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### PapU29 study: New strategy for cervical cancer screening using an urine HPV testing in general population, cost-effectiveness in 341,534 non-attendees women

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The PapU29 study was designed as an alternative strategy for cervical cancer screening. In Europe, cytology-based screening coverage varies from 40-80%; it is around 55% in France and down to 25% in some areas. The aim of screening programs is to reach 80% coverage. Since Human Papillomavirus (HPV) is found in almost all cervical cancer and pre cancer lesions, screening strategies based on HPV testing are proposed. To facilitate access to these tests, vaginal self-sampling has been largely studied. Therefore, we developed an urine HPV test, with more than 80% concordance with cytology and vaginal self-sample testing. Our urine HPV test has been proposed at home in Finistère to 12,498 non-attendees women, with no cytology over 3 years (2008-2010); among them 3078 (28%) sent by mail their urine sample to our lab for testing; 764 (28%) were found HPV-positive and 51 among them had abnormal cytology (8%) with 12 pre cancer CIN2+ lesions and 1 cervical cancer (1/5000 expected). A five year follow-up showed no pre cancer lesions in urine HPV-negative women (n=687). All cancer and pre cancer women were treated and no relapse was observed. Evaluation of this strategy in Finistère (n=124,279) and Gironde (n=217,255), west and southwest areas in France, avoided cancer accounted to 5.5 and 31.5 in the cytology group and the urine HPV group respectively, costs per screened CIN2+ woman would be 44,879€ and 16,910€ respectively in these groups. This cost could be reduced to 7424€ if the urine HPV strategy is restricted to 35-49 old women.

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### High prevalence of anti-hepatitis E virus among Egyptian blood donors

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This study evaluated the seroprevalence of hepatitis E virus among blood donors attending blood transfusion Center of Suez Canal University Hospital from March to September, 2010. Four hundred eighty eight (488) subjects which consisted of 137 Anti-Hepatitis C Virus positive donors, 35 Hepatitis B surface antigens positive donors and 316 blood donors who were negative Hepatitis B surface antigen, Anti-Hepatitis C Virus and HIV were included in this study. Anti-Hepatitis E virus (IgG and IgM) was detected in 17.7, 28.57 and 26.28% of blood donors negative for Hepatitis B surface antigen (HBsAg) and Anti-Hepatitis C Virus, Hepatitis B surface antigen (HBsAg) positive and Anti-Hepatitis C Virus positive donors, respectively. No significant (P>0.05) association was found between anti- Hepatitis E Virus positivity and Hepatitis B surface antigen (HBsAg) positivity and anti-Hepatitis C virus) positivity subjects. The overall prevalence of anti-Hepatitis E virus antibodies (IgG and IgM) was 20.9% (102/488). Seroprevalence increased significantly with age from 8.3% in subjects below 20 years of age, 16.94% in 20-34 years of age, 34.5% in 35-49 years of age and a slight decline of 33.3% over those of 50 years of age. All anti-HEV antibodies samples were negative for Hepatitis E Virus RNA by reverse transcriptase polymerase chain reaction (RT-PCR) method. Even though, seroprevalence of hepatitis E virus antibody among blood donors in our study in Ismailia, Egypt is high, transfusion-associated with hepatitis E infection still needs further investigation.

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