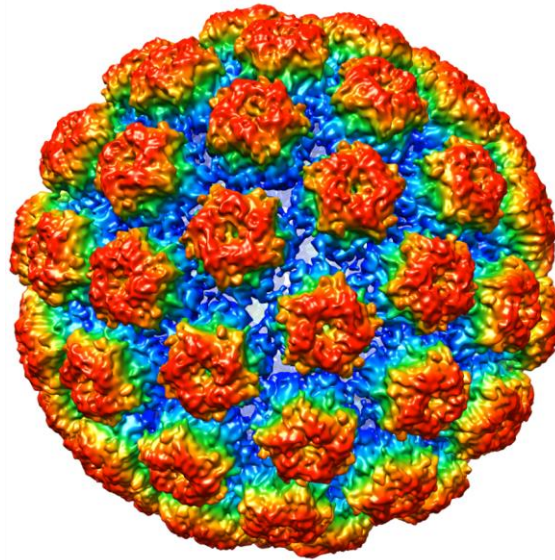


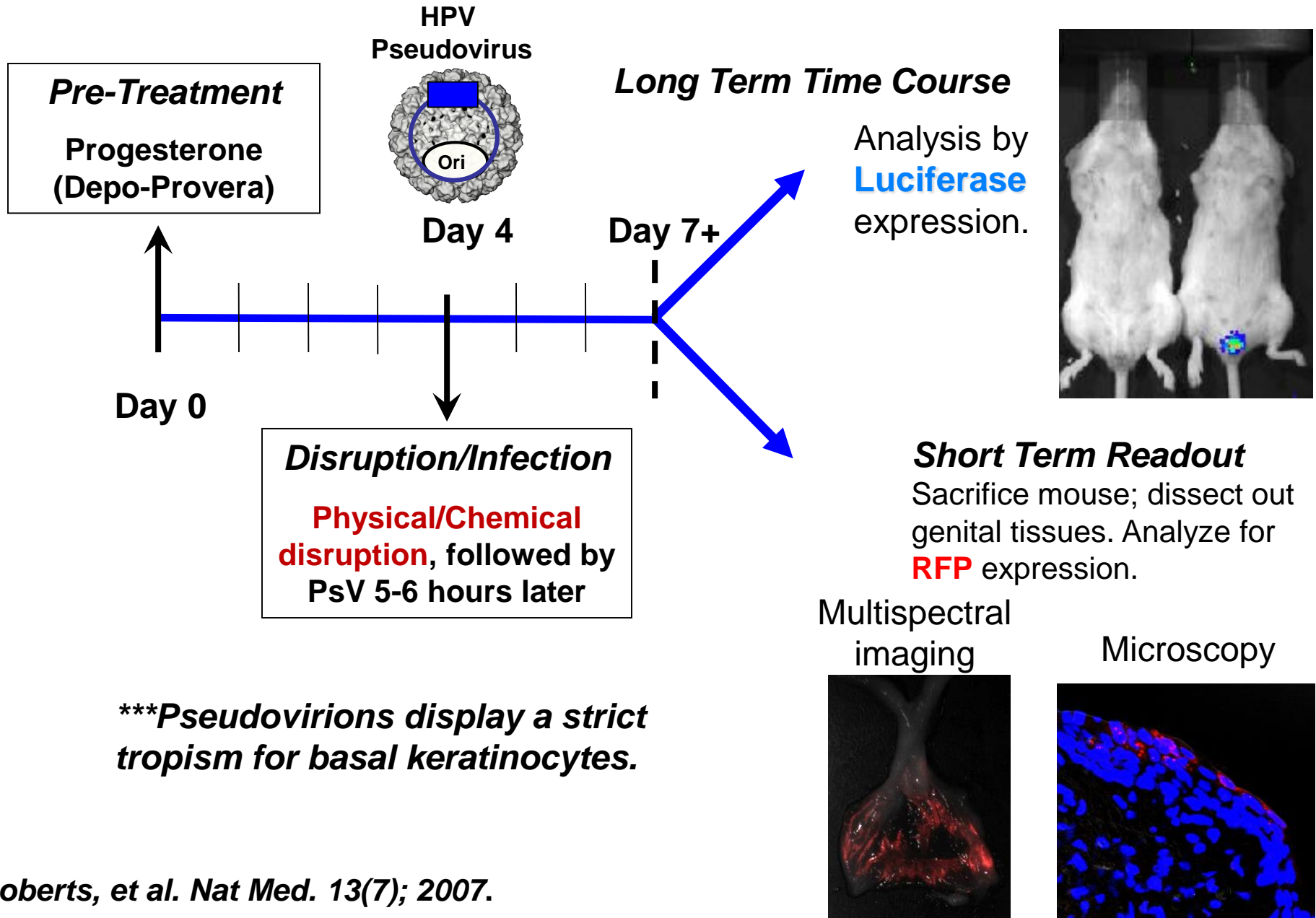
# Effect of Pap Smear Collection on Cervicovaginal HPV16 Infection in a Rhesus Macaque Model



**John Schiller**

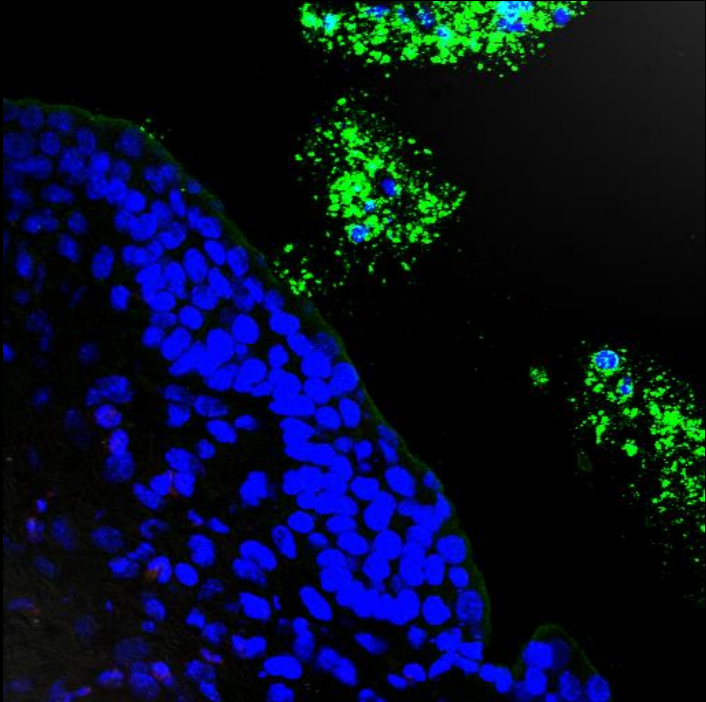
Laboratory of Cellular Oncology  
National Cancer Institute  
[schillej@mail.nih.gov](mailto:schillej@mail.nih.gov)

# A Mouse Model of Genital Tract HPV Infection

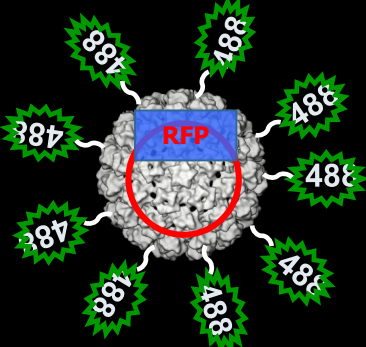
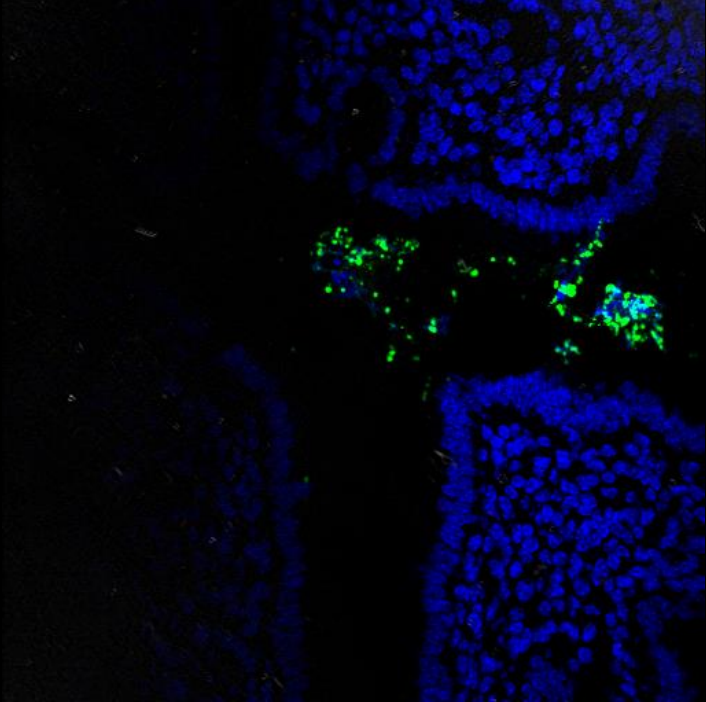


# HPV Capsids Don't Bind Apical Surfaces of Intact Epithelium

Vaginal Mucosa - stratified squamous



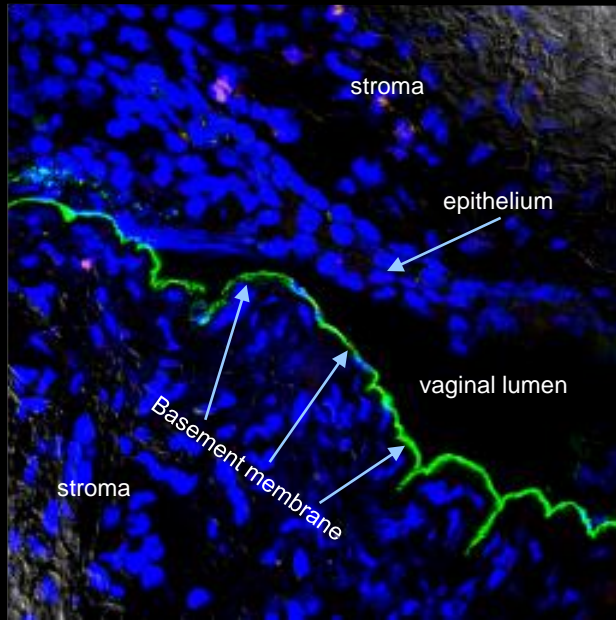
Endocervical Mucosa - simple columnar



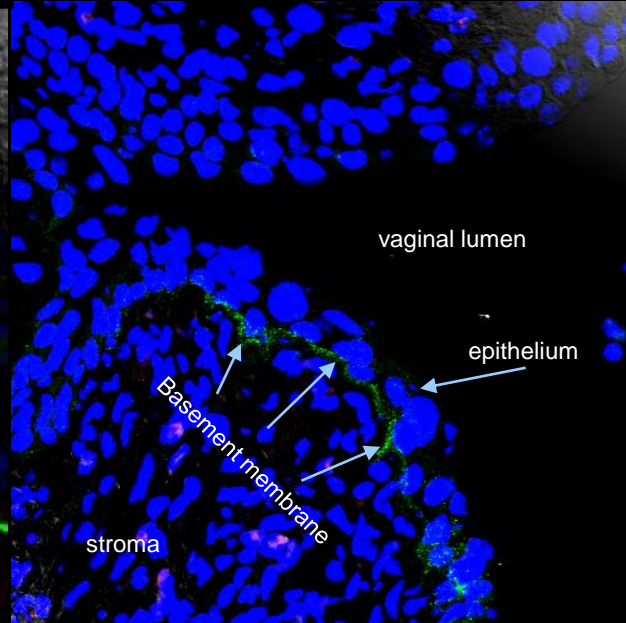
green = (infectious) dye-coupled HPV capsids

# HPV16 Capsids Bind to the Basement Membrane of Disrupted Stratified Squamous Epithelia in the Female Genital Tract

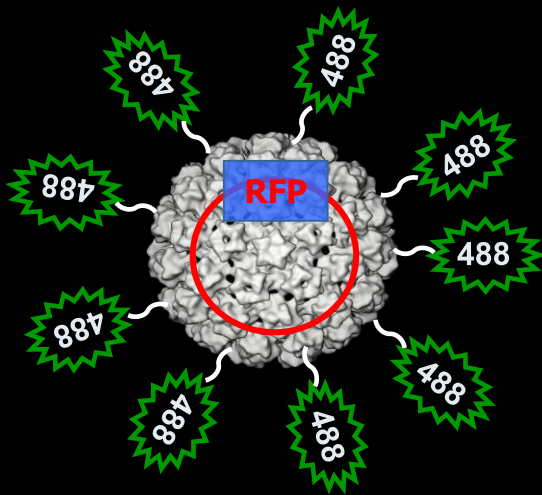
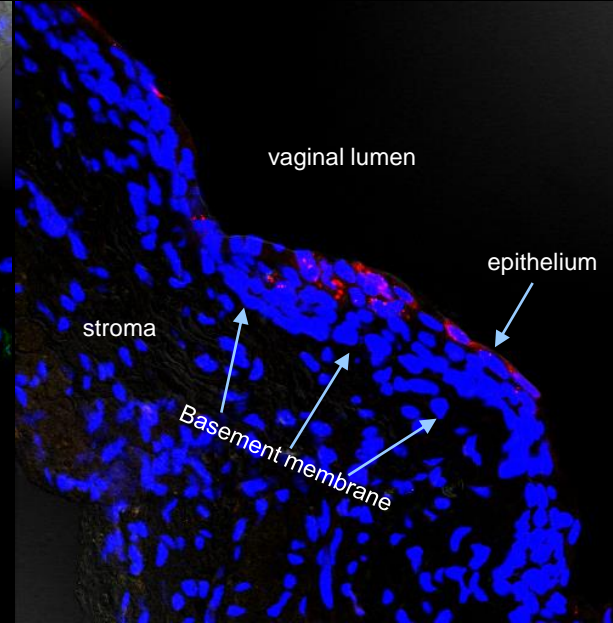
2hrs post inoculation



24hrs post inoculation



72hrs post inoculation



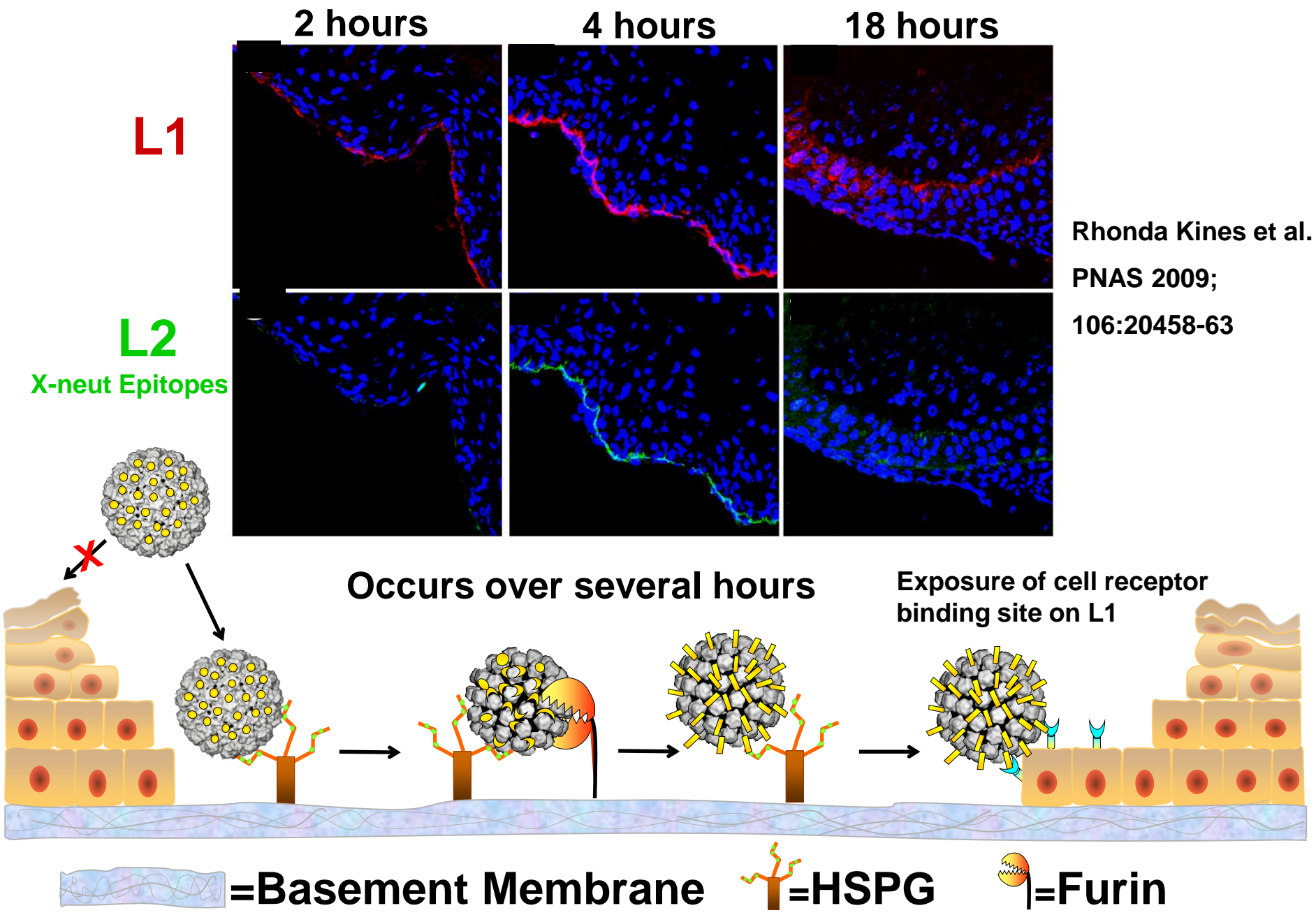
■ = PsV capsids

■ = RFP expression,  
infection

488 = alexa-fluor488 green fluorescent dye  
(PsV retains infectivity)

Roberts et al. Nat Med 13: 857-61, 2007

# In vivo Model of Early Events in HPV Infection



# Implications

**Interventions that disrupts or permeablizes the epithelium to the extend that the virus can access the basement membrane will potentiate HPV infection.**

**Pap smear collection disrupts the cervical epithelium by design.**

**Does it potentiate HPV infection in a NHP model?**

# Rhesus Monkey Pap Study Design

Jeff Roberts et al., J. Nat Cancer Inst. 2011; 103(9): 737-43

- Speculum Exam w/ or w/o standard cytology collection (cytobrush for endocervix; spatula for extocervix)
- Instillation of HPV16-RFP Pseudovirus ( $3.8 \times 10^8$  I.U.)
- Digital Exam with Surgilube or Carrageenan lubricant
- At 3 days, excise reproductive tract, take 6 biopsies, make 5 sections through the transformation zone
- Count number of infected cells by confocal microscopy (660 images per animal, two counters, blinded)

4 monkeys per group:

Group 1: instill **pseudovirus** atraumatically

Group 2: instill **pseudovirus**, **pap test**, BME with **surgilube**

Group 3: instill **pseudovirus**, **pap test**, BME with **carrageenan**

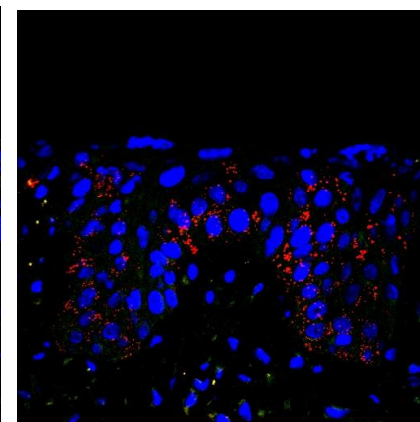
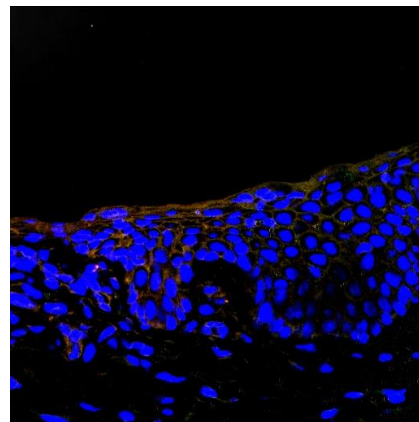
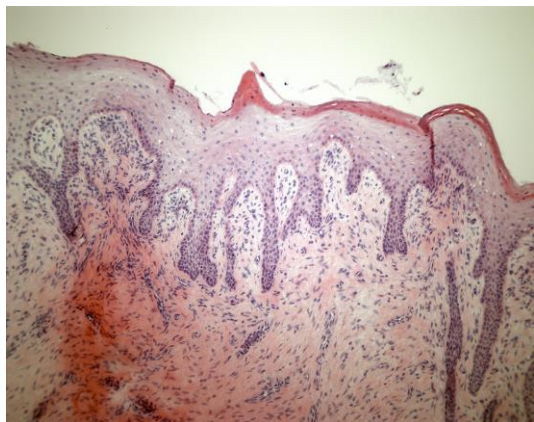


**H&E**

**PsV challenge  
without cytology**

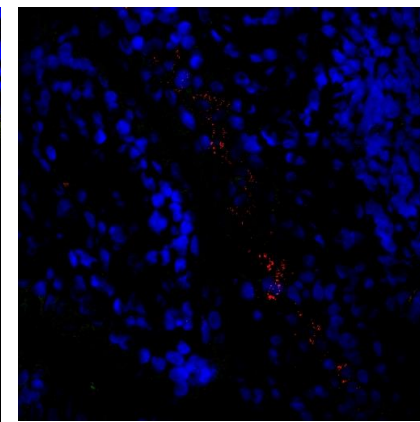
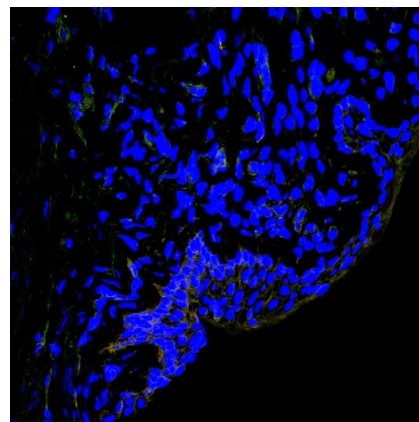
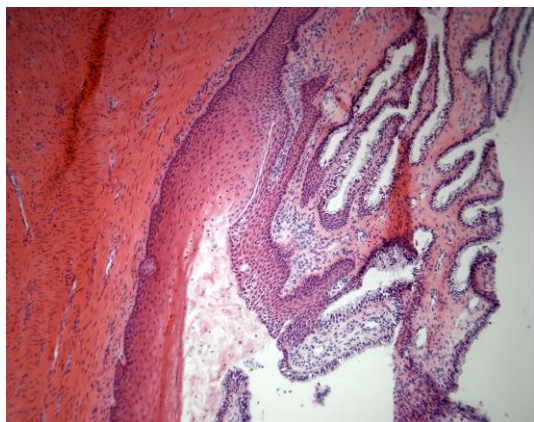
**PsV challenge  
with cytology**

**a**



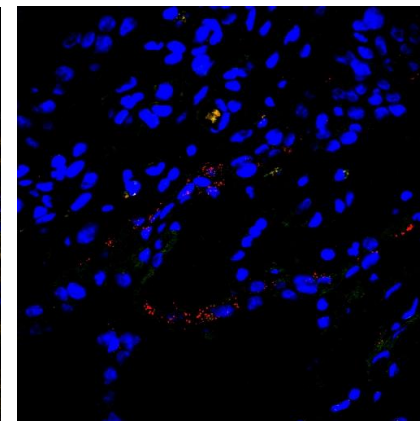
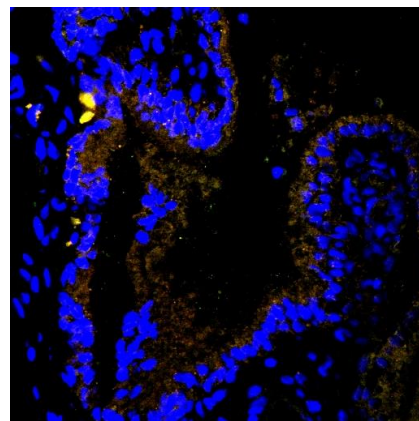
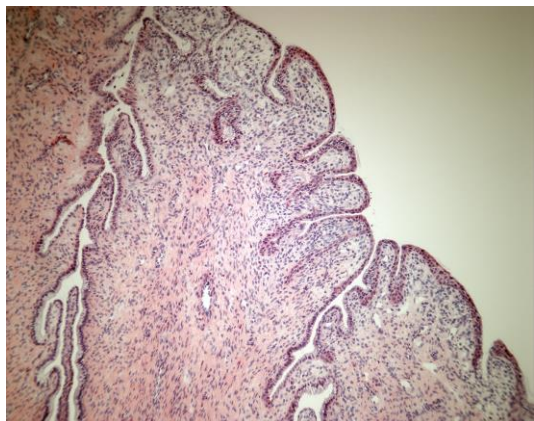
**Ectocervix**

**b**



**Transformation  
Zone**

**c**



**Endocervix**

# Mean No. Infectious Events Per Section

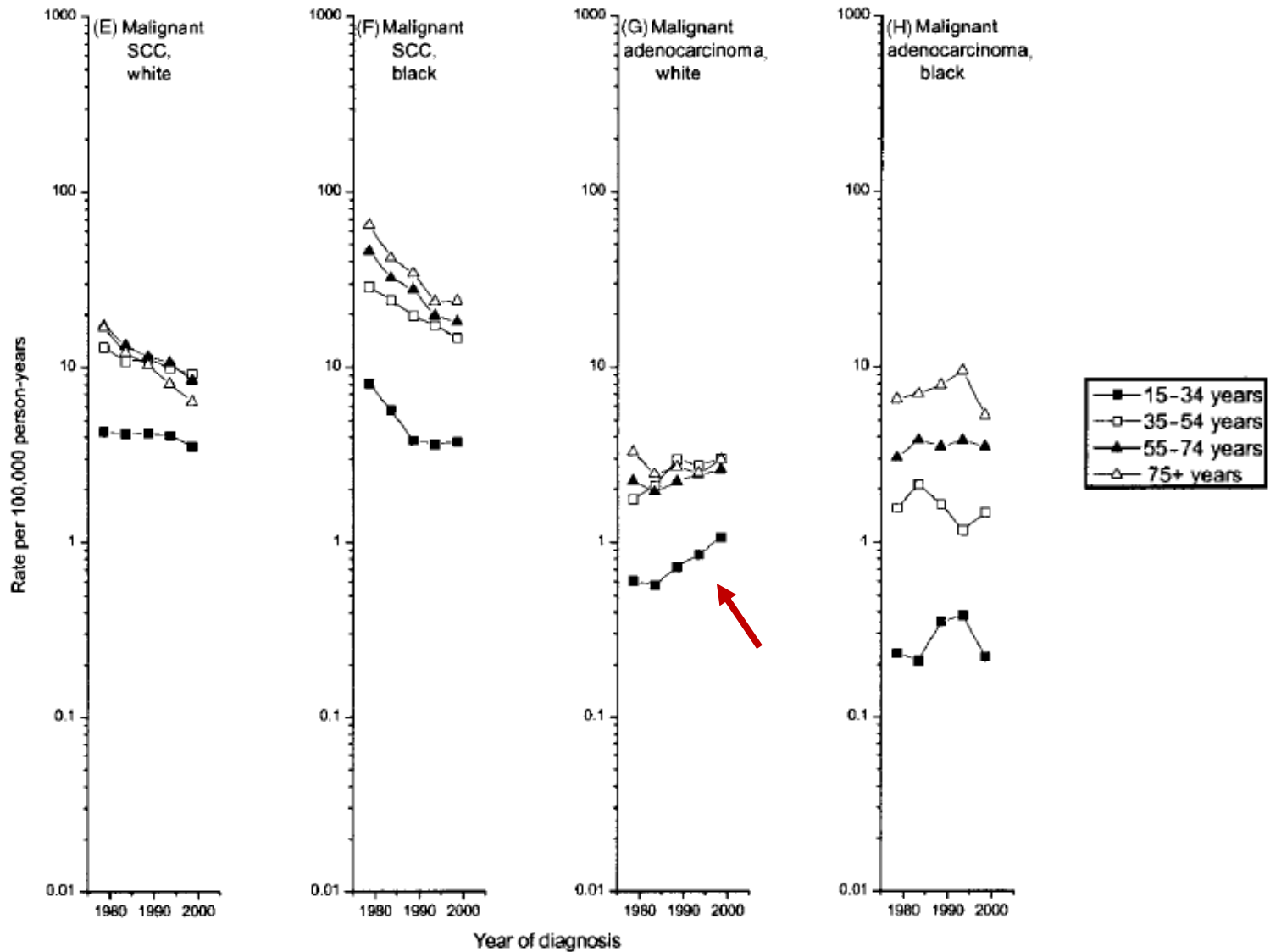
Protocol	RFP Pos Cells	95% CI
RFP PsV Only	0.05*	0.01, 0.08
Pap Smear RFP PsV Surgilube	84.3	45.1, 157.6
Pap Smear RFP PsV Carrageenan	3.5	1.8, 6.9

\* The transformation zone was not exceptionally susceptible to infection

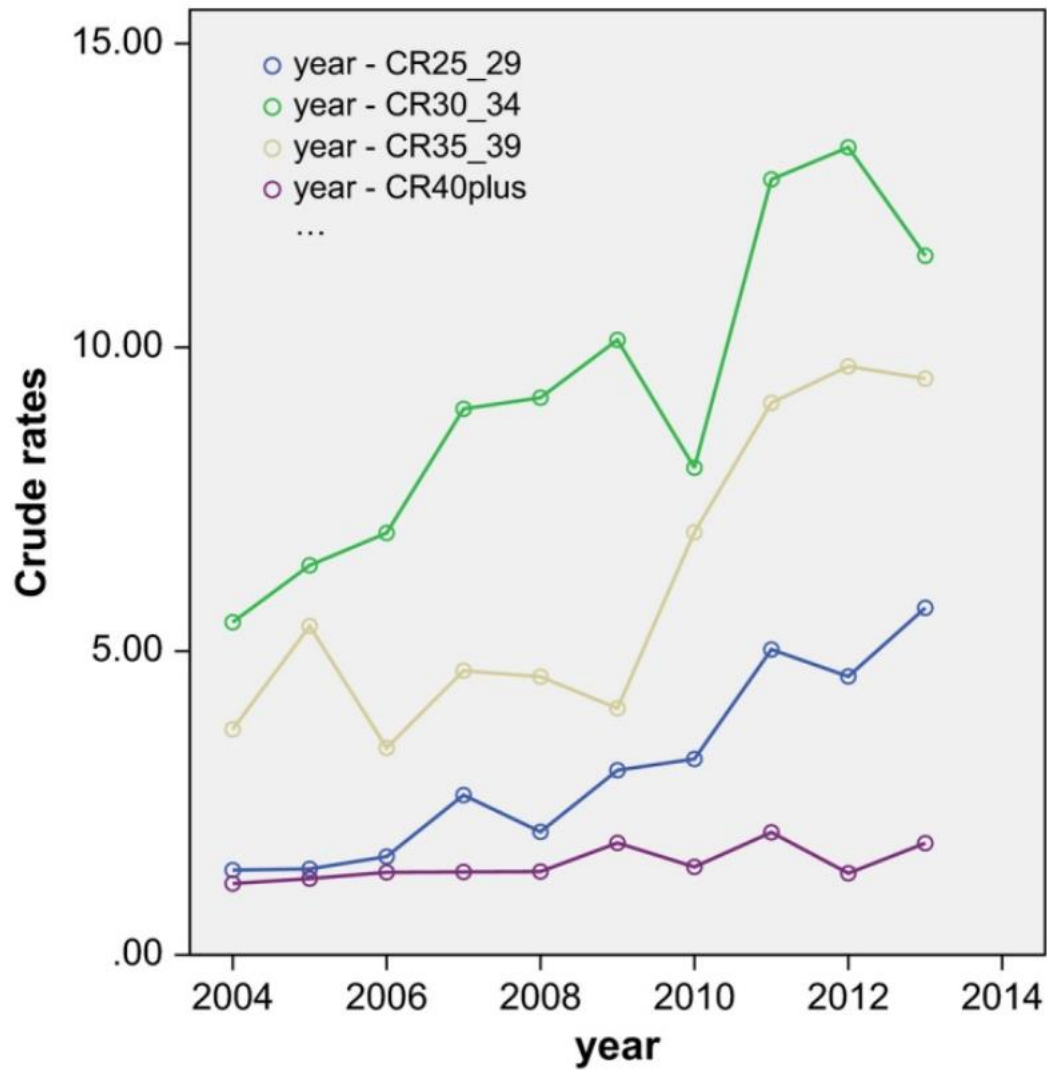
# Implications of Monkey Pap Results

- **Not a call for changing Pap smear recommendations.**
  - **increase in susceptibility expected to be transient**
  - **organized screening programs clearly decrease rates of cervical squamous cell carcinoma**
  - **but unexplained increase in rates in adenocarcinoma in younger women.**

# U.S. Time Trends in Cervical SCC and Adenocarcinoma



# Netherlands Time Trends in Cervical Adenocarcinoma



# Does More Aggressive Collection of Endocervical Cells Promote Cx Adenocarcinoma?



Is there an association between increased frequency and aggressiveness of Pap screen collection and subsequent rates of Cx Adenocarcinomas?

# Questions Raised by the Study

- **Conduct a trial comparing rates of HPV infection after Pap smear +/- carrageenan?**
- **Use carrageenan gel for pelvic exam as standard practice?**
- **Do the results support changes to atraumatic sample collection for HPV DNA testing, esp in natural history studies?**
- **Would vaccination of mid-adult women prevent autoinoculation of the endocervix after Pap, thereby reducing the rates of cervical adenocarcinoma?**

# Key Collaborators

**NCI – CCR:** **Jeff Roberts**  
**Doug Lowy**  
**Rhonda Kines**  
**Patricia Day**  
**Katy Johnson**  
**Cindy Thompson**  
**Susana Pang**  
**Chris Buck**

**DCEG:** **Hormuzd Katki**