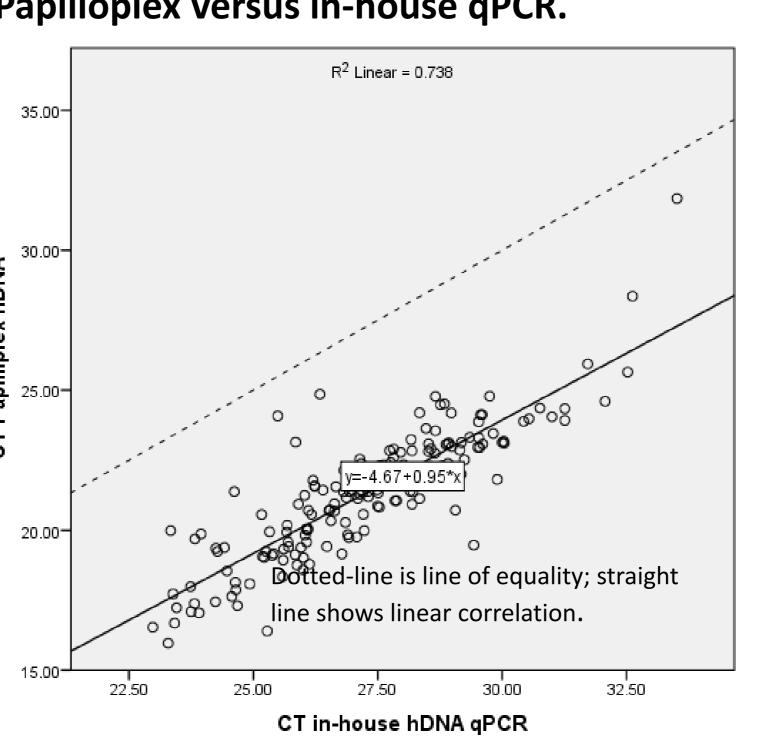


Figure 4. Effect of sampling method CT values for human DNA

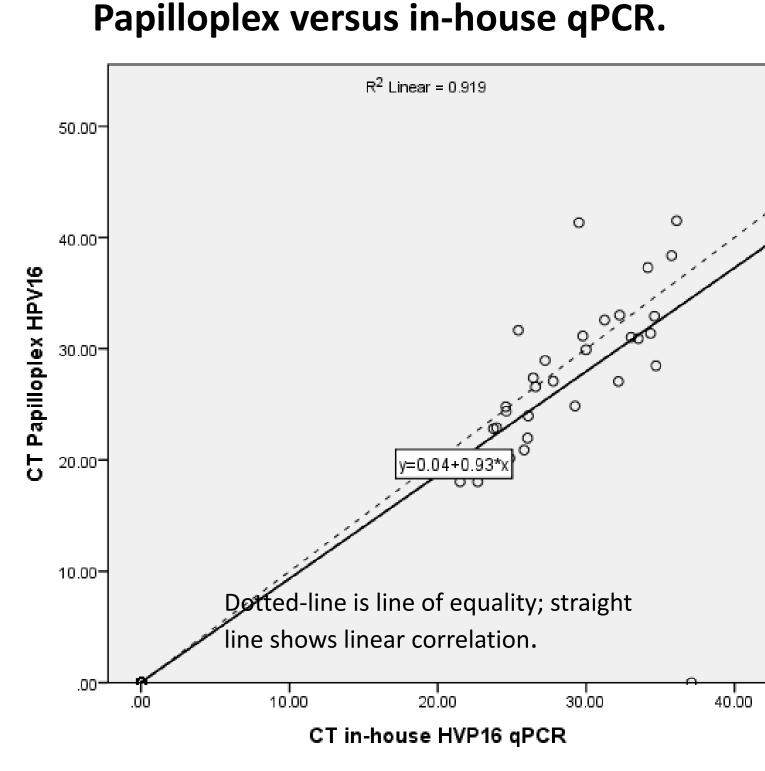
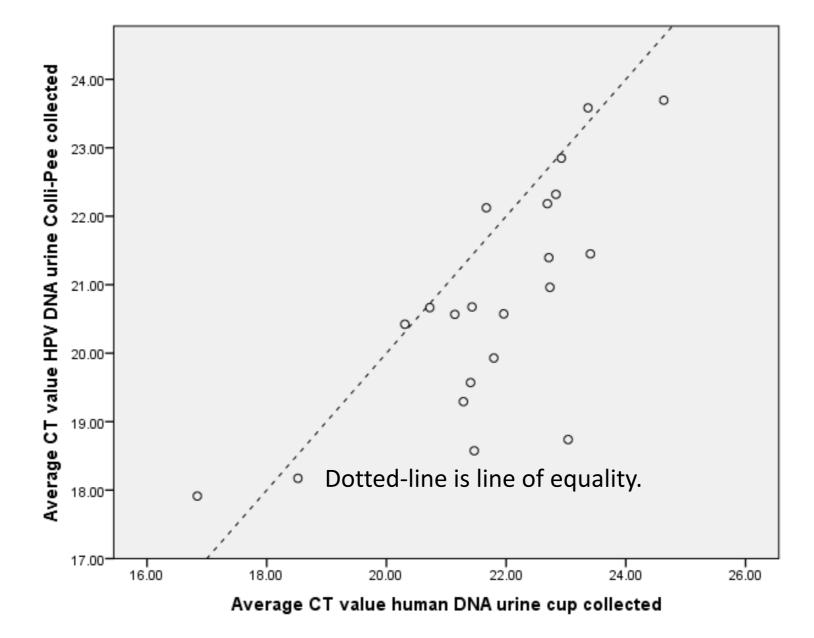
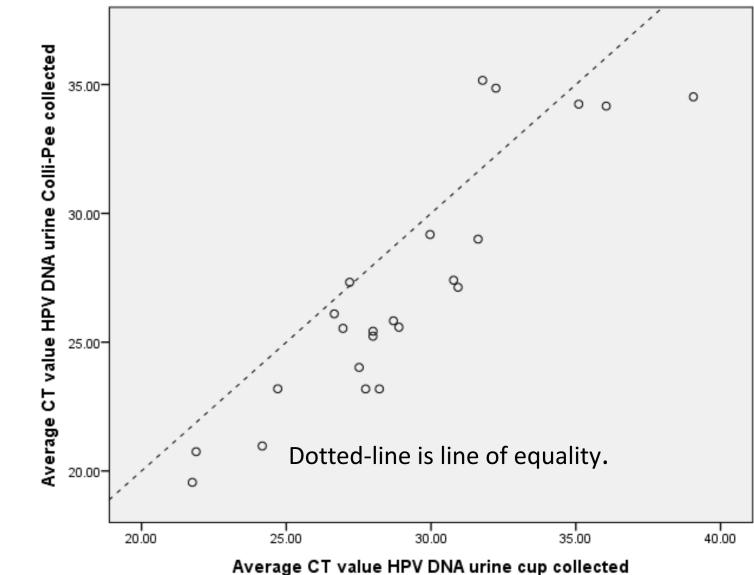


Figure 3. Correlation CT values for HPV16,

Figure 5. Effect of sampling method CT values for HPV DNA





Discussion:

- Results obtained by PapilloplexTM HR-HPV are in line with previous obtained data². A good agreement is found with other commercial methods.
- The impact of a first void urine sampling device, providing first void urine with more concentrated human and HPV DNA, is reconfirmed.
- A limitation of this study is that repeated samples from a limited number of subject are analysed. Larger studies are required to demonstrate performance of the assay.



qPCR at AML (1μl per PCR reaction)