## Neutralizing antibody levels to human papillomavirus following biand quadrivalent vaccination

Filipe C. Mariz Tumorvirus-specific Vaccination Strategies (F035) Deutsches Krebsforschungszentrum (DKFZ)



## bi- and quadrivalent HPV prophylactic vaccines



Modified from Schiller & Müller., (2015) Lancet Oncol 16(5)



## bi- and quadrivalent HPV prophylactic vaccines



bi- and quadrivalent HPV vaccines confer:

- Strong type-specific humoral responses;
- Different cross-reactive responses mainly against alpha-9 HPV types (HPV31/33/52/58), and alpha-7 HPV45.

Modified from Schiller & Müller., (2015) Lancet Oncol 16(5)



# Neutralizing antibodies (nAb) as predictor of protection against HPV-related cancers

Pre-clinical animal models support the role of anti-L1 nAb responses in protection against experimental HPV infection and related lesions;

Vaccine correlates of protection:

- Prevention against pre-malignant lesions
- Prevention against persistent infection (>6-months)
- Neutralizing antibodies, unknown protective levels

## How sustainable and cross-reactive are the vaccineinduced Ab levels?



## Study design and rationale



Mariz et al., (2020) npj Vaccines 5(14); Mariz et al., (in-press) Lancet Infect Dis



# Peak-antibody levels cross-neutralize phylogenetically related non-vaccine types





# Vaccine-induced neutralizing and cross-neutralizing antibody levels are sustainable for up to 12 years







# Vaccine-induced cross-neutralizing antibody seroprevalence is sustained for 12 years

	<b>Bivalent vaccine</b>			Quadrivalent vaccine	Quadrivalent vaccine				
	Seroprevalence (95% CI)	Median titre (95% CI)	GMT (95% CI)	Seroprevalence (95% CI)	Median titre (95% CI)	GMT (95% CI)			
HPV31									
2–4 years	90.0 (73.4-97.8)	183 (73–290)	205 (134-313)	65.5 (45.6-82.0)	53 (25-93)	102 (66–157)			
5–7 years	80.7 (70.2-88.8)	129 (62–192)	189 (144-249)	45·7 (34·7-57·0)	<40	114 (77-169)			
8–10 years	85.3 (78.4-90.6)	117 (93–138)	179 (149-216)	46.3 (37.7-55.0)	<40	120 (90–160)			
11–12 years	83.5 (74.2-90.4)	97 (63-128)	147 (117–185)	53.8 (43.0-64.3)	44 (25-53)	121 (87-168)			
5–12 years	<b>→</b> 83·6 (79·0–88·3)	110 (92–133)	171 (151–195)	48.4 (42.7-54.1)	<40	119 (98–143)			

Similar findings for non-vaccine HPV types 33, 52 and 58

Modified from Mariz et al., (2021) Lancet Infect Dis S1473-3099(20)30873-2.



# Vaccine-induced cross-neutralizing antibody seroprevalence is sustained for 12 years

	<b>Bivalent vaccine</b>			Quadrivalent vaccine	Quadrivalent vaccine				
	Seroprevalence (95% CI)	Median titre (95% CI)	GMT (95% CI)	Seroprevalence (95% CI)	Median titre (95% CI)	GMT (95% CI)			
HPV31									
2–4 years	90.0 (73.4-97.8)	183 (73–290)	205 (134-313)	65.5 (45.6-82.0)	53 (25-93)	102 (66–157)			
5–7 years	80.7 (70.2-88.8)	129 (62–192)	189 (144-249)	45.7 (34.7-57.0)	<40	114 (77–169)			
8–10 years	85.3 (78.4-90.6)	117 (93–138)	179 (149-216)	46.3 (37.7-55.0)	<40	120 (90–160)			
11–12 years	83.5 (74.2-90.4)	97 (63-128)	147 (117–185)	53.8 (43.0-64.3)	44 (25-53)	121 (87–168)			
5–12 years	→ 83·6 (79·0–88·3)	110 (92–133)	171 (151–195)	48.4 (42.7-54.1)	<40	119 (98–143)			
1101/00									

#### Similar findings for non-vaccine HPV types 33, 52 and 58

HPV45						
2-4 years	46.6 (28.3-65.6)	<40	124 (80-192)	10.3 (2.1-27.3)	<40	53 (25–112)
5–7 years	48.7 (37.2-60.3)	<40	88 (72–108)	13.2 (6.8–22.4)	<40	97 (53–175)
8–10 years	46.1 (37.7-54.6)	<40	79 (68–92)	13.9 (8.6–20.9)	<40	89 (62–129)
11–12 years	40.6 (30.4-51.4)	<40	74 (60-90)	18.6 (11.2-28.2)	<40	117 (64–216)
5–12 years	→ 45.1 (39.5-50.9)	<40	80 (72-88)	15.1 (11.3-19.6)	<40	101 (76–133)

Modified from Mariz et al., (2021) Lancet Infect Dis S1473-3099(20)30873-2.



### Outlook #1

- In the general, HIV-uninfected population:
  - bi- and quadrivalent HPV vaccines induce sustainable nAb levels to vaccine HPV types for up to 12-years;
  - nAb levels to non-vaccine types HPV31/33/45/52/58 are, when measurable, as sustainable as nAb to vaccine HPV types;
  - nAb seroprevalence rates to HPV types 16, 18, 31, 33, 52 and 58 significantly correlated with reported VE against persistent infections (not shown).



How sustainable and cross-reactive are the vaccineinduced Ab levels in people living with HIV?



## Peak-neutralizing antibody levels at Month-7 are induced in HIV+ patients following vaccination

Toft et al 2014 reported on a randomized, double-bind study conducted with **adults living with HIV**, recipients or not of ART



Toft et al., (2014) JID 209:1165-73.



## Vaccine-induced cross-reactivity is more restricted in HIVinfected subjects

HPV type	Baseline seroprevalence %			Seroconversion total%		Seroconversion Gardasil <sup>™</sup> %			Seroconversion Cervarix <sup>™</sup> %			
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
6	42	32	38	80	69	75#	100	90	95 🔶	0	0	0
11	27	32	29	84	85	84#	100	100	100 🔶	0	0	0
16	38	33	36	100	95	98	100	90	96	100	100	100 🗲
18	28	27	27	86	86	86*	71	78	73 🗲	100	92	97 🗲
31	28	30	29	34	50	39	24	44	29	47	55	50 🗲
33	17	30	21	18	35	23	17	22	18	18	45	27
45	22	17	20	19	8	15	24	8	18	13	8	11

(B) Antibodies detected with neutralization assays

Modified from Faust et al., (2016) Vaccine 34:1559-65.



# Vaccine-induced neutralizing antibody responses are sustained for 4 years in HIV+ patients



 Seroprevalence rates 4-years post-vaccination:

 3-doses: 86-93% for HPV types 6, 11 and 16; 64% for HPV18

 4-doses: >95% for HPV types 6, 11 and 16; 75% for HPV18

Modified from Levin et al., (2017) Vaccine 35(13):1712-20.



### Outlook #2

- In the people living with HIV:
  - bi- and quadrivalent HPV vaccines induce high rates of seroconversion;
  - Vaccine-induced **cross-reactivity** is **diminished**, as compared to the general, HIV-uninfected population;
  - Vaccine-induced nAb responses are sustained for 4 years;
  - Amplitude and sustainability of vaccine-induced nAb levels also depend on HIV RNA load and CD4 counts at first dose (Moscicki et al 2019 Clin Infec Dis; Cespedes et al 2018, Papillomavirus Res)
  - estimation of VE in adults living with HIV is challenging due to the seropositivity rates at baseline.



## **Acknowledgments**

GERMAN CANCER RESEARCH CENTER IN THE HELMHOLTZ ASSOCIATION

**Research for a Life without Cancer** 

F020/F035 Michael Pawlita Martin Müller Tim Waterboer Noemi Bender Kristina M. Prager

**EMBL-DKFZ Chemical Biology Core Facility** Peter Sehr



#### Karolinska Institutet

Matti Lehtinen Tiina Eriksson Hanna Kahn

#### International Agency for Research on Cancer



Partha Basu Rengaswamy Sankaranarayanan Penelope Gray UNIVERSITY OF HELSINKI Jorma Paavonen



Devasena Anantharaman Madhavan Radhakrisna Pillai Priya R. Prabhu

## Funded by



Cancer Foundation Finland





