



HPV Prevention
and Control Board

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Technical Meeting: Accelerating HPV-related Cancer Elimination
6-7 June 2024, Antwerp, Belgium

Session 3: Insights into HPV natural infection and transmission dynamics

**Investigations to understand HPV transmission among heterosexual couples:
TRAP-HPV trial & HITCH cohort study**

Funding:

HITCH: CIHR, NIH, Merck

TRAP-HPV: CIHR, Merck

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Outline: Salient findings from HITCH and TRAP-HPV studies

- Anatomical routes in transmission: What have we learned?
- Viral load: Is transmission influenced by how productive an infection is?
- Is transmission mediated by HLA allele sharing between partners?
- Directionality of transmission between partners: Which is greater, M -> F or F -> M?
- Is a woman's new male partner likely to have the same HPV genotypes as those of her previous male partner?
- Can transmission be prevented by HPV vaccination?

HPV Infection and Transmission among Couples through Heterosexual Activity



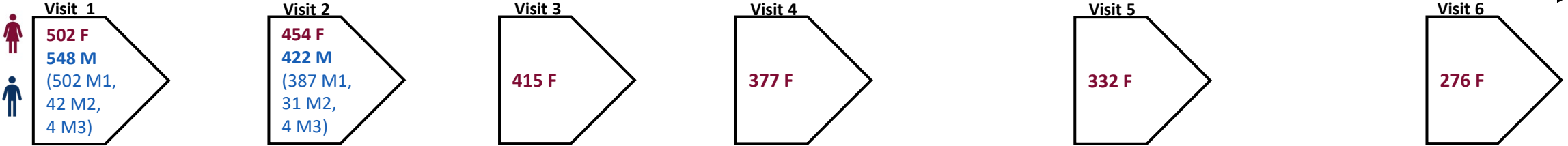
Ann Burchell



Inclusion criteria:
 Females 18 – 24 years old, enrolled in post-secondary education in Montreal (intend to stay in Montreal for the following 2 years), sexually active with male partner initiated within the last 6 months, has intact uterus, no history of cervical lesions/cancer, not pregnant and not planning to be in following 2 years.
 Males 18+ years old.

Eligibility screening

Month: 0 2 4 6 8 10 12 15 18 21 24



Enrollment:
 May 2005 –
 January 2011

Last follow-up:
 January 2014

Web-based self-completed (Data collected: sociodemographic, smoking, reproductive history, lifetime sexual history, sexual activity, contraceptive history, medical history (including other STIs), knowledge of HPV, HPV vaccination)

1. **Samples collected for HPV genotyping:** self-collected vaginal samples (females), nurse-collected penile and scrotal samples (males), [2008 onwards: oral rinses, swabs of index and middle fingers, and nails at visits for which both partners attended]
 - HPV DNA positivity: PCR of a 450 bp segment of HPV L1 capsid gene, Linear Array HPV genotyping assay (LA-HPV; Roche Molecular Systems)
 - Detectable genotypes: 6, 11, 16, 18, 26, 31, 33, 34, 35, 39, 40, 42, 44, 45, 51, 52, 53, 54, 56, 58, 59, 61, 62, 66, 67, 68, 69, 70, 71, 72, 73, 81, 82, 83, 84 and 89
 - Viral load: RT-qPCR for genotypes 16, 18, 31, 33, 45, 52
2. **Blood samples** collected for HPV antibody testing (L1, VLP-L1, E6)
 1. Antibody titers: bead-based multiplex serology assay
 1. Genotypes: 6, 11, 16, 18, 31, 33, 35, 39, 45, 51, 52, 58, 59, and 68

HPV sexual transmission modes

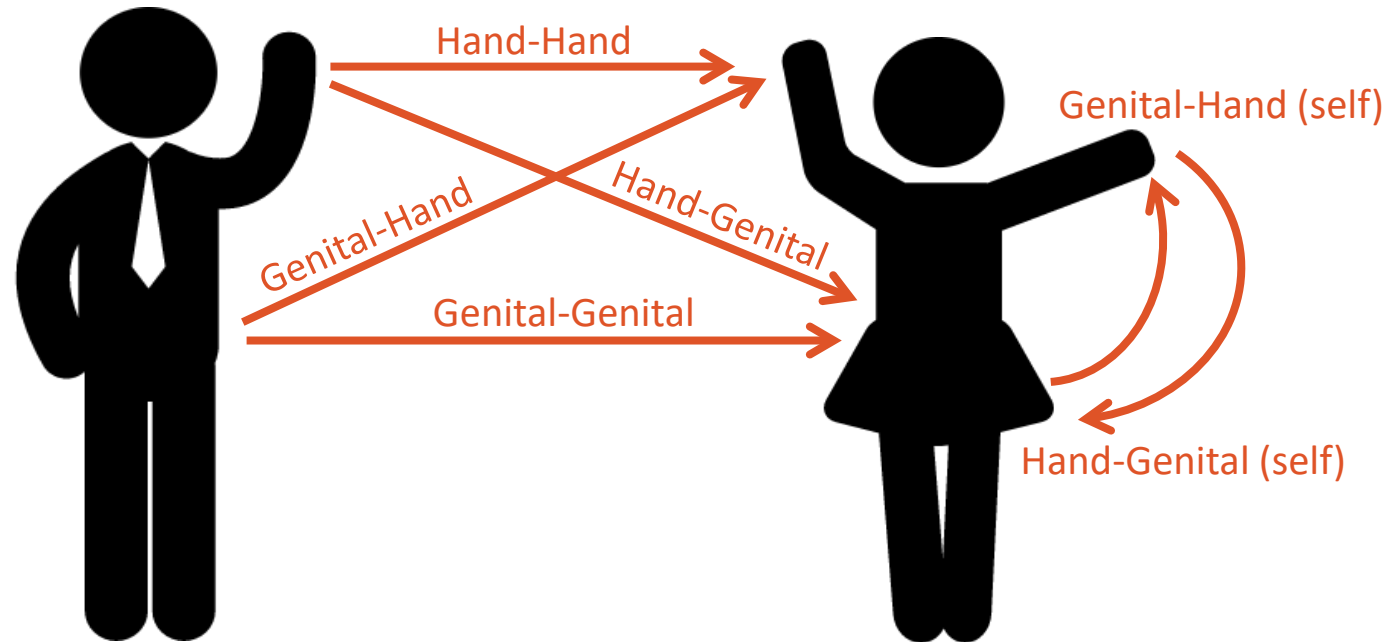
- Can Alpha HPV be transmitted through hand contact?
 - Multiple potential HPV sexual transmission modes
 - Direction of transmission between hands-genitals unclear



Talía
Malagón



Karolina
Louvanto



Putative transmission routes for genital HPV DNA positivity



Talía Malagón



Karolina Louvanto

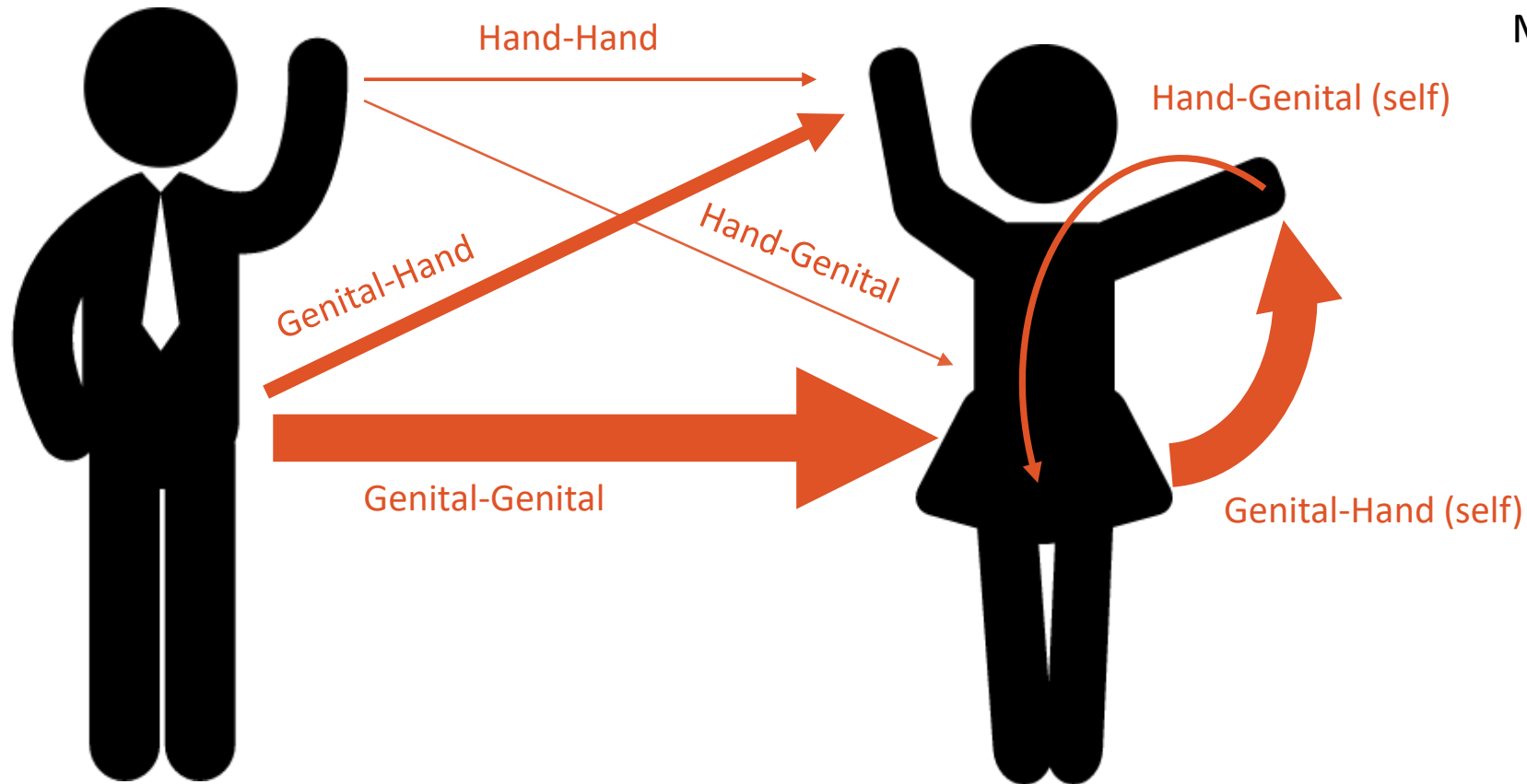
Hazard ratio of **genital** HPV type-specific positivity if other sites are positive vs. negative at previous visit

Exposure site	Univariate	
	Women HR (95% CI)	Men HR (95% CI)
Hand (own)	9.8 (3.8-25.4)	10.5 (3.1-35.8)
Genital (partner)	19.2 (12.0-30.8)	43.3 (23.9-78.5)
Hand (partner)	5.0 (1.5-16.4)	20.3 (8.8-46.9)

Malagón T, Louvanto K, Wissing M, Burchell AN, Tellier PP, El-Zein M, Coutlée F, Franco EL. Hand-to-genital and genital-to-genital transmission of human papillomaviruses between male and female sexual partners (HITCH): a prospective cohort study. *Lancet Infect Dis.* 2019 Mar;19(3):317-326.

What do we know? Direction of HPV transmission

Size of arrow corresponds to size of adjusted HR:



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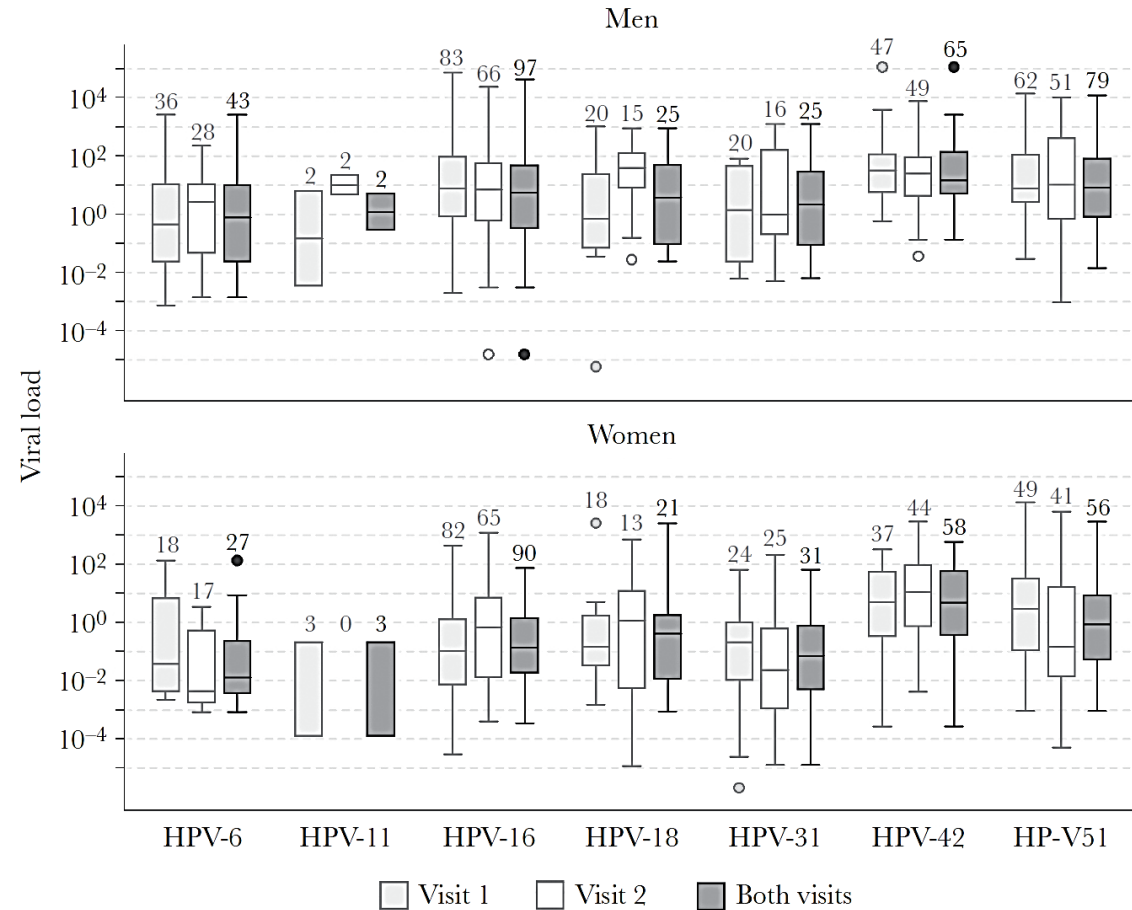
Karolina Louvanto

HPV viral load by sex in HITCH



Michel Wissing

- Viral load was higher in penile than vaginal samples ($p < 0.001$)
- Men with high viral load had more type-specific persistent HPV infections (OR=4.6, 95%CI: 2.0-10.5)
- High viral load in men was associated with prevalent (OR=5.3, 95%CI: 2.5-11.2) and incident (OR=6.7, 95%CI: 1.5-30.7) type-specific HPV infections in their female partner



Does HLA mediate HPV transmission in heterosexual couples?



Karolina
Louvanto

Rationale and Methods:

- Genes in the major histocompatibility complex mediate antigen presentation to the immune system
- Transmission of HPV infection involves exchanges of exfoliated epithelial cells during sex
- **Hypothesis:** HLA allele concordance would facilitate transmission of HPV infection by lowering the likelihood of HLA-mediated rapid clearing of exfoliated HPV-harboring cells exchanged during sex. Analogy to organ transplantation, i.e., mismatches would lead to faster destruction of partner's deposited cells
- **Approach:** We investigated whether the extent of HLA allele concordance between HITCH partners would influence HPV type concordance in members of the couple
- Direct DNA sequencing to type HLA-B07, -DRB1, -DQB1 and –G
- We identified a total of 106 different HLA alleles among 271 evaluable female and their 271 male partners

Associations between the extent of HLA allele sharing and HPV concordance among heterosexual couples who were HPV positive



Karolina Louvanto

Inclusiveness of HLA Groupings Shared	Alleles Shared per Couple	Age-Adjusted OR (95% CI) ^a			
		All HPVs	Subgenus 1	Subgenus 2	Subgenus 3
HLA-B*07, -DRB1, and -DQB1	0	1.0	1.0	1.0	1.0
	1	1.1 (.8–1.7)	0.9 (.4–2.1)	1.3 (.8–2.2)	0.9 (.4–1.9)
	2–3	1.0 (.6–1.6)	0.8 (.3–2.2)	1.3 (.7–2.5)	0.6 (.2–1.5)
HLA-G	0	1.0	1.0	1.0	1.0
	1	1.1 (.7–1.6)	0.4 (.2–.7)	1.1 (.7–1.7)	1.9 (1.0–3.5)
	2	0.6 (.3–1.5)	0.6 (.1–2.7)	0.4 (.1–1.1)	3.0 (.5–16.7)
All HLAs	0	1.0	1.0	1.0	1.0
	1	1.6 (.7–1.9)	0.7 (.2–1.8)	1.1 (.6–2.0)	1.5 (.7–3.3)
	2	1.0 (.6–1.7)	0.8 (.3–2.4)	0.9 (.5–1.8)	1.2 (.5–2.9)
	3–5	1.1 (.5–2.1)	0.2 (.0–1.0)	1.6 (.7–3.7)	1.4 (.4–4.7)
HLA-G 3'UTR: 14 bp, +3142 C/G, +3187 G/A	0	1.0	1.0	1.0	1.0
	1	0.9 (.6–1.5)	1.4 (.6–3.5)	0.6 (.4–1.2)	2.4 (1.0–5.7)
	2	0.8 (.5–1.3)	0.9 (.3–2.5)	0.9 (.5–1.6)	0.8 (.4–1.9)
	3	0.7 (.4–1.2)	2.4 (.9–6.3)	0.6 (.3–1.1)	0.8 (.4–1.8)
HLA-G 3'UTR: 14 bp and all 8 different SNPs	0	1.0	1.0	1.0	1.0
	1	1.0 (.6–1.6)	1.5 (.6–3.7)	0.7 (.4–1.3)	2.6 (1.0–6.3)
	2	0.6 (.4–1.1)	0.8 (.3–2.5)	0.7 (.4–1.3)	0.7 (.3–1.7)
	3	0.7 (.3–1.2)	1.0 (.2–4.9)	0.6 (.3–1.2)	0.7 (.2–2.0)
	4	0.9 (.5–1.6)	2.4 (.8–7.3)	0.8 (.4–1.5)	0.8 (.3–1.9)
	5–6	0.9 (.3–2.5)	6.9 (.9–54.6)	0.4 (.1–1.4)	4.0 (.4–36.9)

- Sixty comparisons, 5 significant associations, while one or two would be expected only by chance
- No consistent findings in terms of dose-response
- Conclusion: a role for HLA compatibility unlikely

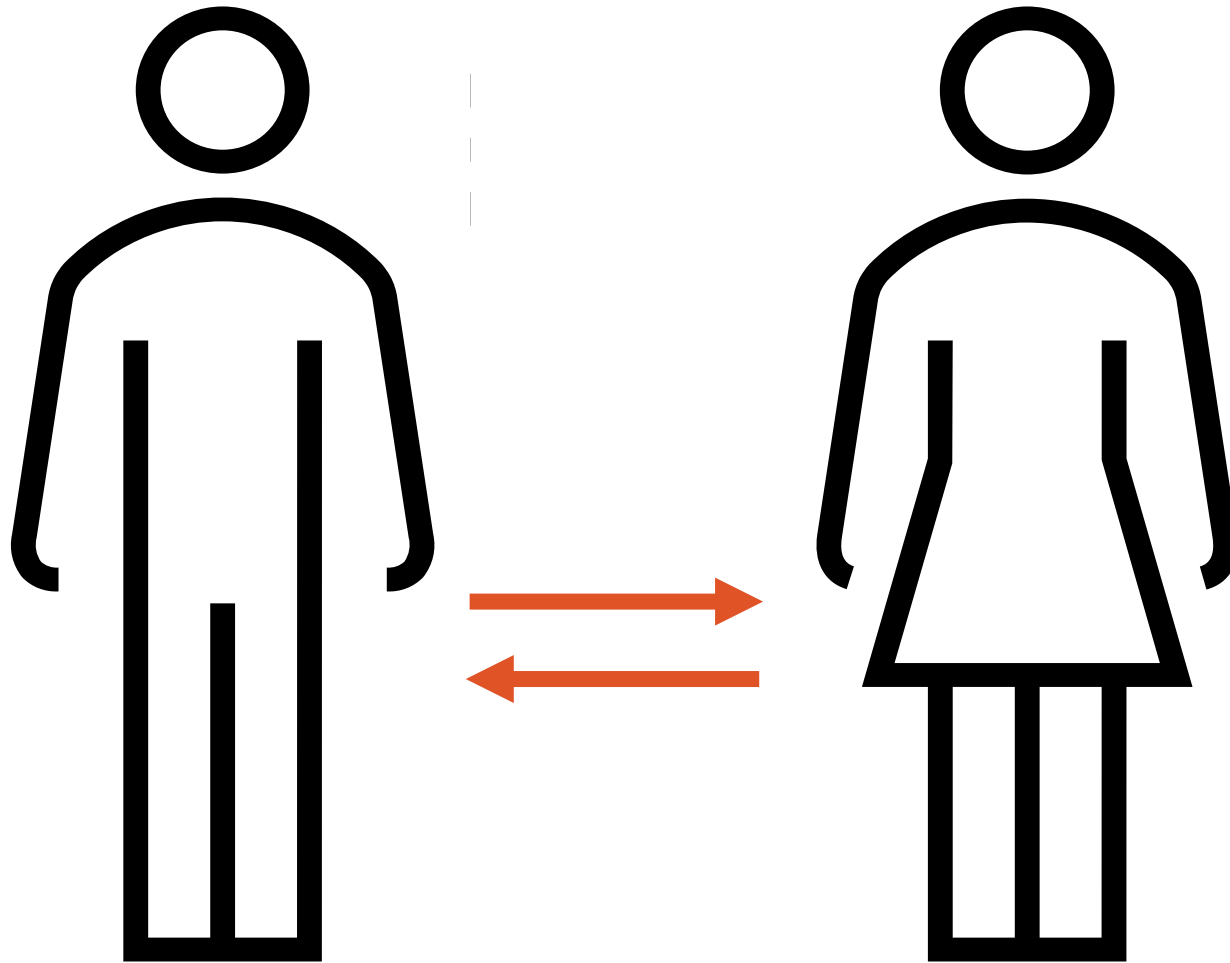
There seems to be a difference in propensity for the direction of genital HPV transmission



Rajshree
Balaji



Aaron
MacCosham



The propensity for transmission is greater from female to male than from male to female.

HPV transmission & clearance rates in HITCH



Talía
Malagón

- Estimation of HPV incidence & clearance rates using a Bayesian model
- HPV type-specific transmission rates from women to men were 1.6 times higher than transmission rates from men to women

HPV type-specific transmission

	Events (n)	Rate (/100 person-months)	IRR	95% prediction interval
Transmission type-specific incidence				
Men to women	106	3.2	1.0	(ref)
Women to men	60	4.1	1.6	(1.0-2.5)

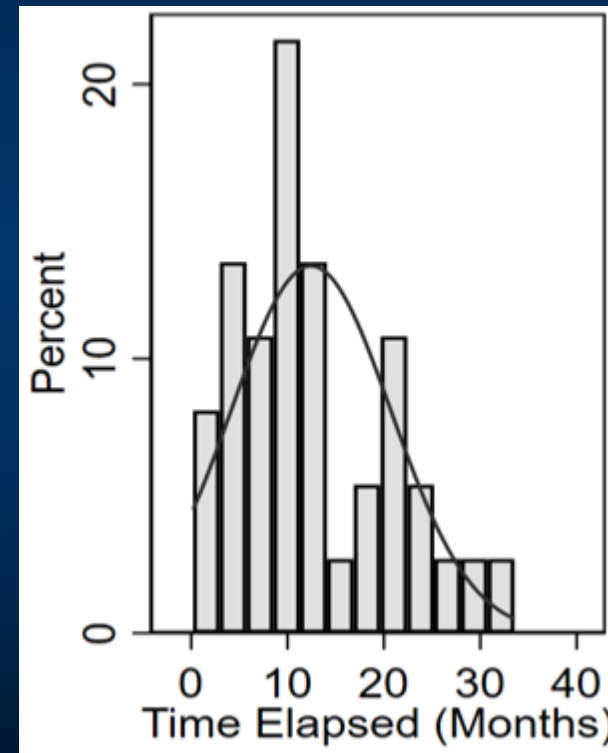
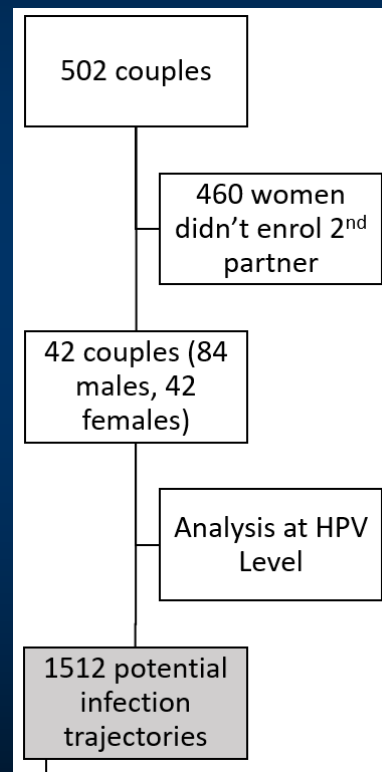
Sequential partner transmission of HPV infection:

Is there a tendency for the second male partner of a woman to have a comparable infection profile as the woman's previous male partner?



Andrew Arthur

Male 1 ↔ Female ↔ Male 2



Arthur AW, El-Zein M, Burchell AN, Tellier PP, Coutlée F, Franco EL. Epidemiology of genital human papillomavirus infections in sequential male sex partners of young females. Clin Microbiol Infect. 2024;30(2):247-253.

Sequential partner transmission of HPV infection:

Is there a tendency for the second male partner of a woman to have a comparable infection profile as the woman's previous male partner?



Andrew Arthur



Analysis	Odds Ratio (95%CI)
Crude	3.8 (2.4-5.8)
Adjusted for number of M1 and M2 testing opportunities	3.8 (2.4-6.0)
Restricted to dyads < 10.2 months* apart	4.6 (2.5-8.7)
Restricted to dyads >= 10.2 months apart	3.0 (1.5-5.9)
Restricted to M2 condom use 0-75% of the time	4.0 (2.2-7.2)
Restricted to M2 condom use 76-100% of the time	3.3 (1.6-7.1)
Adjusted for no. times female tested positive for M1's infection	1.3 (0.6-3.0)

Male 1	Male 2	
	HPV-	HPV+
HPV-	1283	109
HPV+	91	29
O/E ++	2.6 (1.9-3.4)	

* Median time between last HPV test for M1 and first one for M2

Does HPV vaccination reduce infection transmission?

The role of reduced viral load



Michel Wissing

Table 5. Type-specific viral loads (copies/cell) in HPV-positive women, stratified by baseline vaccination status

HPV type	Unvaccinated women			Vaccinated women			P value ^a	
	n	Median (IQR)	Geometric mean (95% CI)	n	Median (IQR)	Geometric mean (95% CI)		
HPV6	56	0.19 (0.007–4.13)	0.19 (0.07–0.51)	2	4.21 (0.0008–8.42)	0.08 (0.00–3.4·10 ²⁴)	0.77	0.001
HPV11	7	0.02 (0.0002–0.22)	0.01 (0.0005–0.23)	0	—	—	—	
HPV16	106	3.09 (0.20–15.8)	1.44 (0.73–2.84)	8	0.006 (0.0004–0.43)	0.008 (0.0004–0.16)	0.001	
HPV18	29	1.21 (0.04–9.83)	0.60 (0.11–3.21)	1	0.36	0.36	0.86	
HPV31	46	0.47 (0.03–10.9)	0.34 (0.10–1.21)	3	0.13 (0.04–6.40)	0.32 (0.0004–238.5)	0.77	0.93
HPV42	74	26.3 (1.70–179.5)	12.9 (6.02–27.8)	14	24.8 (0.87–261.1)	18.0 (2.48–130.8)	0.86	
HPV51	73	7.36 (0.27–107.4)	3.81 (1.38–10.53)	12	4.77 (0.16–72.7)	3.87 (0.38–39.1)	0.81	

NOTE: Bold values indicate statistical significance ($P < 0.05$).

^a P values for individual HPV types were calculated using Wilcoxon rank-sum tests. When HPV types were grouped based on whether the type is included in the quadrivalent vaccine, P values were calculated using the Friedman test, stratifying by HPV type.

- Lower viral loads for target types in vaccinated women.
- This could potentially translate into lower infectivity to partners.

HPV vaccination in reducing transmission to male partners

- Lower transmission rates of HPV from vaccinated women to their male partners
- 0% of the vaccinated women positive for HPV-6/11/16/18 transmitted these infections to their partners, whereas 33% of unvaccinated women positive for HPV-6/11/16/18 transmitted these infections to their partners.

HPV infection risk in male partners of vaccinated vs unvaccinated women

HPV TYPE	OR adjusted ^a (95% CI)
All (36 types)	0.80 (0.44-1.47)
Alpha 7, 9, 10 types	0.22 (0.05-0.95)
HPV-6/11/16/18	0.32 (0.04-2.53)

^a adjusted for age, race, smoking status, age at first coitus, number of lifetime sex partners (coitus), whether the individual had same-sex partners and/or concurrent sex partners at the baseline visit, condom use, average frequency of coitus with HITCH partner per week, and duration of the sexual relationship.



Michel Wissing

BMJ Open Transmission reduction and prevention with HPV vaccination (TRAP-HPV) study protocol: a randomised controlled trial of the efficacy of HPV vaccination in preventing transmission of HPV infection in heterosexual couples

Aaron MacCosham,¹ Mariam El-Zein,¹ Ann N Burchell,^{2,3} Pierre-Paul Tellier,⁴ François Coutlée,⁵ Eduardo L Franco ¹

Strengths and limitations:

- First RCT of the efficacy of vaccination to reduce HPV transmission.
- Couple members randomized independently to the treatment or placebo vaccine, allowing for comparison between 4 vaccination groups.
- Key logistical challenge in conducting a sexual transmission prevention study is the need for couples to have been recently formed.
- Anal sampling is a deterrent in participant recruitment.

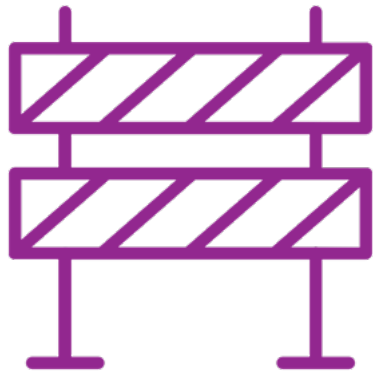
MacCosham A, El-Zein M, Burchell AN, Tellier PP, Coutlée F, Franco EL. Transmission reduction and prevention with HPV vaccination (TRAP-HPV) study protocol: a randomised controlled trial of the efficacy of HPV vaccination in preventing transmission of HPV infection in heterosexual couples. *BMJ Open*. 2020;10(8):e039383.



2 x 2 Factorial Design

Female (F) vaccination	Male (M) vaccination	
	HPV (Gardasil 9: H)	Placebo (Hepatitis A: P)
HPV (Gardasil 9: H)	M^{HFH}	M^{PFH}
Placebo (Hepatitis A: P)	M^{HFP}	M^{PPF}

AMENDMENTS



Upper age limit: increased from 26 to 40 years old, and once more to 45 years old

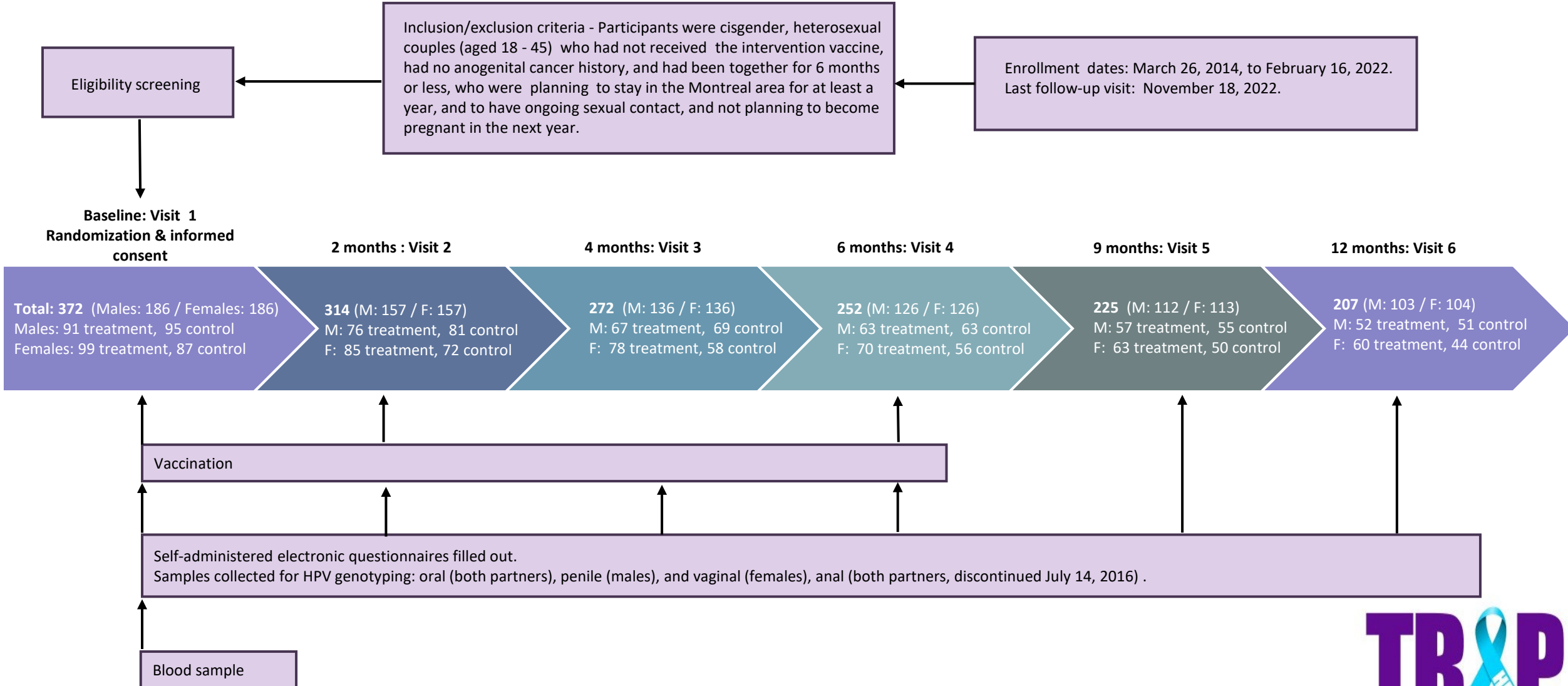
Compensation: increased from \$350 to \$500 per couple and further to \$1000

Discontinued collection of anal samples

Replaced Gardasil with Gardasil 9 as intervention vaccine

Replaced Havrix (GlaxoSmithKline) with Avaxim (Sanofi Pasteur) as placebo vaccine

Transmission Reduction And Prevention with HPV Vaccination (TRAP-HPV) study design and timeline



Protection to Self and to One's Sexual Partner After Human Papillomavirus Vaccination: Preliminary Analysis From the Transmission Reduction And Prevention with HPV Vaccination Study

Aaron MacCosham, MSc,* Mariam El-Zein, PhD,* Ann N. Burchell, PhD,^{†‡} Pierre-Paul Tellier, MD,[§] François Coutlée, MD,[¶] and Eduardo L. Franco, DrPH,* for the TRAP-HPV study group



Aaron
MacCosham

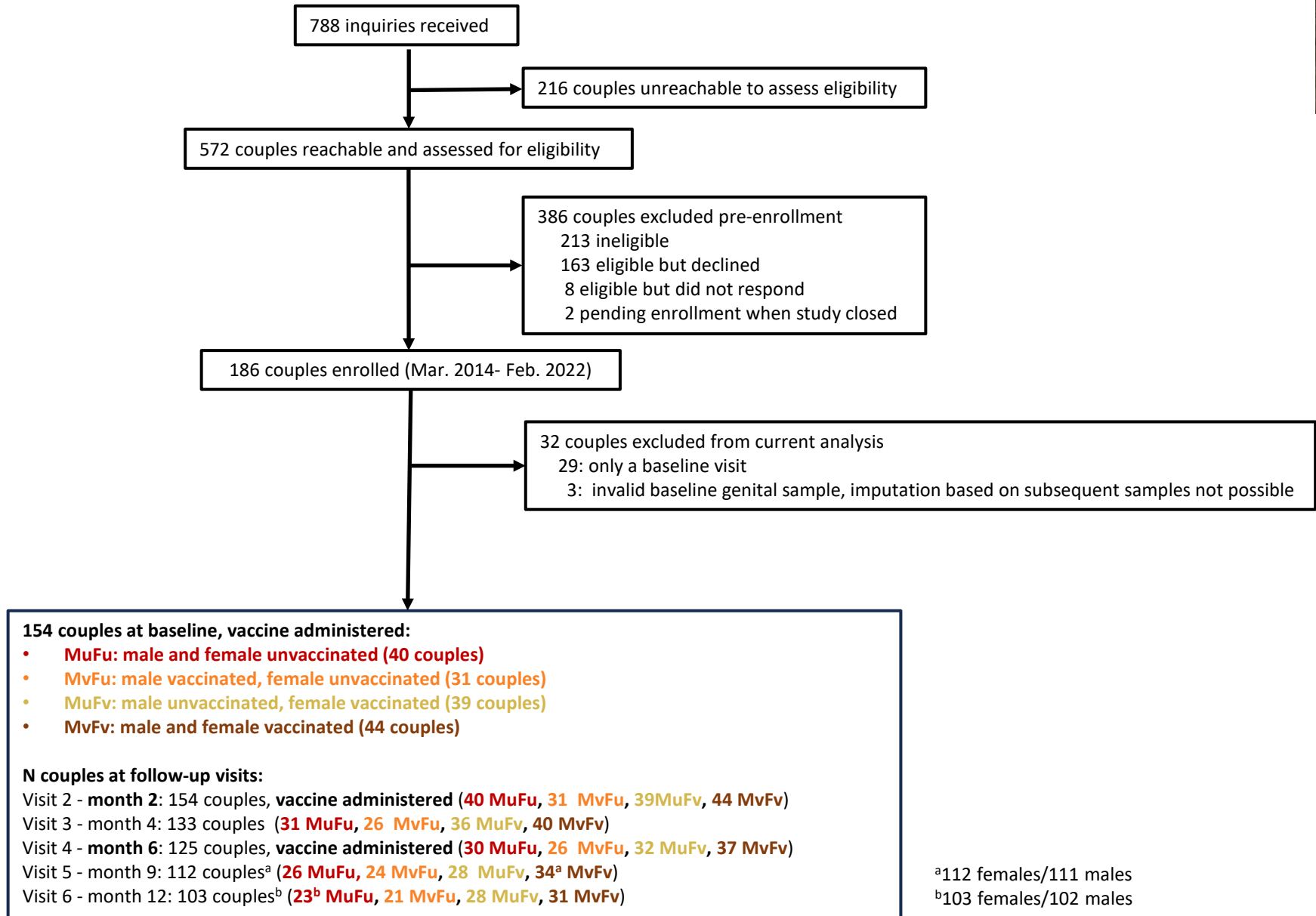
Conclusions: Our study provides inconclusive evidence that individuals whose partner recently received an HPV vaccine are protected from vaccine-preventable types but demonstrates that vaccinated individuals are at a lower risk of incident infections.

MacCosham A, El-Zein M, Burchell AN, Tellier PP, Coutlée F, Franco EL; TRAP-HPV study group. Protection to Self and to One's Sexual Partner After Human Papillomavirus Vaccination: Preliminary Analysis From the Transmission Reduction And Prevention with HPV Vaccination Study. *Sex Transm Dis.* 2022 Jun 1;49(6):414-422.

Enrollment, randomization, and analytical sample in the TRAP-HPV study



Alissa Moore



Moore et al.
Manuscript in
preparation

^a112 females/111 males
^b103 females/102 males

Results: HPV Incidence

Study arm	HPV	FEMALE			MALE		
		Events	Time ^a	Rate ^b (95% CI)	Events	Time ^a	Rate ^b (95% CI)
MuFu n=40 couples	Vaccine-targeted	5	3560.54	1.40 (0.51, 5.34)	8	3311.79	2.42 (0.97, 7.63)
	Related	1	2713.97	0.37 (0.01, 2.05) ^c	3	2552.65	1.18 (0.21, 17.18)
	Unrelated	12	7153.20	1.68 (0.94, 3.29)	15	6784.93	2.21 (1.35, 3.88)
MvFu n=31 couples	Vaccine-targeted	5	3172.26	1.58 (0.55, 6.17)	3	3034.10	0.99 (0.17, 3.07)
	Related	5	2305.25	2.17 (0.94, 6.02)	5	2219.67	2.25 (1.00, 6.10)
	Unrelated	22	6081.94	3.62 (1.88, 7.80)	17	5887.70	2.89 (1.49, 6.24)
MuFv n=39 couples	Vaccine-targeted	4	3793.67	1.05 (0.42, 3.45)	12	3581.69	3.35 (1.95, 6.30)
	Related	3	2877.35	1.04 (0.34, 4.69)	6	2740.19	2.19 (1.05, 5.30)
	Unrelated	22	7499.06	2.93 (1.67, 5.59)	26	7286.07	3.57 (2.28, 5.93)
MvFv n=44 couples	Vaccine-targeted	7	4431.81	1.58 (0.71, 4.25)	7	4189.61	1.67 (0.75, 3.51)
	Related	9	3265.27	2.76 (1.43, 6.00)	10	3141.70	3.18 (1.58, 7.26)
	Unrelated	24	8712.42	2.75 (1.50, 5.63)	20	8307.32	2.41 (1.45, 4.26)

^a Indicates infection-months at risk.

^bRates represent events /1000 infection-months at risk. Jackknife confidence intervals are reported wherever possible to account for intra-participant correlation.

^cIn instances where no events were observed, or there was an insufficient number of failures to calculate jackknife confidence intervals, exact Fisher's 95% confidence intervals were used.

Results: HPV Transmission

Study arm	HPV	FEMALE			MALE		
		Events	Time ^a	Rate ^b (95% CI)	Events	Time ^a	Rate ^b (95% CI)
MuFu n=40 couples	Vaccine-targeted	1	141.54	7.07 (0.18, 39.37) ^c	1	62.88	15.90 (0.40, 88.61) ^c
	Related	0	44.78	0 (0.00, 82.38) ^c	1	8.08	123.73 (3.09, 689.60) ^c
	Unrelated	4	172.82	23.15 (7.85, 76.83)	5	93.93	53.23 (28.79, 99.00)
MvFu n=31 couples	Vaccine-targeted	1	47.90	20.88 (0.52, 116.33) ^c	2	50.47	39.63 (4.79, 143.15) ^c
	Related	2	34.99	57.16 (11.98, 361.22)	2	38.11	52.48 (13.61, 271.55)
	Unrelated	9	147.78	60.90 (28.94, 141.46)	8	239.91	33.35 (14.26, 75.11)
MuFv n=39 couples	Vaccine-targeted	1	75.40	13.26 (0.33, 73.90) ^c	5	39.10	127.89 (41.84, 354.21)
	Related	1	62.49	16.00 (0.40, 89.17) ^c	2	65.25	30.65 (4.56, 245.92)
	Unrelated	2	131.78	15.18 (3.70, 108.35)	12	323.72	37.07 (20.92, 70.39)
MvFv n=44 couples	Vaccine-targeted	3	100.57	29.83 (7.26, 145.53)	0	81.58	0 (0.00, 45.22) ^c
	Related	2	77.50	25.80 (5.51, 199.62)	2	127.74	15.66 (3.65, 117.67)
	Unrelated	5	267.21	18.71 (7.33, 53.62)	7	333.80	20.97 (11.35, 40.69)

^a Indicates infection-months at risk.

^bRates represent events /1000 infection-months at risk. Jackknife confidence intervals are reported wherever possible to account for intra-participant correlation.

^cIn instances where no events were observed, or there was an insufficient number of failures to calculate jackknife confidence intervals, exact Fisher's 95% confidence intervals were used.

HITCH Study's Publications (as of May 2024)

1. Burchell AN, Tellier PP, Hanley J, Coutlée F, Franco EL. Influence of partner's infection status on prevalent human papillomavirus among persons with a new sex partner. *Sex Transm Dis.* 2010;37(1):34-40.
2. Burchell AN, Tellier PP, Hanley J, Coutlée F, Franco EL. Human papillomavirus infections among couples in new sexual relationships. *Epidemiology.* 2010;21(1):31-7.
3. Burchell AN, Coutlée F, Tellier PP, Hanley J, Franco EL. Genital transmission of human papillomavirus in recently formed heterosexual couples. *J Infect Dis.* 2011;204(11):1723-9.
4. Burchell AN, Rodrigues A, Moravan V, Tellier PP, Hanley J, Coutlée F, Franco EL. Determinants of prevalent human papillomavirus in recently formed heterosexual partnerships: a dyadic-level analysis. *J Infect Dis.* 2014;210(6):846-52.
5. Dahlstrom KR, Burchell AN, Ramanakumar AV, Rodrigues A, Tellier PP, Hanley J, Coutlée F, Franco EL. Sexual transmission of oral human papillomavirus infection among men. *Cancer Epidemiol Biomarkers Prev.* 2014;23(12):2959-64.
6. Malagón T, Burchell A, El-Zein M, Tellier PP, Coutlée F, Franco EL; HITCH study group. Assortativity and Mixing by Sexual Behaviors and Sociodemographic Characteristics in Young Adult Heterosexual Dating Partnerships. *Sex Transm Dis.* 2017;44(6):329-337.
7. Malagón T, Burchell AN, El-Zein M, Guénoun J, Tellier PP, Coutlée F, Franco EL; HITCH Study Group. Estimating HPV DNA Deposition Between Sexual Partners Using HPV Concordance, Y Chromosome DNA Detection, and Self-reported Sexual Behaviors. *J Infect Dis.* 2017;216(10):1210-1218.
8. Malagón T, Burchell A, El-Zein M, Guénoun J, Tellier PP, Coutlée F, Franco EL; HITCH study group. Y Chromosome DNA in Women's Vaginal Samples as a Biomarker of Recent Vaginal Sex and Condom Use With Male Partners in the HITCH Cohort Study. *Sex Transm Dis.* 2018;45(1):28-34.
9. El-Zein M, Coutlée F, Tellier PP, Roger M, Franco EL, Burchell AN; HITCH Study Group. Human Papillomavirus Infection and Transmission Among Couples Through Heterosexual Activity (HITCH) Cohort Study: Protocol Describing Design, Methods, and Research Goals. *JMIR Res Protoc.* 2019;8(1):e11284.
10. Malagón T, Louvanto K, Wissing M, Burchell AN, Tellier PP, El-Zein M, Coutlée F, Franco EL. Hand-to-genital and genital-to-genital transmission of human papillomaviruses between male and female sexual partners (HITCH): a prospective cohort study. *Lancet Infect Dis.* 2019;19(3):317-326.
11. Wissing MD, Louvanto K, Comète E, Burchell AN, El-Zein M, Rodrigues A, Tellier PP, Coutlée F, Franco EL. Human Papillomavirus Viral Load and Transmission in Young, Recently Formed Heterosexual Couples. *J Infect Dis.* 2019;220(7):1152-1161.
12. Wissing MD, Burchell AN, El-Zein M, Tellier PP, Coutlée F, Franco EL. Vaccination of Young Women Decreases Human Papillomavirus Transmission in Heterosexual Couples: Findings from the HITCH Cohort Study. *Cancer Epidemiol Biomarkers Prev.* 2019;28(11):1825-1834.
13. Malagón T, MacCosham A, Burchell AN, El-Zein M, Tellier PP, Coutlée F, Franco EL; HITCH Study Group. Sex- and Type-specific Genital Human Papillomavirus Transmission Rates Between Heterosexual Partners: A Bayesian Reanalysis of the HITCH Cohort. *Epidemiology.* 2021;32(3):368-377.

HITCH Study's Publications (continued)

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17. Malagón T, MacCosham A, Burchell AN, El-Zein M, Tellier PP, Coutlée F, Franco EL; HITCH Study Group. Proportion of Incident Genital Human Papillomavirus Detections not Attributable to Transmission and Potentially Attributable to Latent Infections: Implications for Cervical Cancer Screening. *Clin Infect Dis*. 2022;75(3):365-371.
18. Louvanto K, Baral P, Burchell A, Ramanakumar A, El-Zein M, Tellier PP, Coutlée F, Roger M, Franco EL. Role of Human Leukocyte Antigen Allele Sharing in Human Papillomavirus Infection Transmission Among Heterosexual Couples: Findings From the HITCH Cohort Study. *J Infect Dis*. 2022;226(7):1175-1183.
19. Shapiro SB, Wissing MD, Khosrow-Khavar F, El-Zein M, Burchell AN, Tellier PP, Coutlée F, Franco EL. Male Circumcision and Genital Human Papillomavirus (HPV) Infection in Males and Their Female Sexual Partners: Findings From the HITCH Cohort Study. *J Infect Dis*. 2022;226(7):1184-1194.
20. Arthur AW, El-Zein M, Burchell AN, Tellier PP, Coutlée F, Franco EL. Detection and clearance of type-specific and phylogenetically related genital human papillomavirus infections in young women in new heterosexual relationships. *medRxiv [Preprint]*. 2023:2023.02.24.23286387.
21. Morais S, Wissing MD, Khosrow-Khavar F, Burchell AN, Tellier PP, Coutlée F, Waterboer T, El-Zein M, Franco EL. Serologic Response to Human Papillomavirus Genotypes Among Unvaccinated Women: Findings From the HITCH Cohort Study. *J Infect Dis*. 2023;227(10):1173-1184.
22. Morais S, Wissing MD, Khosrow-Khavar F, Burchell AN, Tellier PP, Coutlée F, Waterboer T, El-Zein M, Franco EL. Serologic response to human papillomavirus genotypes following vaccination: findings from the HITCH cohort study. *Infect Dis (Lond)*. 2024;56(1):66-72.
23. Arthur AW, El-Zein M, Burchell AN, Tellier PP, Coutlée F, Franco EL. Epidemiology of genital human papillomavirus infections in sequential male sex partners of young females. *Clin Microbiol Infect*. 2024;30(2):247-253.
24. Arthur AW, El-Zein M, Burchell AN, Tellier PP, Coutlée F, Franco EL. Detection and Clearance of Type-Specific and Phylogenetically Related Genital Human Papillomavirus Infections in Young Women in New Heterosexual Relationships. *J Infect Dis*. 2024;229(3):691-706.
25. Ng K, Morais S, Wissing MD, Burchell AN, Tellier P-P, Coutlée F, Waterboer T, El-Zein M, Franco EL. Empirical sample-specific approaches to define HPV16 and HPV18 seropositivity in unvaccinated, young, sexually active women. *Microbiol Spectr*. 2024: e0022924.

TRAP-HPV Study's Publications

1. MacCosham A, El-Zein M, Burchell AN, Tellier PP, Coutlée F, Franco EL. Transmission reduction and prevention with HPV vaccination (TRAP-HPV) study protocol: a randomised controlled trial of the efficacy of HPV vaccination in preventing transmission of HPV infection in heterosexual couples. *BMJ Open*. 2020;10(8):e039383.
2. MacCosham A, El-Zein M, Burchell AN, Tellier PP, Coutlée F, Franco EL; TRAP-HPV study group. Protection to Self and to One's Sexual Partner After Human Papillomavirus Vaccination: Preliminary Analysis From the Transmission Reduction And Prevention with HPV Vaccination Study. *Sex Transm Dis*. 2022;49(6):414-422.

Graduate Trainee Research – HITCH and TRAP-HPV Studies

MSc Students



Aaron MacCosham, 2018-21



Rajshree Balaji, 2019-20



Samantha Shapiro, 2019-21



Andrew Arthur, 2020-23



Alissa Moore, 2022-24



Kristy Ng, 2022-24

PhD Student

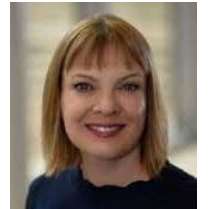


Ann Burchell, 2003-09

Postdoctoral Fellows



Karolina Louvanto, 2012-14, 2015



Kristina Dahlstrom, 2013-14



Talía Malagon, 2016-19



Michel Wissing, 2016-19



Samantha Morais, 2021-22