

# OVERALL PERFORMANCE OF THE BD ONCLARITY™ HPV ASSAY IN WOMEN ≥25 YEARS ENROLLED IN THE U.S. REGISTRATIONAL TRIAL

Thomas C Wright, Jr<sup>1</sup>, Mark H Stoler<sup>2</sup>, Charles K Cooper<sup>3</sup>, Karen Eckert<sup>3</sup>, Karen Yanson<sup>3</sup>, Valentin Parvu<sup>3</sup>, and Salma Kodsi<sup>3</sup>

<sup>1</sup>Columbia University, <sup>2</sup>University of Virginia, <sup>3</sup>BD Life Sciences

*The BD Onclarity™ HPV Assay is CE-marked in the EU; however, this product is not approved for clinical diagnostic use in the United States and several other global markets. Contact your local sales representative for availability.*

# BD Onclarity US Study

## *Disclosures*

- Drs. Wright and Stoler served as pathologists for the study and are consultants and speakers for BD Life Sciences
- Other authors are employees of BD Life Sciences
- Study was funded by BD Life Sciences

# BD Onclarity US Study

## *Objectives*

- In women  $\geq 21$  yrs of age with ASC-US
  - Evaluate Onclarity as a test to determine the need for referral to colposcopy*
  - Evaluate genotyping for 16, 18, 45 with Onclarity*
- In women  $\geq 30$  yrs of age
  - Evaluate Onclarity as an adjunctive test to be utilized with cytology (e.g., "cotesting")*
  - Evaluate genotyping for 16, 18, 45 with Onclarity*

# BD Onclarity US Study

## *Additional objectives*

- Assess the performance of Onclarity as a primary screening test
- Evaluate the clinical utility of broader genotype information provided by Onclarity for the identification of cervical disease and abnormal cytology classification

# Onclarity HPV Assay

- 3-well assay with 9 HPV genotype readouts
- Type-specific PCR for HPV E6 or E7 DNA
- Human  $\beta$ -globin control (IC) in each well

**G1**

- HPV 16
- HPV 18
- HPV 45
- IC

**G2**

- HPV 33, 58
- HPV 31
- HPV 56, 59, 66
- IC

**G3**

- HPV 51
- HPV 52
- HPV 35, 39, 68
- IC

# BD Onclarity US Study

## *Overall description*

- Three year longitudinal study started September 2014 and is expected continue until 2019
- 31 clinical sites in 18 different states
- **33,858 subjects, >6000 with colpo & CxBx**
- Two specimens: SP (1<sup>st</sup>) and TP (2<sup>nd</sup>)
- **SP:** Cytology (manual & masked to HPV) & Onclarity
- **TP:** hc2, sequencing, plus saved for additional studies

# BD Onclarity US Study

## *METHODS – Colposcopy examination*

- Women with  $\geq$ ASC-US or HPV (+) (***either Onclarity or hc2***) are referred to colposcopy
- Random subset of cytology and HPV (-) women are referred to colposcopy for VBA
- Colposcopists ***blinded*** to HPV and cytology
- ECC and biopsy of all lesions and acetowhite areas (*random biopsy at SCJ if none present*)
- Endpoint - adjudicated pathology review, ***blinded***

# BD Onclarity US Study

## *Demographics of enrolled subjects*

Characteristic	Overall
Number	33,400
Mean Age (yrs)	38.6
Race	
White	26,085 (78.1%)
African American	6,306 (18.9%)
Asian	459 (1.4%)
Other	550 (1.6%)
Hispanic or Latino	6,500 (19.5%)



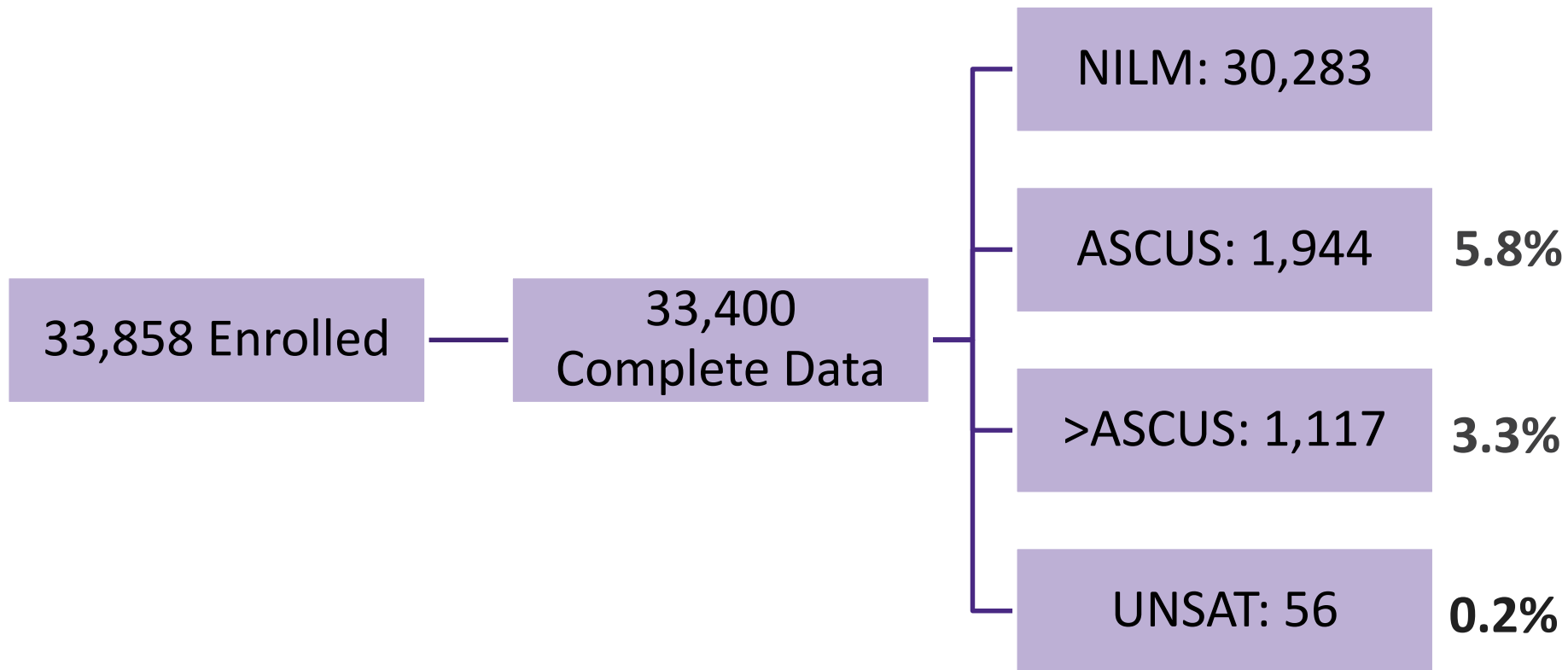
# BD Onclarity US Study

## *Demographics of enrolled subjects*

Characteristic	Overall
Postmenopausal	5,904 (17.7%)
HPV vaccinated	3,042 (9.1%)
Abnormal Pap in last 5 yrs	4,749 (14.2%)
Colposcopy in last 5 yrs	2,990 (9.0%)

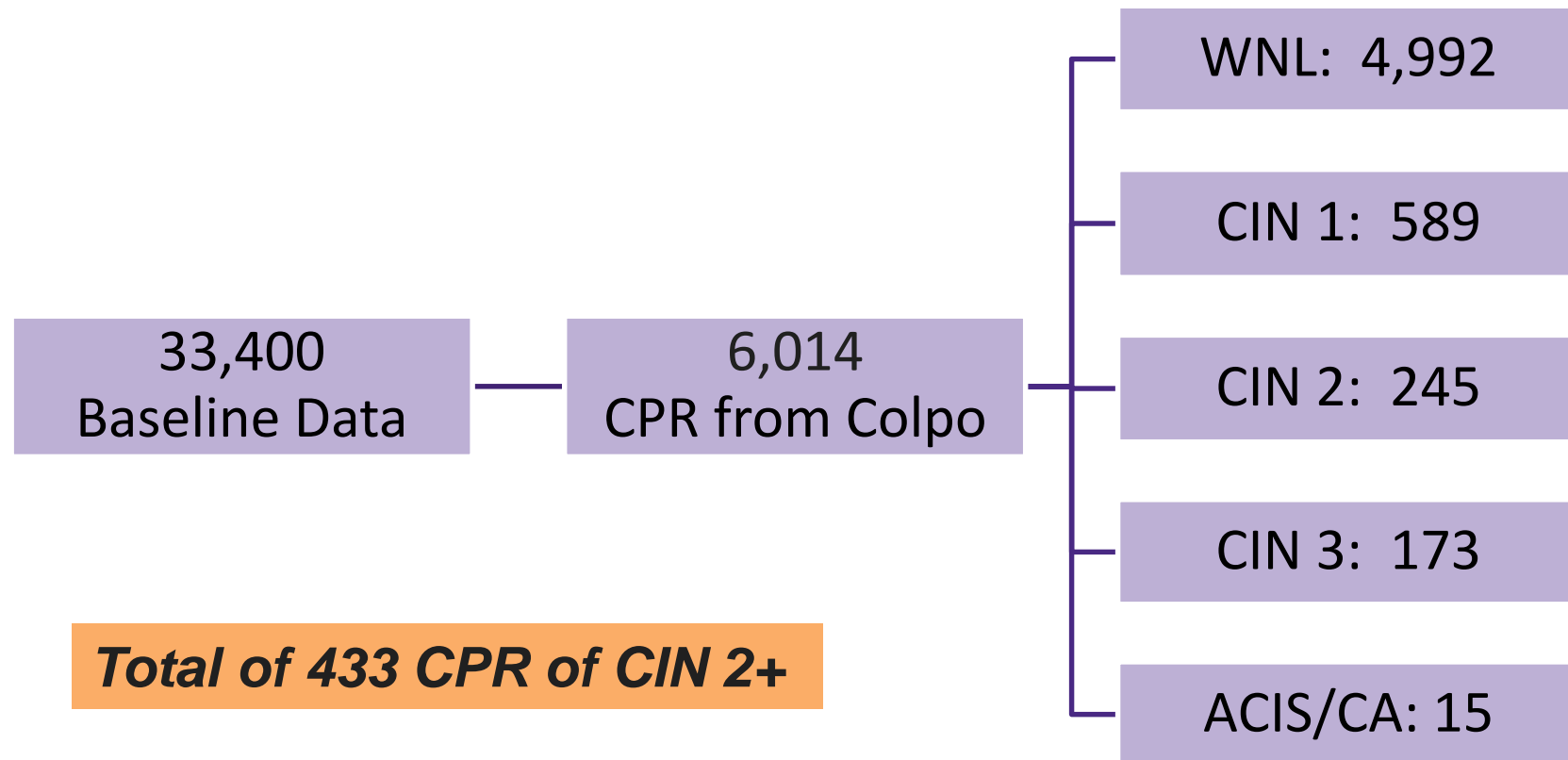
# Subject Enrollment

*Results of baseline cytology*



# Subject Enrollment

*Consensus pathology results (**CPR**) from colposcopy*



# BD Onclarity US Study

Performance using a **CIN 3+** endpoint

Measure	Crude Estimates		VBA Estimates	
	Onclarity	Pap	Onclarity	Pap
<b><i>Sensitivity</i></b>	<b>93%</b>	<b>59%</b>	<b>78%</b>	<b>50%</b>
<b><i>Specificity</i></b>	<b>48%</b>	<b>64%</b>	<b>89%</b>	<b>92%</b>
<b><i>PPV</i></b>	<b>6%</b>	<b>5%</b>	<b>6%</b>	<b>5%</b>
<b><i>NPV</i></b>	<b>99%</b>	<b>98%</b>	<b>99%</b>	<b>99.5%</b>

# BD Onclarity US Study

Performance using a **CIN 3+** endpoint

Measure	Crude Estimates		VBA Estimates	
	Onclarity	hc2	Onclarity	hc2
<b><i>Sensitivity</i></b>	<b>93%</b>	<b>90%</b>	<b>78%</b>	<b>76%</b>
<b><i>Specificity</i></b>	<b>48%</b>	<b>49%</b>	<b>89%</b>	<b>89%</b>
<b><i>PPV</i></b>	<b>6%</b>	<b>5%</b>	<b>6%</b>	<b>5%</b>
<b><i>NPV</i></b>	<b>99%</b>	<b>98%</b>	<b>99%</b>	<b>99%</b>

# BD Onclarity US Study

Performance using a **CIN 3+** endpoint

Measure	Crude Estimates		VBA Estimates	
	Onclarity	cobas <sup>1</sup>	Onclarity	cobas <sup>1</sup>
<b><i>Sensitivity</i></b>	<b>93%</b>	<b>92%</b>	<b>78%</b>	<b>75%</b>
<b><i>Specificity</i></b>	<b>48%</b>	<b>57%</b>	<b>89%</b>	<b>90%</b>
<b><i>PPV</i></b>	<b>6%</b>	<b>7%</b>	<b>6%</b>	<b>7%</b>
<b><i>NPV</i></b>	<b>99%</b>	<b>99.5%</b>	<b>99%</b>	<b>99%</b>

<sup>1</sup>Castle et al. Lancet Oncology 2011

# BD Onclarity US Study

## *Conclusions*

- Large registration trial with considerable power to clinically validate the Onclarity HPV test
- The sensitivity, specificity, PPV and NPV using both a CIN 2+ and a CIN 3+ endpoint of Onclarity run with SurePath in women 25+ years is comparable to that of hc2 run with ThinPrep
- Sensitivity of Onclarity is considerably greater than that of cytology