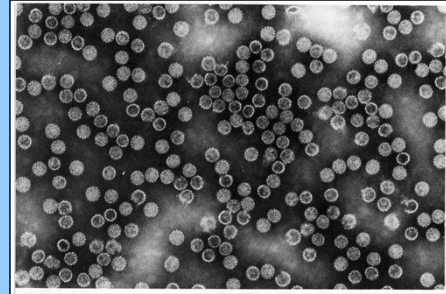


An Update of Human Papilloma Virus (HPV)

Louis Marcus
Clinical Pathologist
May 2014



The Human Papilloma Virus

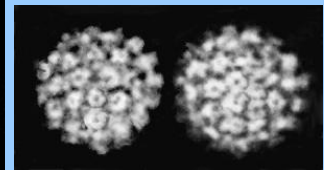


Shah, KV. Sexually Transmitted Diseases, 1990

The Virus

- Cannot be propagated in tissue culture or laboratory animals
- MOLECULAR BIOLOGY
- Multiple types > 100 up to 170 types – genomics study
- Small 55nm
- 7900 base pairs
- Double stranded DNA virus
- Round shell resembling a golf ball

Human Papilloma Virus



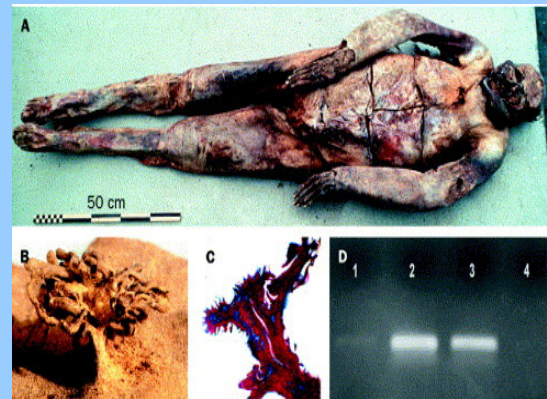
Introduction

- MOST common STI in humans
- Infected persons are usually asymptomatic
- Species and host specific – human only reservoir
- Been described since antiquity

Mary of Aragon 1503 -- 68



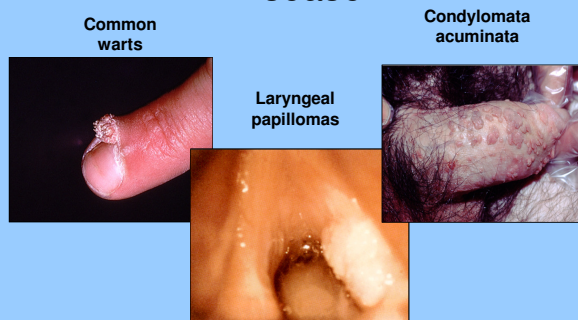
Basilica Saint Domenica Maggiore in Naples



HPV Classification and Characteristics

- 2/3 of Americans harbour at least 1 HPV – Human Microbiome project
- Species and tissue specific
- Induces both benign and malignant disease

Benign HPV-Associated Disease



Diseases Associated with HPV (Benign)

- Warts – 1, 2, 3, 7, 10
- Respiratory papillomata – 6, 11
- Condylomata acuminata – 6, 11



Diseases Associated with HPV (Malignant)

- Head and neck carcinoma
- Squamous cell carcinoma of the oesophagus
- Anogenital carcinoma
- Rectal carcinoma
- Vulva carcinoma
- Vaginal carcinoma
- Oropharyngeal carcinoma
- Adenocarcinoma of the cervix
- SQUAMOUS CELL CERVIX CARCINOMA

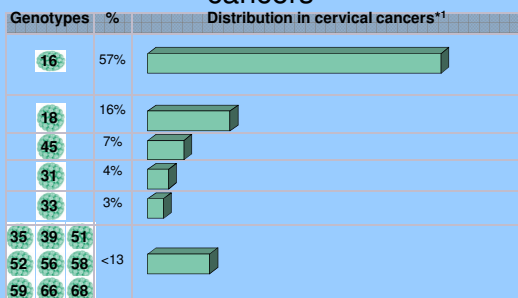
HPV and Malignancy

- 2nd most common cancer among women in SA
- Most common cancer of women in Africa

Diseases Associated with the Cervix

- Epithelial tumours
- Mucosal HPV infections: latent, asymptomatic, subclinical or clinically obvious
- LOW risk HPV subtypes - HPV 6 & HPV 11
- INTERMEDIATE risk HPV subtypes
- HIGH risk HPV subtypes – 16, 18, 33, 45, 31

Among all hrHPVs, HPV16/18 alone cause over 70% of all cervical cancers



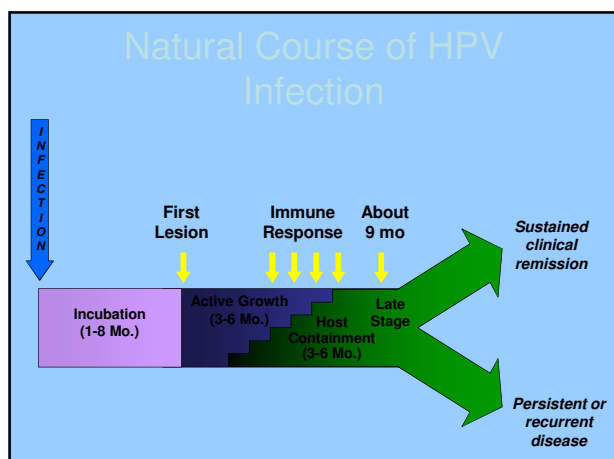
¹ Includes multiple and single infections
¹ Munoz N, et al. Int J Cancer 2004; 111:278-285

Natural History & Epidemiology of HPV and the Cervix

- Sexual contact
- Vertical transmission

Inoculation → Incubation (1-8 mnths) → First lesion → Active growth & immune response → Host containment → Late stage:

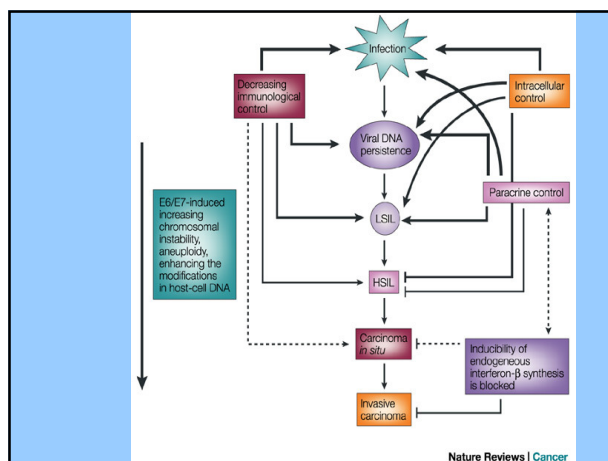
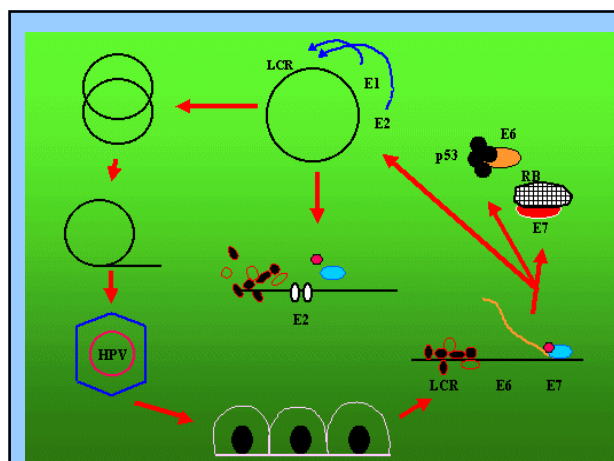
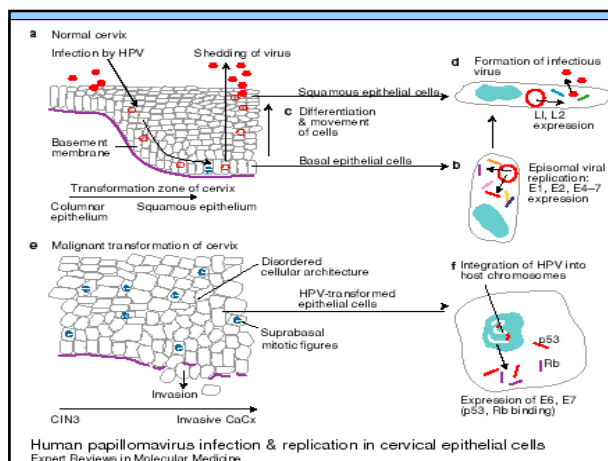
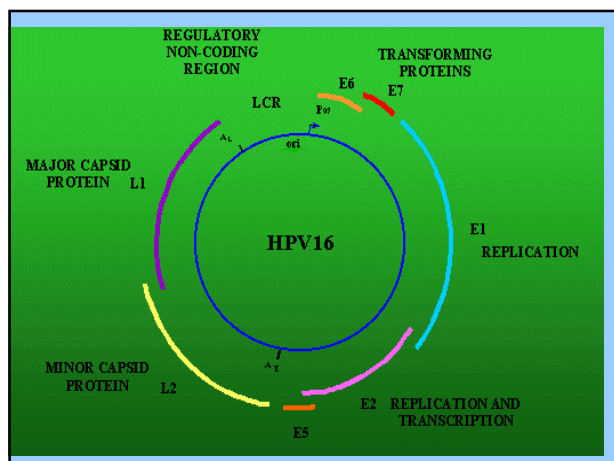
- * Sustained clinical remission
- * Persistent or recurrent disease



Pathogenesis of HPV

- Genome exists in an episomal (circular) configuration divided into 3 regions:

Upstream Regulatory Region (URR)
Early Region (E)
Late region (L)



Malignant transformation

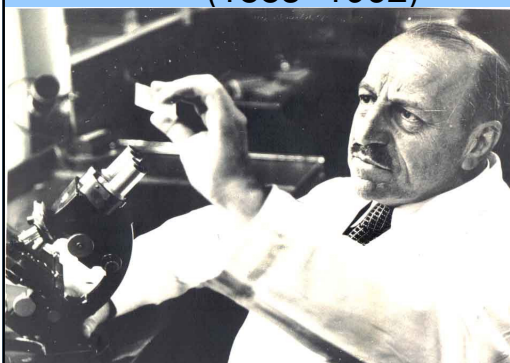
- HPV alone does NOT cause malignant transformation
- Co-factors include:
 - * sexual activity
 - * ultraviolet radiation
 - * pregnancy
 - * folate deficiency
 - * immune suppression
 - * smoking

Prevention of Cervical Cancer

Based on 2 principles:

- 1 Screening for pre-malignant cervical cancer conditions
- 2 Preventing the infection with Human Papillomavirus (HPV)

Georgios Papanikolaou (1883- 1962)



Pap Smear Limitations

- Poor sensitivity
- Labour intensive test with subjective human interpretation
- Fails to detect Adenocarcinoma
- Poor uptake by the population

26 Million Females in SA

11,6 M Women
aged 25-65

2,2 M on Medical Aid
Age 25-65

9,4 M not on Medical
Aid
Age 25-65

500,000 reported paps
of all ages including
repeats

300,000 reported paps
NHLS of all ages
including repeats

23% uptake

3,2% uptake

<http://www.statssa.gov.za/publication/PO302/PO3022011.pdf>
Council of medical aids – annual report

Prevention

Professor zur Hausen unlocked 2 doors in the prevention scenario:

1. Screening using modern molecular techniques
2. Vaccination possibilities

Molecular Techniques for Screening

- Viral DNA
- Viral mRNA E6/E7 integration

Vaccines

IMPORTANCE OF VACCINES!!

HPV Viral Like Particles (VLP L1) & adjuvant

2 vaccines available 16/18 & 16/18/6/11

Very exciting and dynamic field
Thanks for Listening!!

