HPV 31 poses a higher risk of precancer as compared to HPV 18.¹

You screen for HPV 18, so why not HPV 31?

Meet Tianna*

35 years old

ПΙп

- No medical conditions
- Lives a healthy lifestyle and believes in the importance of cervical cancer screening
- Has had Pap smears every 3 years from age 21 to 29 and cotesting with HPV and Pap every five years starting at age 30

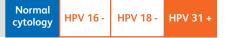
Cervical cancer screening history.

- Normal cytology
- Negative for HPV 16 and 18
- Negative for high-risk HPV pool

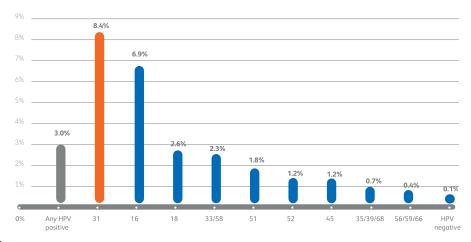
Current results:

- Normal cytology
- Negative for HPV 16 and 18 and all other high-risk types
- Positive for HPV 31

"I was worried when I first found out that I had HPV 31, one of the most risky types of HPV, and what it meant for my risk of cervical precancer. But my OB/GYN was very supportive and we were quickly able to discuss a plan."*



Immediate CIN3+ risk by HPV type in women \geq 30 years with normal cytology¹



Adapted from Stoler MH et al. Gynecol Oncol. 2019,153(1):26-33.

- Based on Tianna's cervical cancer screening results, what would you do?
 - Follow-up in 1 year Follow-up in 3 years Colposcopy/biopsy Management App
 - I'm not sure, HPV 31 is new to me

*Names and/or medical information presented on this page do not represent real people or clinical information.



What does the data say?

In a multicenter clinical trial involving 33,000 patients, the immediate risk of having precancer or cancer among women aged \geq 30 with normal cytology and positive for HPV 31 was 8.4%.1

This is similar to the risk associated with HPV 16 and is 3 times higher than the risk associated with HPV 18.1

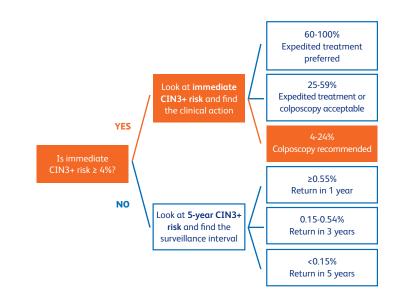
- Use the ASCCP Risk-Based



What do the guidelines say?

The 2019 ASCCP Risk-Based Management Consensus Guidelines for the management of cervical cancer screening abnormalities recommend 1 of 6 clinical actions, according to the risk of cervical precancer and cancer (CIN3+ risk).²

Tianna's personalized immediate CIN3+ risk is 8.4%¹ which calls for colposcopy as next step, based on the ASCCP guidelines.²



Why is individually identifying HPV 31 better for your patients?

HPV 31 poses a higher risk of precancer as compared to HPV 18 and should be identified individually.¹

Not all HPV tests are the same.

BD Onclarity[™] HPV Assay is the only FDA-approved HPV test that provides an individual result for HPV 31.^{1,3-8} Most HPV tests cannot identify which HPV type is causing the infection apart from HPV 16 and 18, and group the other high-risk types (including HPV 31) in one pooled result.⁹ This may underestimate the true CIN3+ risk due to HPV 31.^{1,10} You screen for HPV 16 and 18, so why not HPV 31? Learn more on womens-health-solutions.bd.com



Different HPV types carry different risk.

By using a test that can individually identify more HPV types, including HPV 31, **you offer your patients a more precise cervical cancer risk assessment** compared to an HPV test with grouped results.¹¹

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ASCCP, American Society for Colposcopy and Cervical Pathology; CIN3+, cervical intraepithelial neoplasia grade 3, adenocarcinoma in situ, or cancer; FDA, Food and Drug Administration; HPV, human papillomavirus.

References: 1. Stoler MH et al. *Gynecol Oncol.* 2019;153(1):26–33. 2. Perkins RB et al. *J Low Genit Tract Dis.* 2020;24(2):102–31. 3. BD Onclarity[™] HPV Assay US Package Insert. [8089894]. 4. Aptima[™] HPV Assay US Package Insert. 5. Cervista[™] HPV HR US Package Insert. 6. cobas[®] HPV for 4800 System US Package Insert. 7. cobas[®] HPV for 6800/8800 System US Package Insert. 8. digene[®] HC2 High-Risk HPV DNA Test Package Insert. 9. Bonde J et al. *J Low Genit Tract Dis.* 2020;24(1):1–13. 10. Egemen D et al. *J Low Genit Tract Dis.* 2020;24(2):132–43. 11. Bonde J et al. *J Low Genit Tract Dis.* 2021;25(1):27–37.



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