

Personalized HPV Testing

INTRODUCTION

- HPV is implicated in the pathogenesis of *many* different cancers: *cervix* (98%), *anus* (90%), *vagina and vulva* (65%), *penis* (50%), and *oropharynx* (60%).
- *High-risk HPV 16 and 18 are most commonly implicated in most carcinomas.*
- *High-risk HPV testing has become standard of care in ASCUS cytology triage.*
- Interim guidelines suggest testing for high-risk HPV as a primary screen in conjunction with PAP smears in women over 30 years of age
- About 30% ASCUS and low grade squamous intraepithelial lesions (LSIL) with HPV 16 progress to CIN2+ within 2 years.
- FDA-approved vaccine in 2006

The Invader is a **New** HPV test that

- Is highly Sensitive and Specific (over 95%)
- Subtypes High-risk HPV
- Permits precise identification of HPV16/18 by reflex testing
- Can be used on tissue samples
- Is relatively fast with a turn around time of 36-48hrs

<i>Parameters</i>	<i>Invader</i>	<i>Digene</i>
Probes	High-risk A5/6, A7, A9	Low risk A & High-risk B
Reflex HPV16 & 18	Yes	No
False Positive*	0.69 %	5.53 %
False Negative*	0.99 %	0.89%

Possible indications

- Reflex testing in ASCUS cytology
- Primary screening with Pap smears in women >30yrs
- HPV subtyping in ASCUS & LSIL cases for risk stratification in cervical and anal smears
- HPV typing of anogenital and oropharyngeal cancers

Specimen requirements

- **Cervical and Anal smears** in SurePath or Thinprep medium
- **Tissue** fresh or formalin-fixed paraffin-embedded



Personalize treatment to those most at risk



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