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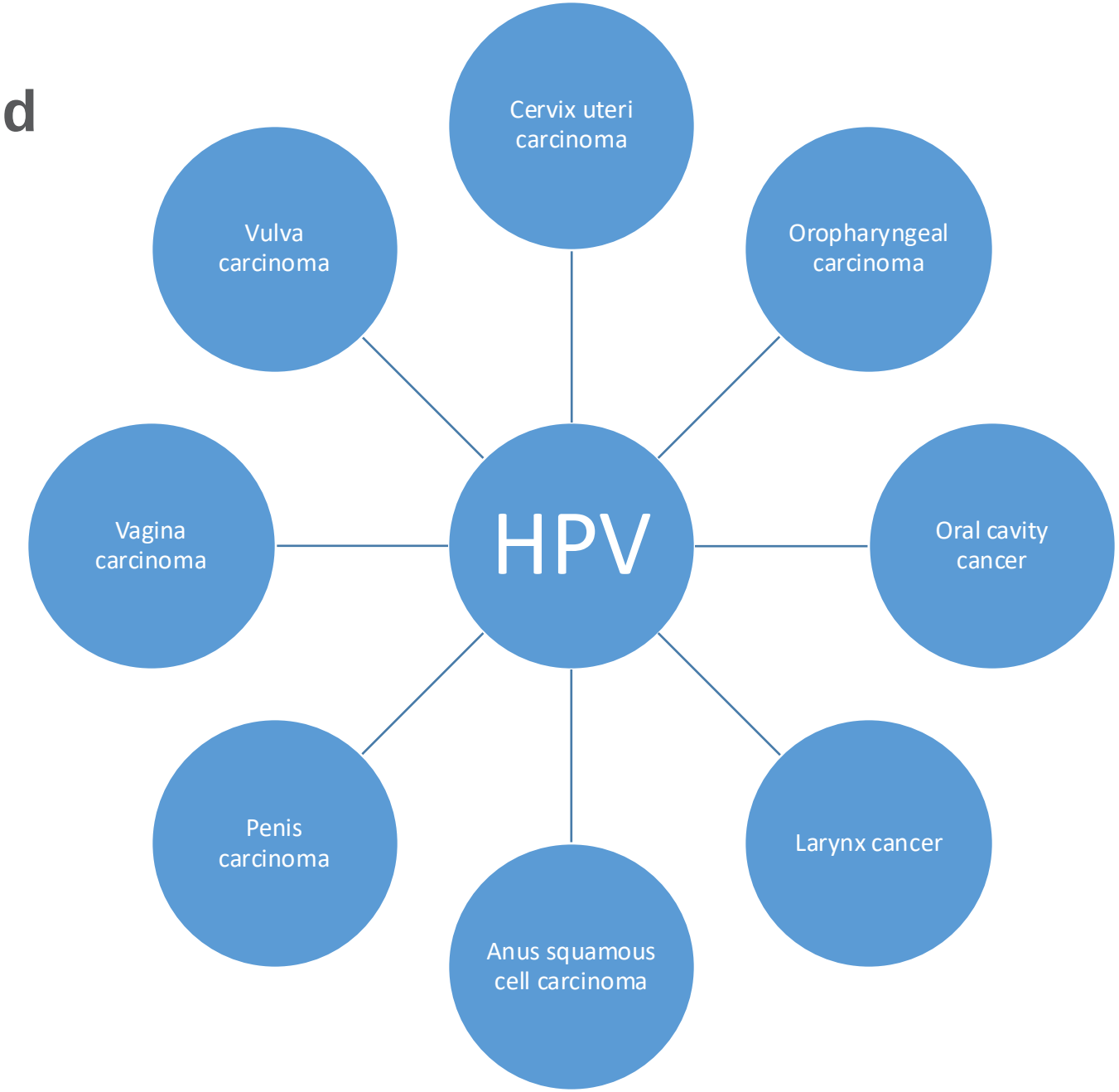
Epidemiology of infection with high risk HPVs, risk factors in different population groups

Anda Kivite-Urtane, PhD, MPH
Director, Associate Professor
Institute of Public Health, Riga Stradins University, Riga, Latvia

Jana Zodzika (1,2), **Natalija Berza** (1)
(1) Institute of Public Health, Riga Stradins University, Latvia
(2) Gynaecology Department, Riga East Clinical University Hospital, Riga, Latvia

Background



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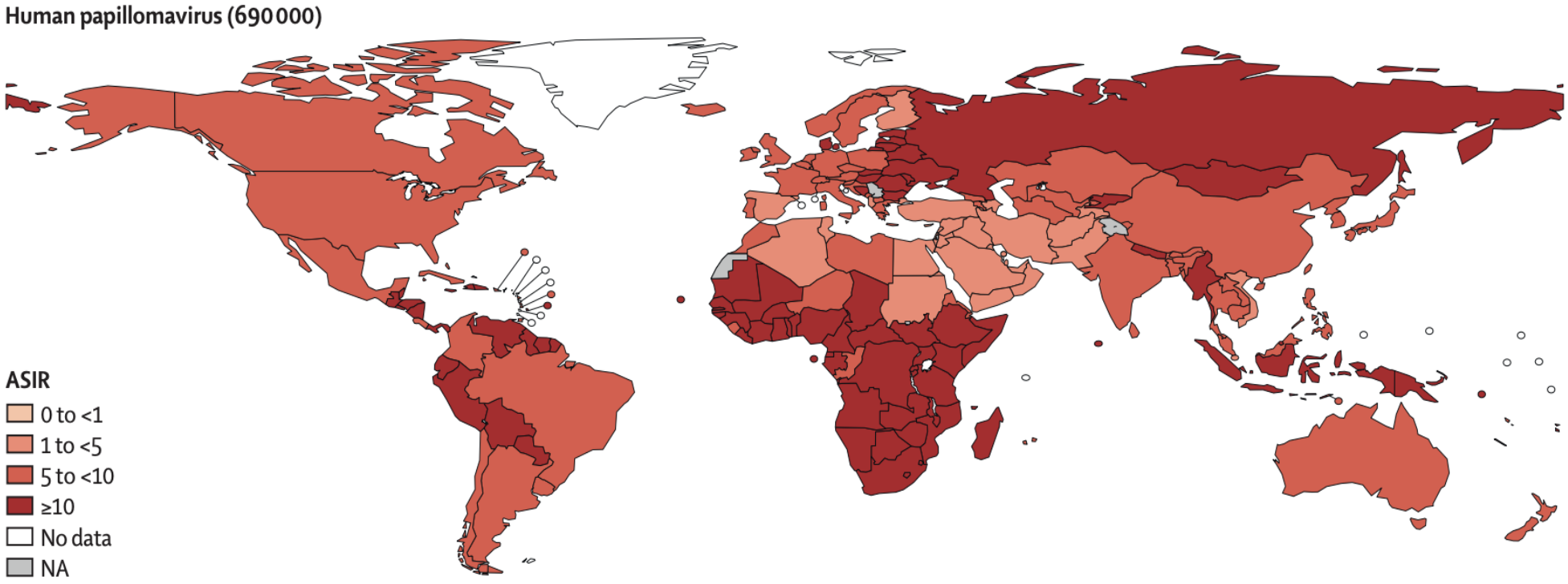
De Martel C., et al. Global burden of cancer attributable to infections in 2018: a worldwide incidence analysis. Lancet Glob Health 2020; 8: e180–90

Background

Country-specific ASIR (age-standardised incidence rate) per 100,000 person-years of cancer attributable to the four main infectious pathogens on the same categorical scale



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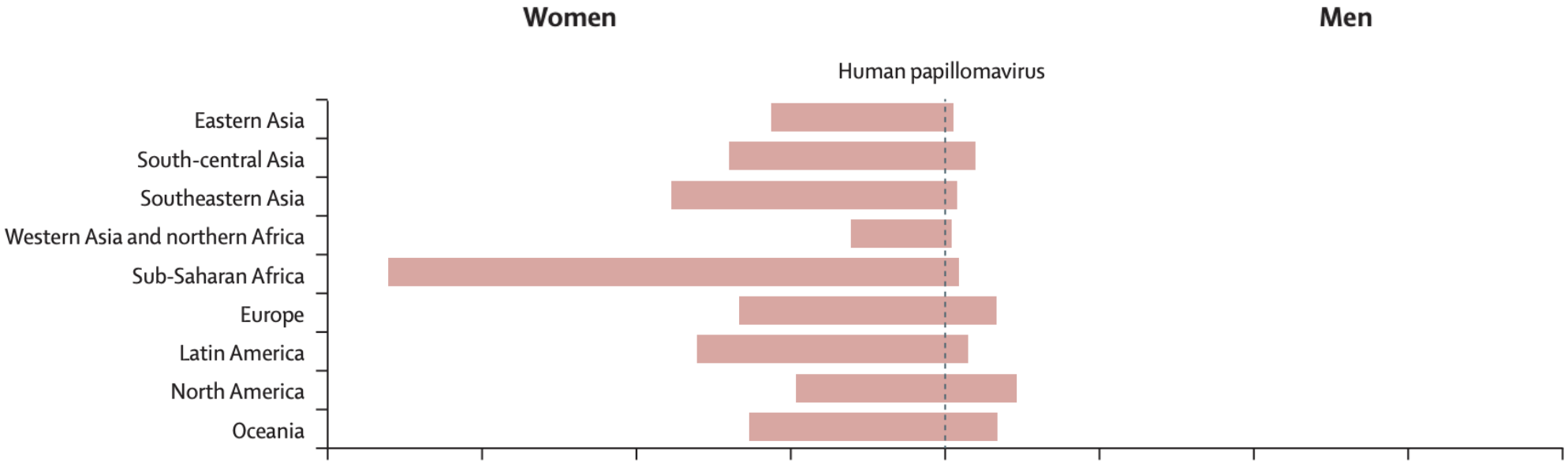
De Martel C., et al. Global burden of cancer attributable to infections in 2018: a worldwide incidence analysis. Lancet Glob Health 2020; 8: e180–90

Background

ASIR (age-standardised incidence rate) per 100,000 person-years of infection-attributable cancers in 2018 in nine geographical regions by sex and infectious pathogen



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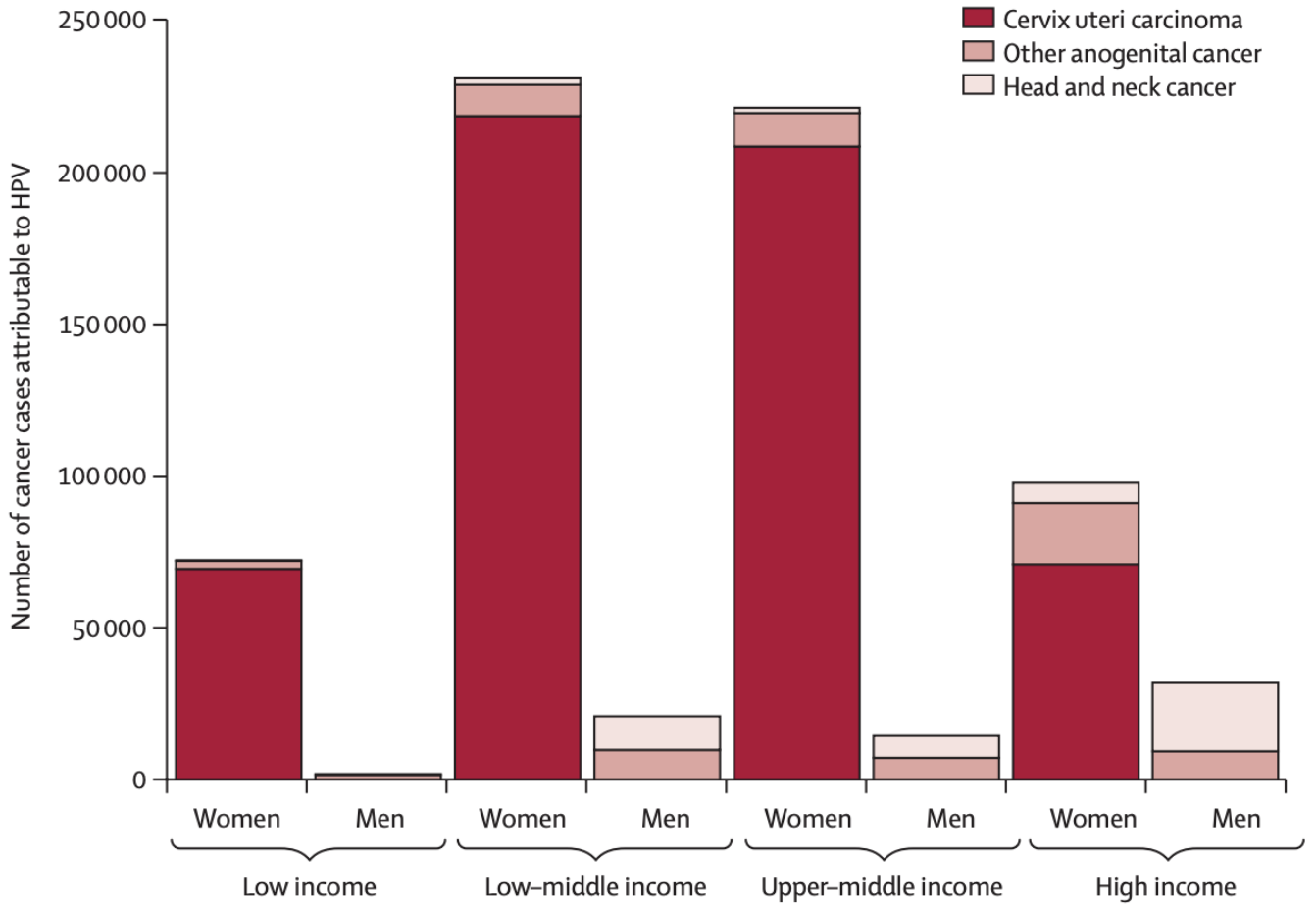
De Martel C., et al. Global burden of cancer attributable to infections in 2018: a worldwide incidence analysis. Lancet Glob Health 2020; 8: e180–90

Background

HPV-attributable cancer by sex and World Bank income groups, according to anatomical cancer site



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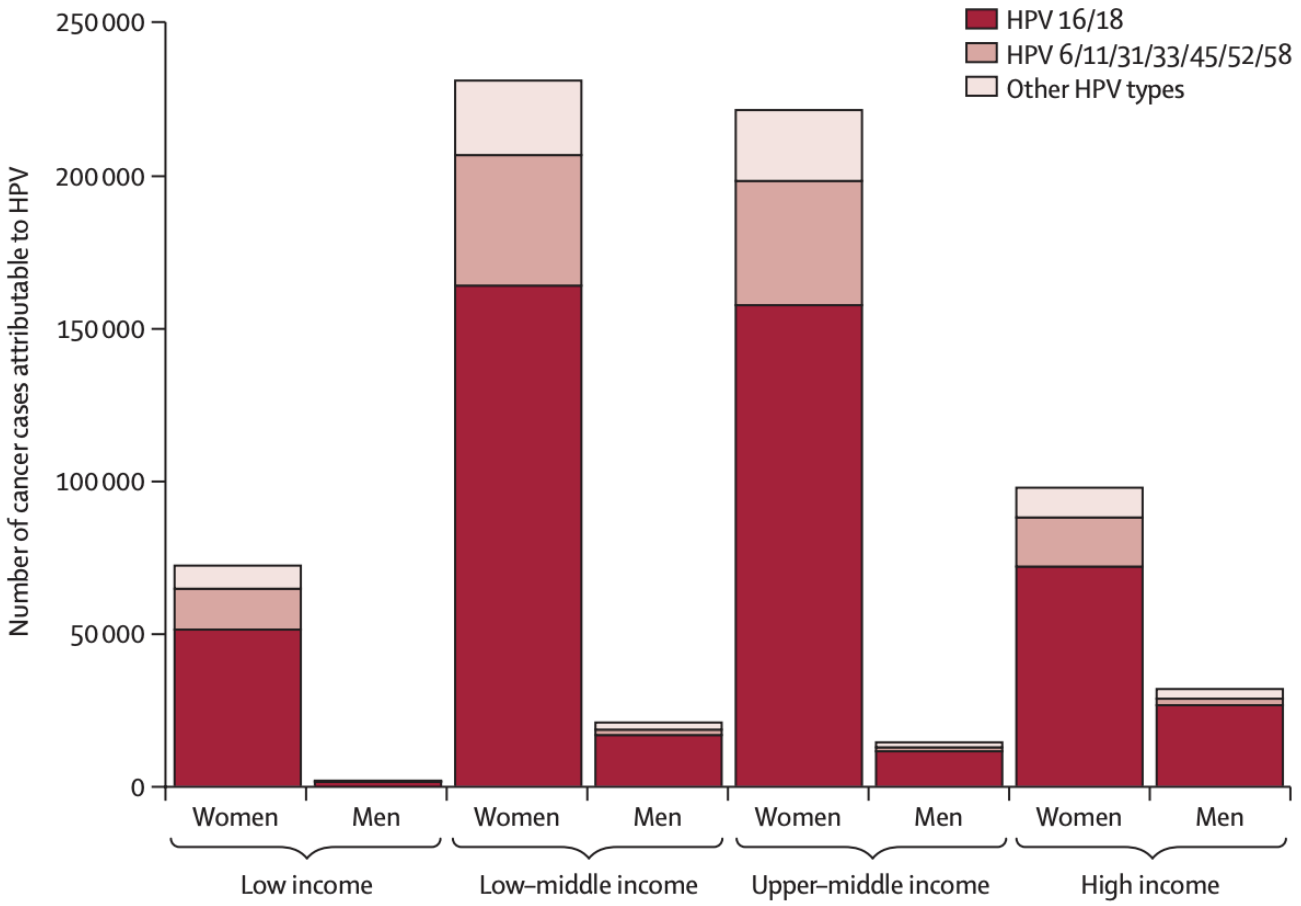
De Martel C., et al. Global burden of cancer attributable to infections in 2018: a worldwide incidence analysis. Lancet Glob Health 2020; 8: e180–90

Background

HPV-attributable cancer by sex and World Bank income groups, according to HPV type



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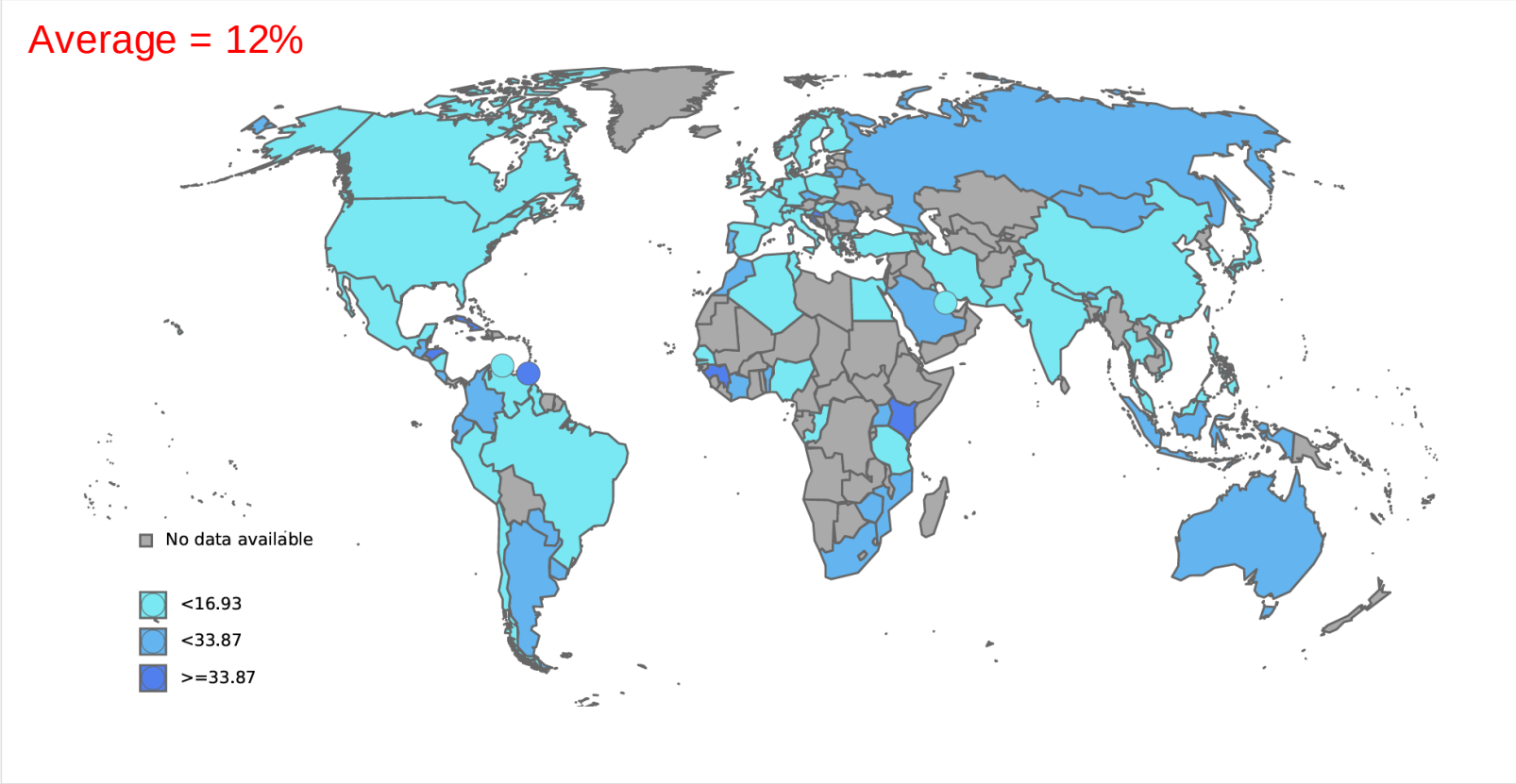
Epidemiology

Prevalence of HPV among women with normal cervical cytology in the World



Data updated on 22 May 2023 (data as of 30 Jun 2015)

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Bruni L., et al. ICO/IARC Information Centre on HPV and Cancer (HPV Information Centre). Human Papillomavirus and Related Diseases in the World. Summary Report 10 March 2023. [19.11.2024]

Epidemiology

- Women living with HIV
- Men who have sex with men
- Immunocompromised individuals
- People with co-infection with other sexually transmitted infections (STI)
- People who receive immunosuppressive medications
- Children who have been through sexual abuse

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Human papillomavirus vaccines: WHO position paper (2022 update). Weekly epidemiological record

Epidemiology

- Tobacco smoking
- High parity
- Long-term hormonal contraceptive use
- Co-infection with HIV
- Co-infection with Chlamydia trachomatis
- Co-infection with herpes simplex virus type-2
- Immunosuppression
- Certain dietary deficiencies

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Bruni L., et al. ICO/IARC Information Centre on HPV and Cancer (HPV Information Centre). Human Papillomavirus and Related Diseases in the World. Summary Report 10 March 2023. [19.11.2024]

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Understanding the high-risk human papillomavirus prevalence and associated factors in the European country with a high incidence of cervical cancer

Natalija Berza [1], Jana Zodzika [1,2], Anda Kivite-Urtane[1,3], Nicholas Baltzer[4], Alise Curkste[1], Ilva Pole[5], Mari Nygård[4], Kersti Pärna[6], Mindaugas Stankunas[7], Anna Tisler [6], Anneli Uuskula [6]

1 Institute of Public Health, Riga Stradins University, Riga, Latvia
2 Gynaecology Department, Riga East Clinical University Hospital, Riga, Latvia
3 Department of Public Health and Epidemiology, Riga Stradins University, Riga, Latvia
4 Cancer Registry of Norway, Oslo, Norway
5 Laboratory Service, National Microbiology Reference Laboratory, Riga East University Hospital, Riga, Latvia
6 Institute of Family Medicine and Public Health, University of Tartu, Tartu, Estonia
7 Department of Health Management, Lithuanian University of Health Sciences, Kaunas, Lithuania

EEA Financial Mechanism 2014-2021 Baltic Research Programme

Project EMP416 «Towards elimination of cervical cancer: intelligent and personalised solutions for cancer screening»

2019-2023

Aim of the project: To use existing registry and health data to personalise cervical cancer screening for the benefit of citizens and society to create algorithms that can deliver personalized cervical cancer screening recommendations

Iceland Liechtenstein Norway grants

Rīga Stradiņš University

Tartu Ülikool 1632 Universitas Tartuensis

Lithuanian University of Health Sciences

Cancer Registry of Norway

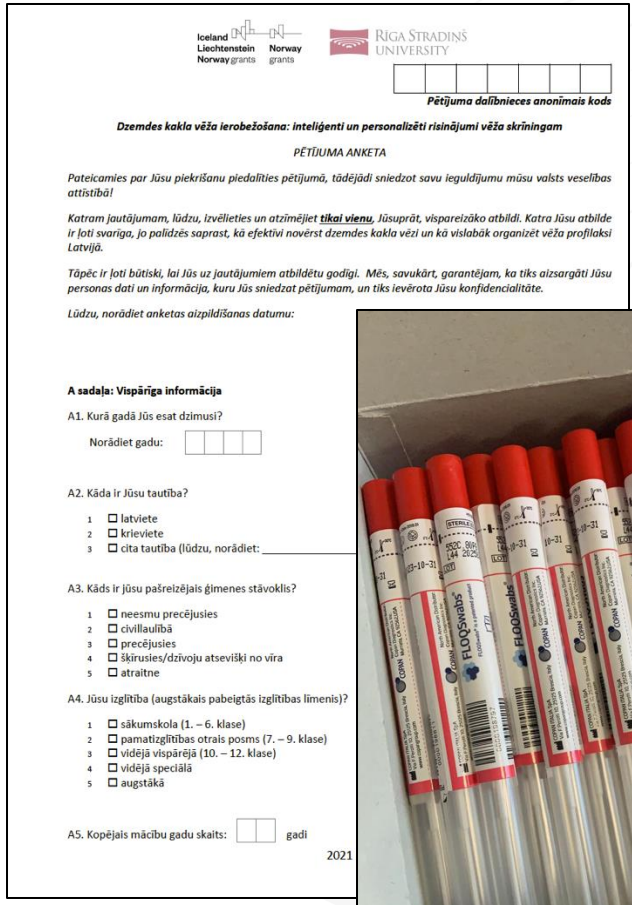
Methods

- cross-sectional study
- field work - February 2021 to February 2022
- 1313 women aged 25-70 years recruited

a) via the colposcopy specialists of the Outpatient Department of the Riga East Clinical University Hospital (RAKUS) – n=545

b) via 10 general practitioners' practices (2 in each of the Regions of Latvia) – n=768

- self-filled questionnaire + self-collected vaginal sample for HPV testing *(FLOQSwabs, COPAN + Cobas 4800 System, Roche)*



Iceland Liechtenstein Norway grants — Norway grants

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Pētījuma dalībnieces anonīmais kods

Dzemdes kakla vēža ierobežošana: inteliģenti un personalizēti risinājumi vēža skrīningam

PĒTĪJUMA ANKETA

Pateicamies par Jūsu piekrišanu piedalīties pētījumā, tādējādi sniedzot savu ieguldījumu mūsu valsts veselības attīstībā!

*Katram jautājumam, lūdzu, izvēlieties un atzīmējiet **tikai vienu**, Jūsuprāt, vispareizāko atbildi. Katra Jūsu atbilde ir ļoti svariga, jo palīdzēs saprast, kā efektīvi novērst dzemdes kakla vēzi un kā vislabāk organizēt vēža profilaksi Latvijā.*

Tāpēc ir ļoti būtiski, lai Jūs uz jautājumiem atbildētu godīgi. Mēs, savukārt, garantējam, ka tiks aizsargāti Jūsu personas dati un informācija, kuru Jūs sniedzat pētījumam, un tiks ievērota Jūsu konfidencialitāte.

Lūdzu, norādiet anketas aizpildīšanas datumu:

A sadaļa: Vispārīga informācija

A1. Kurā gadā Jūs esat dzimusi?

Norādiet gadu: ☐☐☐☐

A2. Kāda ir Jūsu tautība?

1 ☐ latviete
2 ☐ krieviete
3 ☐ cita tautība (lūdzu, norādiet: _____

A3. Kāds ir Jūsu pašreizējais ģimenes stāvoklis?

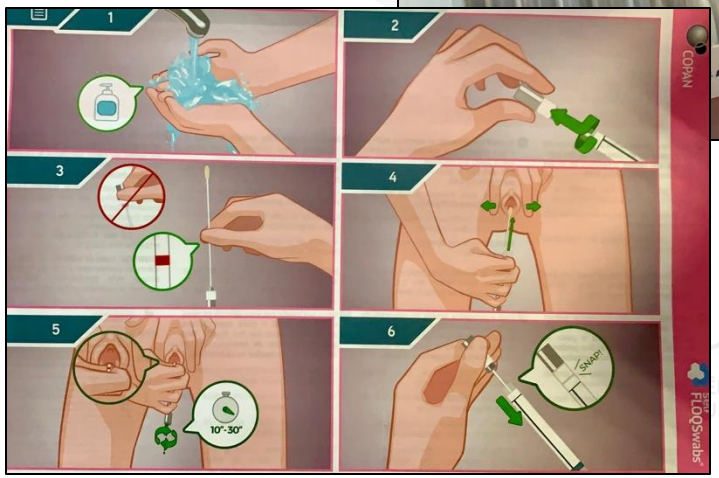
1 ☐ neesmu precējusies
2 ☐ civillaulībā
3 ☐ precējusies
4 ☐ šķirusies/dzīvoju atsevišķi no vīra
5 ☐ atraitne

A4. Jūsu izglītība (augstākais pabeigtās izglītības līmenis)?

1 ☐ sākumskola (1. – 6. klase)
2 ☐ pamatizglītības otrais posms (7. – 9. klase)
3 ☐ vidējā vispārējā (10. – 12. klase)
4 ☐ vidējā speciālā
5 ☐ augstākā

A5. Kopējais mācību gadu skaits: ☐☐ gadi

2021



Rīgas Stradiņa universitāte

Methods

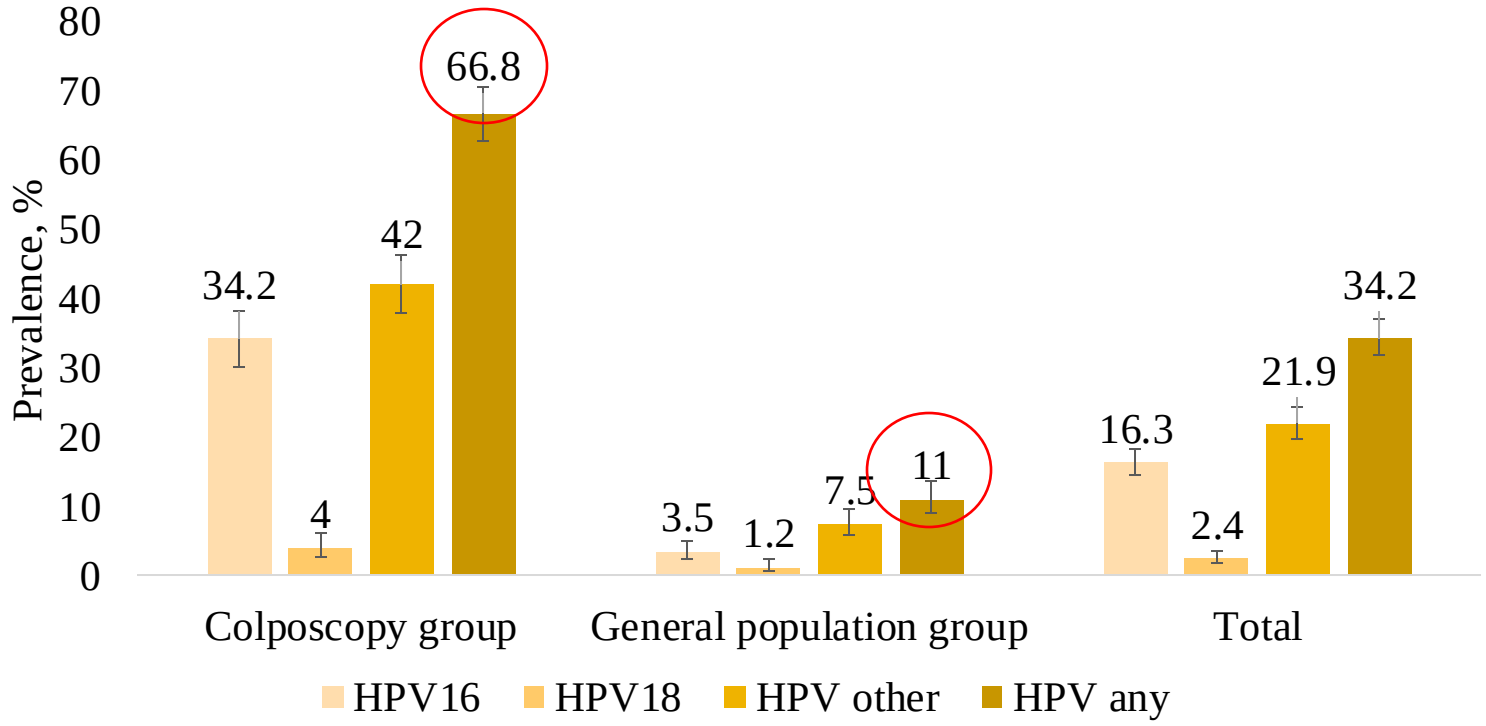
- SPSS 26.0 software
- multivariate logistic regression analysis
- results considered as statistically significant if $p<0.05$

Sociodemographic, economic factors:
- Age
- Nationality
- Marital status
- Education
- Employment
- Income
- Self-assessment of financial situation

Overall health:
- Self-rated health
- Chronic conditions
- BMI
- Smoking
- Alcohol use

Sexual and reproductive health:
- Current sexual activity
- No of lifetime sex partners
- Most recent visit to gynaecologist
- Hormonal contraceptives lifetime
- No of pregnancies
- Self-assessed STI risk
- STI in anamnesis
- Knowledge of screening
- HPV vaccination status
- Family anamnesis

HPV prevalence



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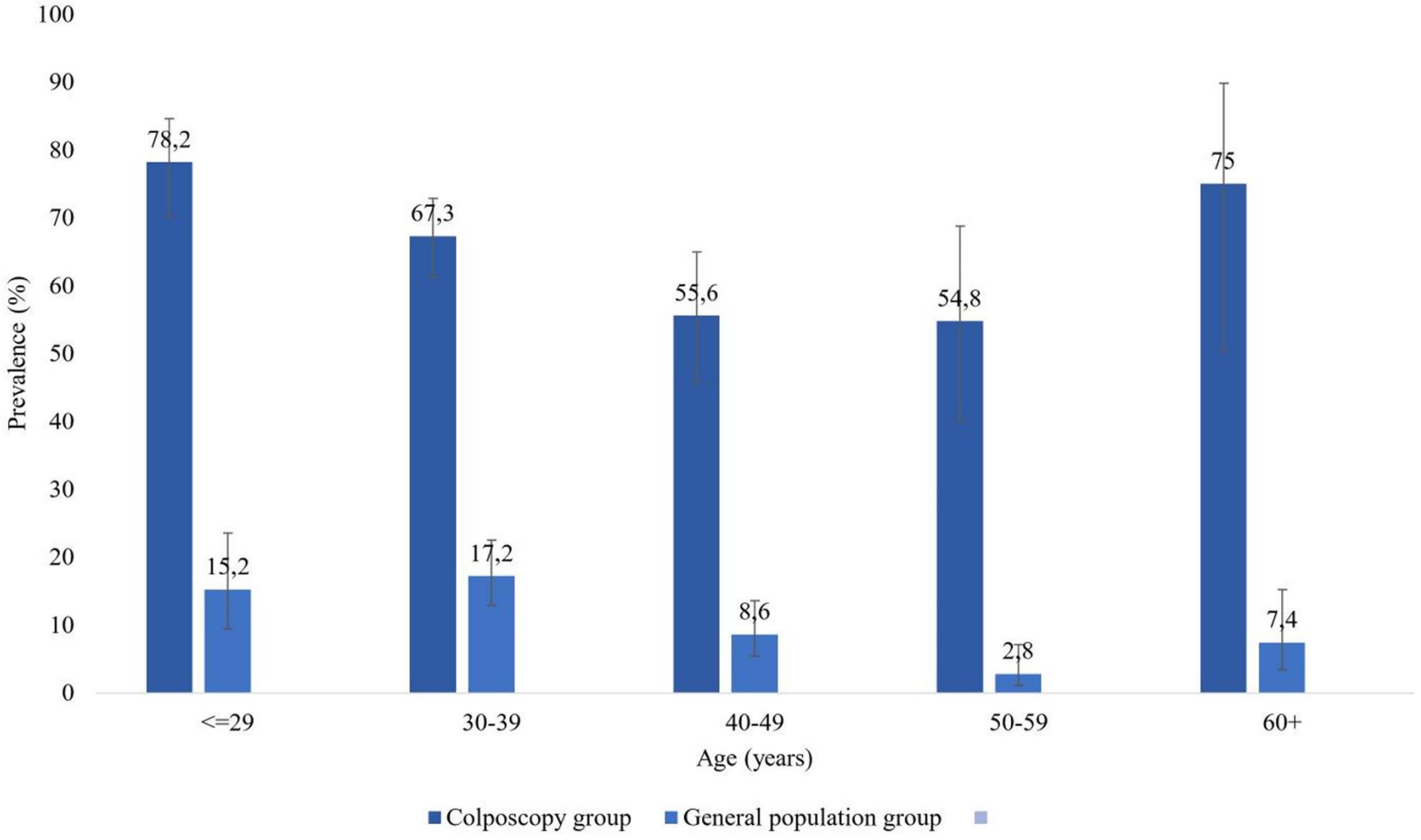
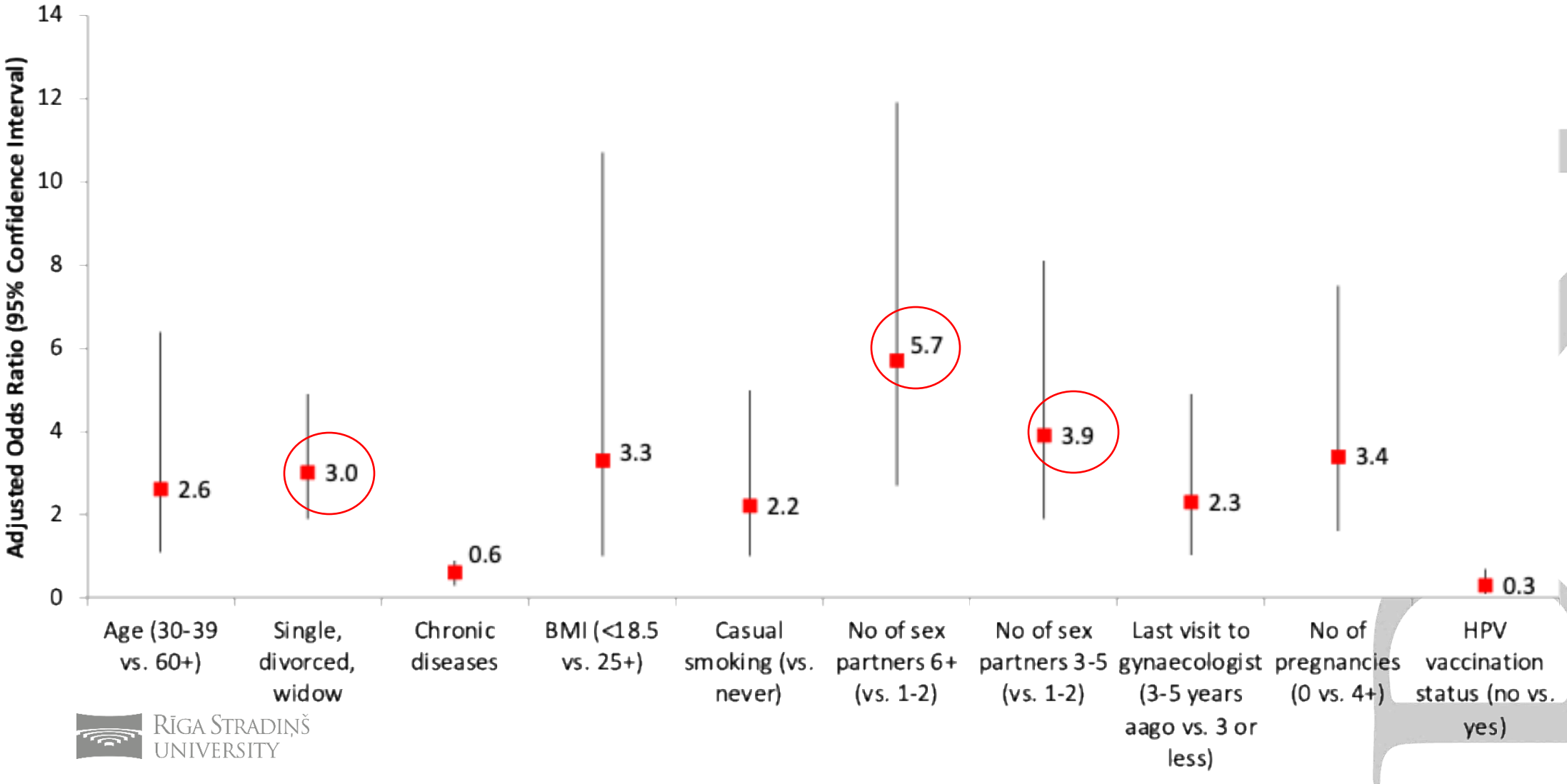
HPV prevalence



Results – general population group



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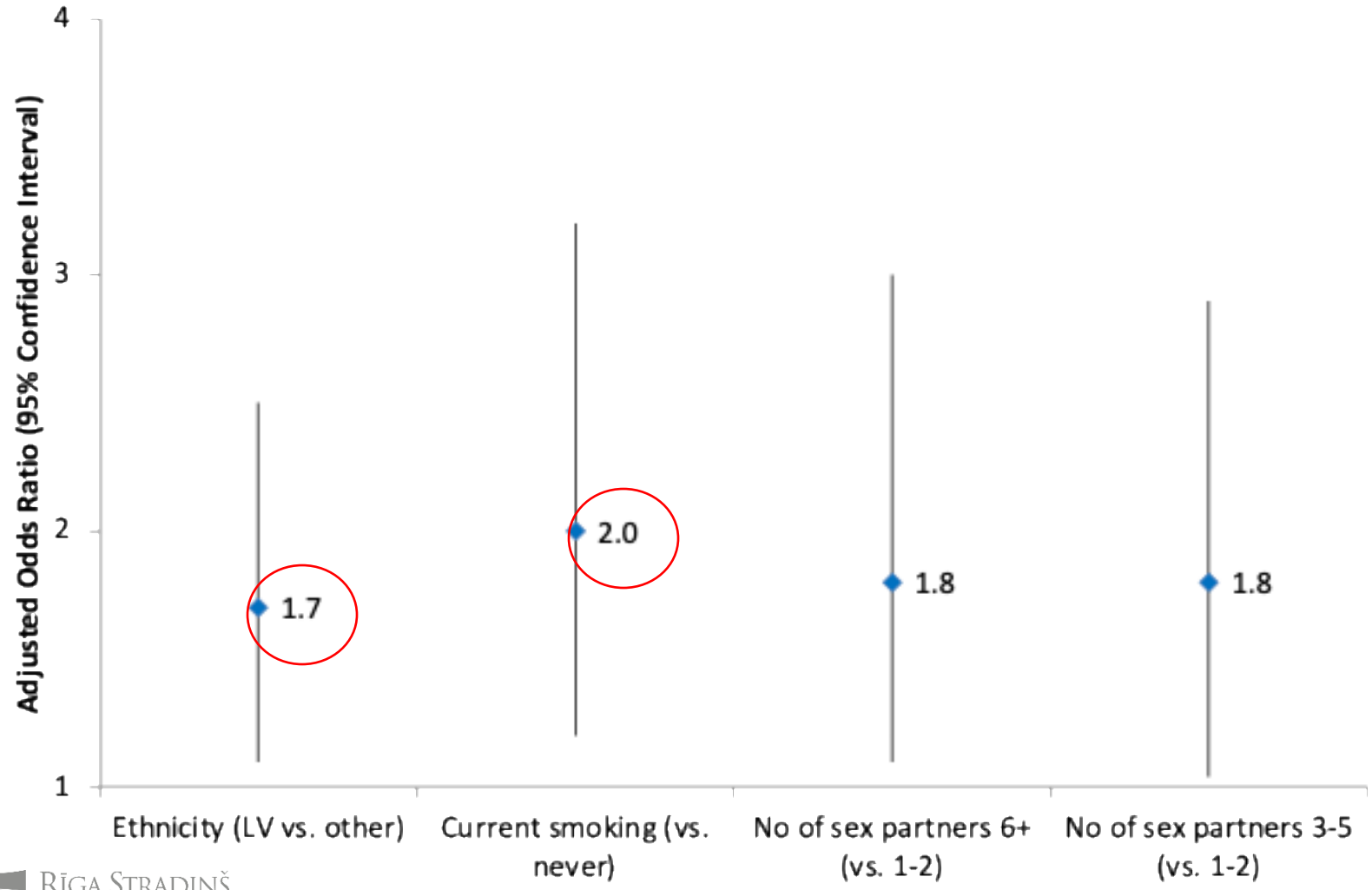
Results – colposcopy group



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Conclusions

- In Latvia, the burden of HR-HPV infection is comparable to that observed in other European Union countries.
- HR-HPV positivity in Latvia is strongly associated with sexual and other health-related behaviors.

Thank you!

anda.kivite-urtane@rsu.lv

https://www.rsu.lv/en/institute-public-health