

HPV Molecular EQAS: Is Quantification Helpful?

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HPV Screening

- Molecular testing for human papillomavirus (HPV) replaced cytology as the screening method for cervical cancer
- HPV testing also recommended in other countries as the preferred screening method

HPV Screening

- HPV testing helps to identify risk of developing cancer
 - Persistent HPV infection → → Cervical Cancer¹
- Partial genotyping determines the pathway of treatment for the patient²

HPV Screening

TEST OF CURE FOLLOWING TREATMENT FOR HIGH-GRADE SQUAMOUS ABNORMALITIES

Treatment for HSIL (CIN2/3)

Co-test (HPV & LBC) at 12 months post treatment

Negative co-test

HPV detected (not 16/18) and/or pLSIL/LSIL

HPV detected 16/18 (regardless of LBC result)

pHSIL/HSIL (regardless of HPV test result)

Repeat co-test at 12 months

Negative co-test

HPV detected (not 16/18) and/or pLSIL/LSIL

HPV detected 16/18 (regardless of LBC result)

pHSIL/HSIL (regardless of HPV result)

Repeat co-test at 12 months

Repeat co-test at 12 months

Negative co-test

Completed ToC* routine 5-yearly screening

Fluctuating results
In the absence of HPV 16/18 & pHSIL/HSIL, annual co-testing until negative co-tests on two consecutive occasions

Refer for colposcopic assessment

* ToC = Test of Cure

Suggested citation: Cancer Council Australia Cervical Cancer Screening Working Party. Clinical pathway: Test of Cure following treatment for high-grade squamous abnormalities, National Cervical Screening Program: Guidelines for the management of screen detected abnormalities, screening in specific populations and investigation of abnormal register findings. GCA 2016. Accessible from http://nckc.cancer.org.au/sites/default/files/Cervical_cancerScreening.pdf

NATIONAL
CERVICAL SCREENING
PROGRAM
A joint Australian, State and Territory Government Program

Australian Government
Department of Health

Cancer
Council
Australia

Cervical Cancer
Screening Guidelines,
NCSP, 2017

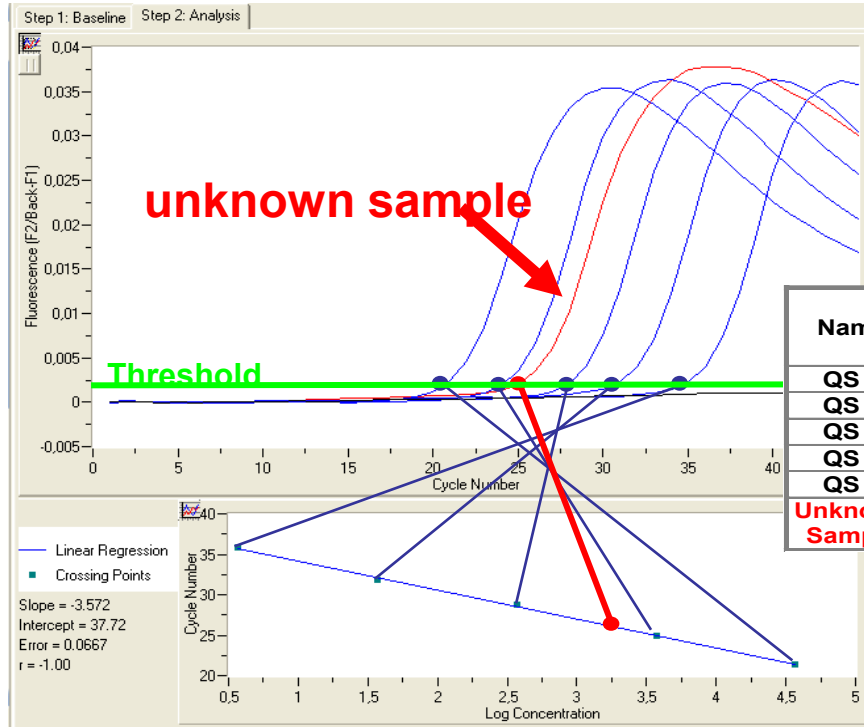
NRL EQAS for HPV

- NRL released HPV N435 in 2017
- Consists of cultured cells suspended in a Liquid Based Cytology medium
 - HPV positive: types 16 and 18
 - HPV negative: uninfected cells
- Material is quantified using digital droplet PCR (ddPCR)

Why Quantify?

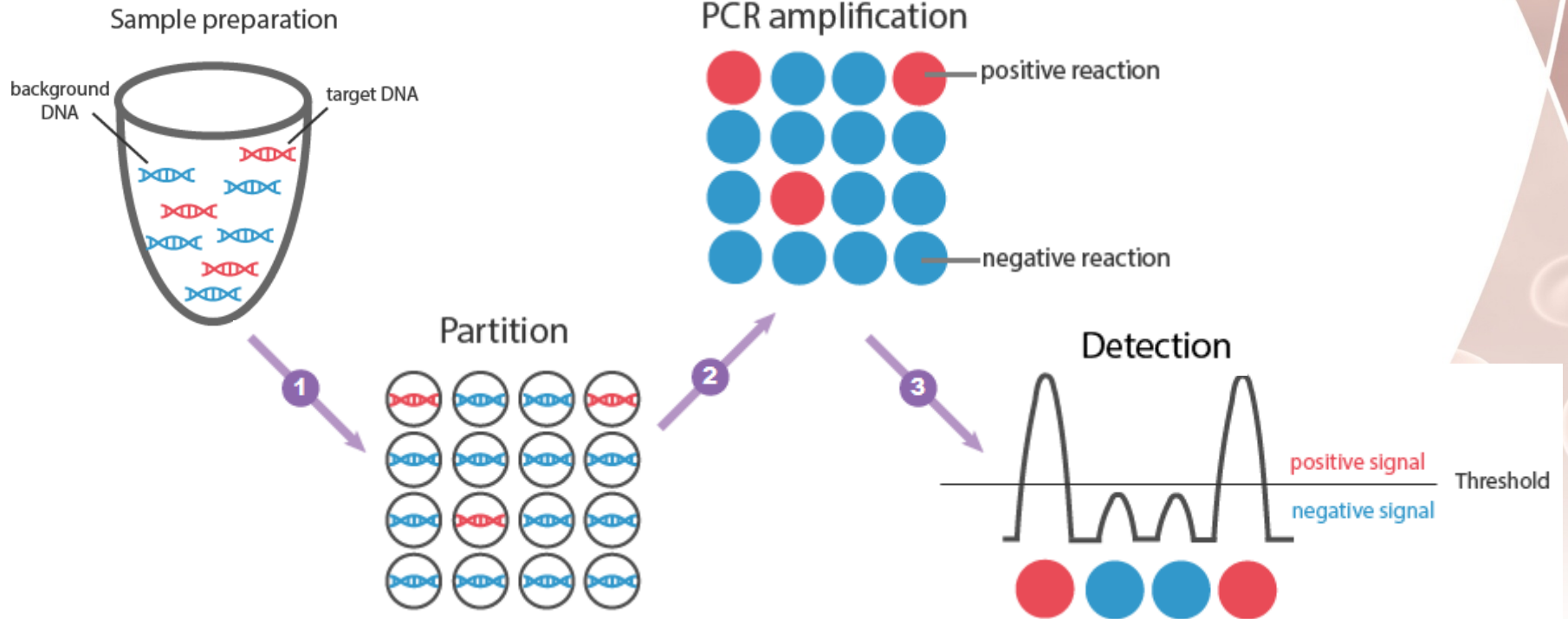
- Quantified material:
 - provides assay manufacturers and participants “standardised” feedback on overall assay performance
 - allows for critical review of laboratory processes and staff training

Quantification using qPCR



Name	Crossing point	Standard	Calculated Concentration
QS 1	21.4	1×10^5 cop/μl	1.15×10^5 cop/μl
QS 2	24.9	1×10^4 cop/μl	1.26×10^4 cop/μl
QS 3	28.7	1×10^3 cop/μl	0.85×10^3 cop/μl
QS 4	31.9	1×10^2 cop/μl	1.12×10^2 cop/μl
QS 5	35.8	1×10^1 cop/μl	0.81×10^1 cop/μl
Unknown Sample	26.1		6.21×10^3 cop/μl

Quantification using ddPCR



Analysing HPV435

- Five test events (from two years) were analysed
- Panels distributed to 32 participants from four countries
- Samples were tested in 12 different assays

Analysing HPV435

- For submitted results
 - Includes all interpretations
 - Aberrant results are those that are “not concordant” with reference results
- ddPCR allows same concentration samples to be combined in a single analysis

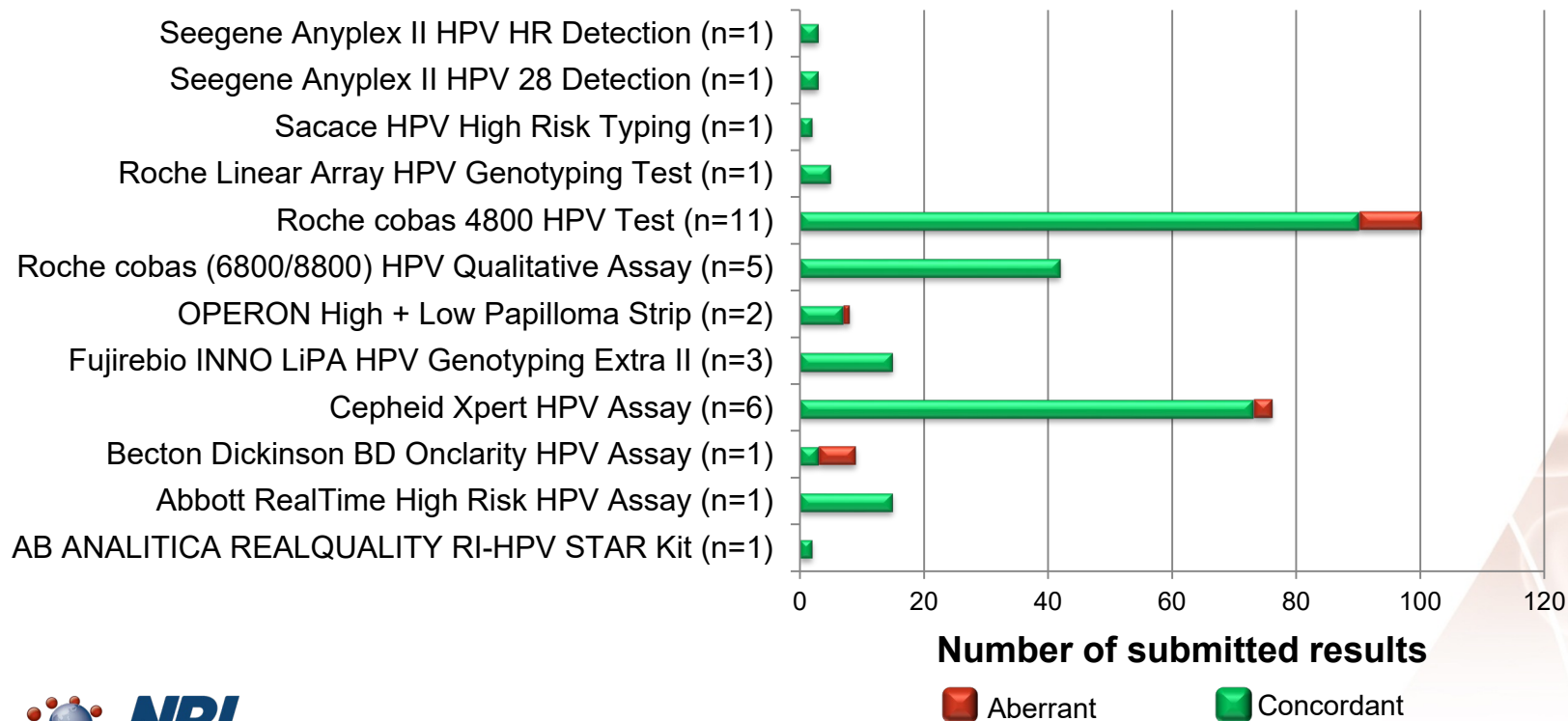
HPVN435: Panel Configurations

ID	Year: 2017			Year: 2018	
	TE1	TE2	TE3	TE1	TE2
A	HPV-18 10^4 c/mL	HPV-16 10^4 c/mL	HPV-16 10^5 c/mL	HPV-16 10^4 c/mL	HPV-16 10^4 c/mL
B	HPV-16 10^5 c/mL	HPV-16/18 10^5 c/mL	Uninfected cells 10^4 c/mL	HPV-16 10^4 c/mL	HPV-18 10^4 c/mL
C	Uninfected cells 10^4 c/mL	HPV-18 10^2 c/mL	HPV-16/18 10^5 c/mL	HPV-18 10^4 c/mL	HPV-16 10^2 c/mL
D	HPV-16/18 10^5 c/mL	HPV-16 10^4 c/mL	Uninfected cells 10^4 c/mL	HPV-16/18 10^5 c/mL	Uninfected cells 10^4 c/mL
E	HPV-16 10^4 c/mL	HPV-18 10^4 c/mL	HPV-16 10^4 c/mL	HPV-18 10^3 c/mL	HPV-18 10^4 c/mL

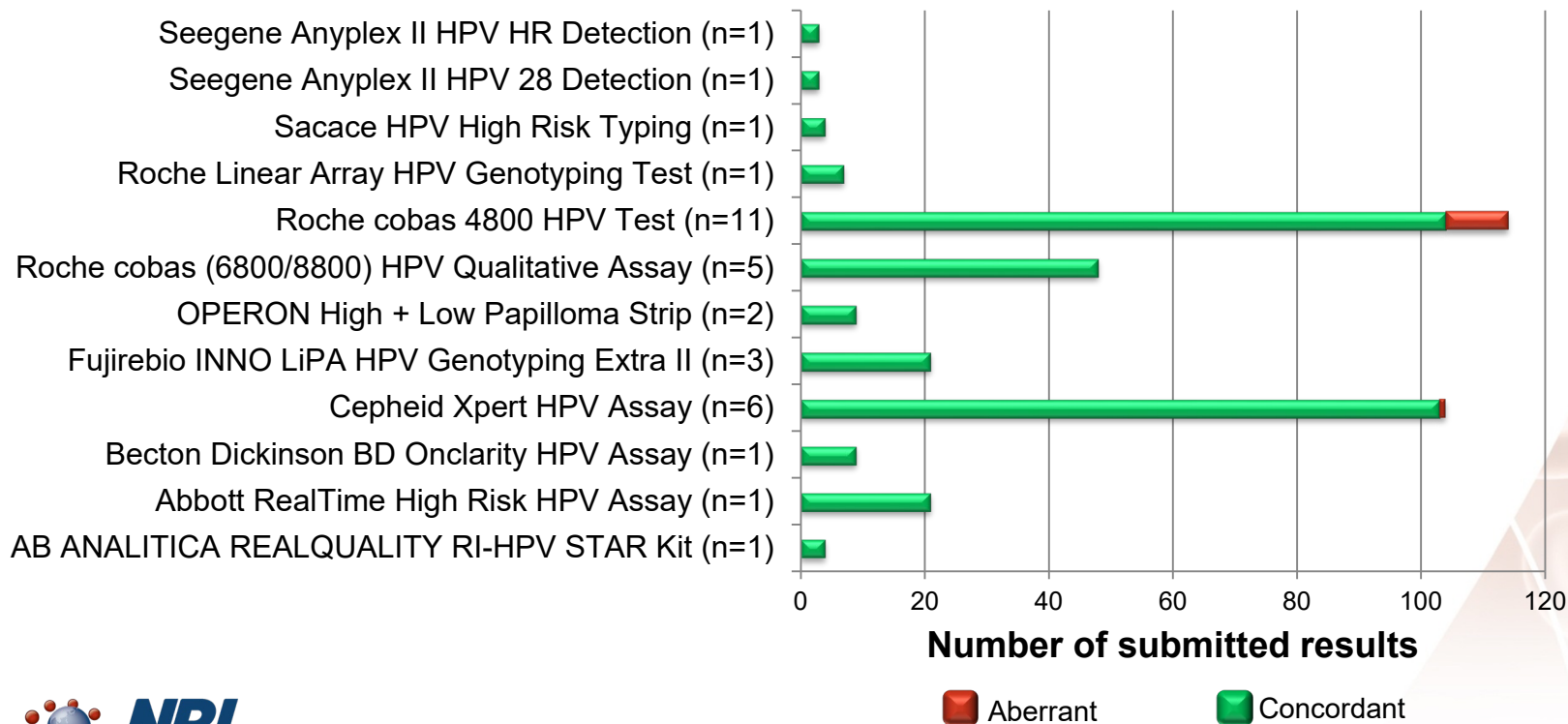
HPVN435: Panel Configurations

ID	Year: 2017			Year: 2018	
	TE1	TE2	TE3	TE1	TE2
A	HPV-18 10^4 c/mL	HPV-16 10^4 c/mL	HPV-16 10^5 c/mL	HPV-16 10^4 c/mL	HPV-16 10^4 c/mL
B	HPV-16 10^5 c/mL	HPV-16/18 10^5 c/mL	Uninfected cells 10^4 c/mL	HPV-16 10^4 c/mL	HPV-18 10^4 c/mL
C	Uninfected cells 10^4 c/mL	HPV-18 10^2 c/mL	HPV-16/18 10^5 c/mL	HPV-18 10^4 c/mL	HPV-16 10^2 c/mL
D	HPV-16/18 10^5 c/mL	HPV-16 10^4 c/mL	Uninfected cells 10^4 c/mL	HPV-16/18 10^5 c/mL	Uninfected cells 10^4 c/mL
E	HPV-16 10^4 c/mL	HPV-18 10^4 c/mL	HPV-16 10^4 c/mL	HPV-18 10^3 c/mL	HPV-18 10^4 c/mL

Analysis: HPV-18 at 1×10^4 c/mL



Analysis: HPV-16 at 1×10^4 c/mL



Detection Rate

Assay Name	HPV-16 1x 10 ² c/mL		HPV-18 1x 10 ² c/mL	
	Aberrant	% Detection	Aberrant	% Detection
AB ANALITICA REALQUALITY RI-HPV STAR Kit (n=1)			0	100
Abbott RealTime High Risk HPV Assay (n=1)	0	100	0	100
Becton Dickinson BD Onclarity HPV Assay (n=1)	3	0		
Cepheid Xpert HPV Assay (n=6)	3	85	0	100
Fujirebio INNO LiPA HPV Genotyping Extra II (n=3)	1	66	0	100
OPERON High + Low Papilloma Strip (n=2)	1	50	1	0
Roche cobas (6800/8800) HPV Qualitative Assay (n=5)	0	100	0	100
Roche cobas 4800 HPV Test (n=11)	0	100	0	100
Roche Linear Array HPV Genotyping Test (n=1)	0	100	0	100
Sacace HPV High Risk Typing (n=1)			0	100
Seegene Anyplex II HPV 28 Detection (n=1)	1	0		
Seegene Anyplex II HPV HR Detection (n=1)	0	100		

Summary

- Absolute quantification using ddPCR:
 - allowed for combined data analysis
 - benefits smaller peer groups
 - provided useful feedback in assay performance
 - includes assays not available in Australia