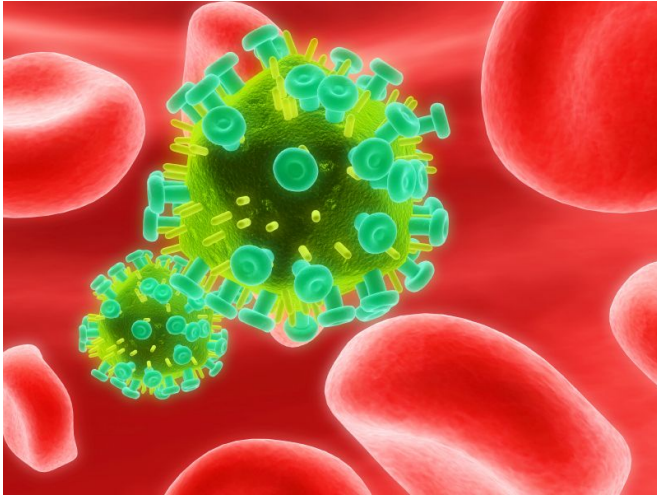


HIV-seropositive CIN3+ patients have lower HPV16 prevalence

16 March 2016



HIV-infected and uninfected women with CIN3+ had a similar prevalence of other members of the HPV16-related alpha-9 oncoHPV clade as a group (odds ratio, 1.02; 95 percent confidence interval, 0.53 to 1.94). For HIV-seropositive versus HIV-seronegative women with CIN3+, the prevalence of non-alpha-9 oncoHPV types was increased (odds ratio, 3.9; 95 percent confidence interval, 1.3 to 11.8).

"This is consistent with prior reports that HIV has a weak effect on infection by HPV16 relative to other oncoHPV and supports use of nonavalent HPV vaccine in HIV-seropositive women," the authors write.

Two authors disclosed financial ties to the biopharmaceutical industry.

More information: [Abstract](#)

[Full Text \(subscription or payment may be required\)](#)

(HealthDay)—HIV-seropositive women with cervical intraepithelial neoplasia (CIN) grade 3 (CIN3+) are less likely to have human papillomavirus (HPV) 16, according to a study published in the March issue of the *American Journal of Obstetrics & Gynecology*.

L. Stewart Massad, M.D., from the Washington University School of Medicine in St. Louis, and colleagues screened HIV-seropositive and HIV-seronegative women with CIN3+. Polymerase chain reaction assays were used to detect DNA from more than 40 HPV types in cervicovaginal lavage specimens obtained at the visit during which CIN3+ was diagnosed.

The researchers detected HPV16 in 62 percent of 21 HIV-seronegative women with CIN3+ and in 29 percent of 154 HIV-seropositive women with CIN3+ ($P = 0.01$). After controlling for covariates, the lower prevalence of HPV16 in CIN3+ among HIV-seropositive women persisted (odds ratio, 0.25; 95 percent confidence interval, 0.08 to 0.78).

Copyright © 2016 [HealthDay](#). All rights reserved.

APA citation: HIV-seropositive CIN3+ patients have lower HPV16 prevalence (2016, March 16) retrieved 4 May 2021 from

<https://medicalxpress.com/news/2016-03-hiv-seropositive-cin3-patients-hpv16-prevalence.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.