EUROGIN 2023

INTERNATIONAL MULTIDISCIPLINARY HPV CONGRESS

PRELIMINARY PROGRAM

of Main Congress (February 8-11)

Suject to change

MSS – MAIN SCIENTIFIC SESSIONS

Wednesday, February 8

HPV and pregnancy

Chairs: K. Louvanto (Finland) • E. Siegler (Israel)

Room 0B
8.30 • 10.00

This session will focus on the most common concerns that women in childbearing age have on HPV infection and its consequences. The session will cover the current knowledge on the HPV role in reproductive life, during pregnancy and in children. We will also have a round table discussion on HSIL treatment options for pregnant women.

Coffee Break — 10.00 • 10.30

Prognostic biomarkers for cervical HSIL progression

Chairs: K. Louvanto (Finland) • B. Nedjai (UK)

Room 0B
10.30 • 12.00

This session will highlight strategies that could identify women with a progressive precancer cervical lesion to immediate referral to colposcopy compared to follow-up testing of women with intermediate risk. These strategies are needed to maximize the benefits of cervical cancer screening and follow-up testing while decreasing the potential harm as cost of unnecessary colposcopy referrals and treatments.

Lunch Break — 12.00 • 13.30

New guidelines for validation of HPV tests for cervical cancer screening

Chairs: M. Arbyn (Belgium) • M. Poljak (Slovenia)

Room 0B
13.30 • 15.00

Coffee Break — 15.00 • 15.30

Monitoring HPV vaccine impact in males (including in MSM programmes -data in these are picking up)

Chairs: A. Giuliano (USA) • J. Palefsky (USA)

Room 0B
15.30 • 17.00

MSS - MAIN SCIENTIFIC SESSIONS

Thursday, February 9

Scientific approaches towards improving the cervical cancer elimination strategies

Chairs: J. Dillner (Sweden) • E. Franco (Canada) • M. Lehtinen (Finland)

Room 0B
8.00 • 9.30

Debate on controversial topics

Chairs: E. Franco (Canada) • T. J. Palmer (UK)

Room 0B
9.30 • 11.00

Debate sessions have been a popular offering in EUROGIN congresses since the 1990s. Pairs of leaders in the field capture the arguments on opposing sides of controversial or hot topics in HPV science and its practical aspects, such as vaccination, cervical cancer screening, and disease etiology. They present their arguments and then debate each other. The session in 2022 will showcase debates between camps on five key areas: (i) clinical utility of HPV genotyping, (ii) adequacy of single-dose vaccination, (iii) VIA vs. HPV for cervical cancer screening in low resource settings, (iv) value of biomarkers for primary screening, and (v) feasibility of ending cervical cancer screening.

Self-sampling in routine practice, operational and technical issues

Chairs: TBC

Room 0B
14.00 • 15.30

Coffee Break

15.30 • 16.00

Prevention of cervical cancer among people living with HIV

Chair: A. Giuliano (USA)

Room 0B
16.00 • 17.30

Women living with HIV are at elevated risk of acquiring oncogenic HPV infections, having those infections persist, and progress to cervical pre-cancer and cancer. Unfortunately, the performance of tests utilized among women without HIV to screen for cervical cancer and to treat pre-cancer lesions perform sub-optimally among women living with HIV. Current research is focused on tailoring these interventions for women living with HIV in a variety of different geographic regions. Also needed are interventions to improve CIN treatment outcomes among women living with HIV.

HPV and host methylation as triage tools for cervical cancer screening in different clinical contexts

Chairs: M. Clarke (USA) • C. Meijer (Netherlands)

Room 0B
17.30 • 19.00

MSS - MAIN SCIENTIFIC SESSIONS

Friday, February 10

VALGENT / VALHUDES

Chairs: M. Arbyn (Belgium) • C. Cocuzza (Italy)

Room 0B
8.00 • 9.30

Coffee Break — 9.30 • 10.00

Impact of HPV vaccine on cancer

Chairs: J. Lei (Sweden) • P. Sasieni (UK)

Room 0B
10.00 • 11.30

HPV vaccination has been approved to be highly effective. In this session, we will gather researchers from six countries who will present the latest updates regarding the impact of HPV vaccination against cancer. We will address the evidence on the already observed impact from trials, routine vaccination programmes as well as modelling results focusing on the potential scale of the impact in terms of the current strategies.

Primary self-sampling strategies: experience and evidence

Chairs: H. Berkhof (Netherlands) • J. Dillner (Sweden)

Room 0B
14.30 • 16.00

There is a growing interest in HPV testing on self-collected samples (HPV self-sampling). Studies have shown that women find HPV self-sampling more convenient, less embarrassing, less uncomfortable, and less painful than clinician-based sampling. Besides, HPV self-sampling is expected to increase the coverage of screening and can be maintained during the Covid19 pandemic. Several countries have already implemented HPV self-sampling as a primary screening option and other countries are considering a more prominent role for self-sampling in their programs. In this session, we share experiences with (primary) self-sampling, how were issues solved, and present evidence on the performance of self-sampling in different settings.

SS - SCIENTIFIC SESSIONS

Wednesday, February 8

Criteria for HPV tests validation protocols for ASCUS triage and for post-treatment monitoring

10.30 • 12.00

Chairs: K. Cuschieri (UK) • M. Poljak (Slovenia)

Protocols for clinical validation of HPV tests for primary cervical cancer screening indication are well established and widely accepted in HPV community, in contrast to other indications for HPV testing. First part of the session will review past, present and future challenges of validation protocols for primary cervical cancer screening indication using clinician-taken cervical specimens, self-samples and urine samples. Second part of the session will review clinical rationale for the use of HPV testing for ASCUS triage indication followed by description of proposed criteria for HPV tests validation protocols for this important indication. Third part of the session will review clinical rationale for use of HPV testing for detection of residual disease after local surgical treatment ("test of cure") followed by description of proposed criteria for HPV tests validation protocols for post-treatment monitoring.

Transmission: role of the male partner

13.30 • 15.00

Chairs: E. Franco (Canada) • M. Goodman (USA)

Test of cure: strategies for the follow up of women treated for cervical intraepithelial neoplasia

16.45 • 18.15

Chairs: C. Cocuzza (Italy) • K. Cuschieri (UK)

SS - SCIENTIFIC SESSIONS

Thursday, February 9

New screening algorithms in European countries

8.00 • 9.30

Chairs: M. Arbyn (Belgium) • P. Hillemanns (Germany)

Molecular triage of HPV-positive women

9.30 • 11.00

Chairs: M. Arbyn (Belgium) • C. Cocuzza (Italy)

Concomitant screening and vaccination

9.30 • 11.00

Chairs: M. Almonte (France) • M. Elfström (Sweden)

SS - SCIENTIFIC SESSIONS

Thursday, February 9

Evolution of HPV vaccination schedules - from evidence to public health impact

14.00 • 15.30

Chairs: S. Franceschi (Italy) • M. Jit (UK)

The pace of introduction of HPV vaccine is stagnating, the coverage low in many countries and the WHO 2030 target of 90% coverage in danger. The present session will provide an overview of the evidence and considerations which led WHO to endorse the off-label use of a single-dose in girls included in HPV vaccination for routine and multi age cohort (MAC) catch-up. On-going efforts to accumulate additional information on the efficacy and durability of different HPV vaccine options will also be highlighted.

Tumour HPV status and implications for survival outcomes in cervical and non-cervical disease

14.00 • 15.30

Chairs: S. Arroyo Mühr (Sweden) • K. Cuschieri (UK)

While it is well established that HPV status is strongly associated with clinical outcomes in oropharyngeal cancer, increasing evidence suggests that this phenomenon is consistent in other tumour types; this is reflected in the recent WHO update on gynae cancer classification that advises cervical tumours should be referred to as “HPV independent” or “HPV associated”. In this session, the basic molecular characteristics of HPV associated and HPV independent neoplasms will be discussed in addition to optimal and evolving methods to determine HPV status as well as the implications and challenges of using HPV status for clinical management and treatment decisions.

Coffee Break 15.30 • 16.00

Quality assurance and validation of primary, triage testing and collection methods

16.00 • 17.30

Chairs: H. Berkhof (Netherlands) • K. Cuschieri (UK)

The implementation and evolution of cervical screening programmes based on molecular HPV testing continues apace. To ensure tests and processes are fit for purpose before implementation - and in perpetuity - validation and quality monitoring of the end-to-end process is essential. This session will benefit from perspectives from laboratory experts, cancer epidemiologists and screening teams. Country specific approaches to quality processes will be discussed as will the perspectives of laboratory network(s). The challenges of validation given increased use of self-sampling and the greater emergence of immunised populations in screening will also be covered.

Microbiome

16.00 • 17.30

Chairs: A. Lev Sagie (Israel) • A.B. Moscicki (USA)

Digital interventions to increase HPV vaccination

17.30 • 19.00

Chairs: G. Woodall (USA) • G. Zimet (USA)

HPV prevention and screening in vulnerable (immunosuppressed and transgender) populations

17.30 • 19.00

Chairs: A. D’Souza (USA) • A.B. Moscicki (USA)

SS - SCIENTIFIC SESSIONS

Friday, February 10

HPV Vaccination in adult women

Chairs: M. Elfström (Sweden) • M. Kyrgiou (UK)

8.00 • 9.30

Benefits and harms of HPV screening

Chairs: C. Bouchard (Canada) • T. Malagon (Canada)

8.00 • 9.30

All screening programs entail harms as well as benefits. A core principle of modern screening programs and guidelines is that the overall benefit of the screening program should outweigh its potential harms. However, the estimation and the communication of the balance of harms and benefits can be in practice complex. In this session we shall review harms and benefits of cervical cancer screening in the context of populations highly HPV vaccinated, examine the balance of harms and benefits for future anal cancer screening, and finish with related issues arising when implementing HPV-based screening, including methods for estimating the balance of benefits and harms of screening algorithms, and developing communication tools on the benefits and harms of screening for shared decision making.

Coffee Break 9.30 • 10.00

New triage methods

Chairs: F. Carozzi (Italy) • J. Cuzick (UK)

10.00 • 11.30

Advanced molecular methods now allow better characterization of HPV infections detected by screening and enable optimization of cervical screening algorithms to differentiate women carrying HPV infection at lower or higher risk of precancerosis and cervical cancer.
In this session, we will discuss and explore issues related to their introduction into screening programs to enable increasingly accurate risk stratification.

Screening and vaccination implementation in Eastern and Central Europe - A part of Europe with the highest burden of cervical cancer

Chairs: H. Berkhof (Netherlands) • M. Poljak (Slovenia)

10.00 • 11.30

Burden of cervical cancer in Eastern and Central Europe is unproportionally higher than in other parts of the Europe, both in term of incidence and mortality. In the session latest available epidemiological data concerning burden of cervical cancer in the region will be presented followed by reviews of cervical cancer screening practices and implementation as well as HPV vaccine implementation in Eastern and Central Europe. In addition, implementation status of national organized HPV-based cervical cancer screening of two pioneering countries of HPV-based cervical cancer screening in the region (Albania and Montenegro) will be presented followed by presentation on HPV vaccine implementation in Hungary – a country with the highest HPV coverage rate in the region.

Lunch Break 11.30 • 13.15

SS - SCIENTIFIC SESSIONS

Friday, February 10

The role of obesity in cervical cancer screening and management

Chair: M. Clarke (USA)

13.15 • 14.15

Obesity is a worldwide public health challenge, increasing the risk for several cancers including cervical cancer. Prior research has shown that individuals with obesity have a higher risk of cervical cancer, but a lower risk of precancer compared to those with normal BMI, which is thought to be at least in part explained by missed detection of precancers. The current session addresses the impact of obesity on the effectiveness of cervical cancer screening and management.

Who should be referred for high-resolution anoscopy (HRA)? And what if HRA is not available?

Chairs: L. Abramowitz (France) • A. Nyitray (USA)

14.30 • 16.00

Biomarkers are under development to support decision-making about who should be referred to HRA. This session will first provide a state of the science overview about biomarkers to support anal precancer screening programs. However, there will be jurisdictions that will not have enough skilled anoscopists for many years, if ever. Clinicians in these areas cannot use biomarkers for precancers if positive results cannot be followed up with HRA. What are screening options for these clinicians who want to detect an anal malignancy as early as possible?

Coffee Break 16.00 • 16.30

HPV latency

Chair: A.B. Moscicki (USA)

16.30 • 18.00

Extended HPV genotyping in screening

Chairs: J. Bonde (Denmark) • E. Franco (Canada)

16.30 • 18.00

Next generation HPV based sequencing: what have we learned and what's next?

Chairs: K. Cuschieri (UK) • L. Mirabello (USA)

18.00 • 19.30

HPV detection using rapid next generation sequencing (NGS) technologies can provide insight into the molecular biology, epidemiology and clinical trajectory of HPV infection. In this session we reflect on recent developments and applications of NGS and how this has furthered our understanding of HPV in the context of anogenital and head and neck disease.

Risk stratification in the follow up

Chairs: F. Carozzi (Italy) • N. Wentzensen (USA)

18.00 • 19.30

Women treated for high grade lesions and women HPV positive/colposcopy negative represent an at-risk population compared to the routinely screened population. So, a combination of well-known risk factors associated to new Molecular markers could allow a better risk stratification of these women. Balancing the benefits of robust follow-up with the harms of over-scrutiny is particularly challenging. In this session we will review the international experience from real-life program and reflecting on prevailing knowledge "gaps". We will consider modalities that may improve risk stratification and thereby optimize management in the future.

CS - CLINICAL SESSIONS

Wednesday, February 8

Management of CIN Chair: E. Paraskevaidis (Greece)	15.30 • 16.45

CS - CLINICAL SESSIONS

Thursday, February 9

Colposcopy in HPV era Chairs: C. Bouchard (Canada) • P. Hillemanns (Germany)	9.30 • 11.00

CS - CLINICAL SESSIONS

Friday, February 10

VaIN management Chairs: M. Hampl (Germany) • M. Preti (Italy)	8.00 • 9.30
Coffee Break	9.30 • 10.00
VaIN update Chairs: : M. Bleeker (Netherlands) • J. Bornstein (Israel)	10.00 • 11.30

YSPC - YOUNG SCIENTISTS PITCH CONTEST

Chair: J. Bonde (Denmark)

AIM of session : To have 6 outstanding young researchers compete in a research presentation competition.

Format

- Welcome by the session presenter(s), rules & process
- 5 min segment presentation by the 6 selected presenters, including shifts
- Deliberation by the Jury
- Presentation of the Winner

Evaluation set-up

Each juror gets a pre-printed sheet for the 6 contestants

The presentations are given points 0-10 for the following elements for a max point of 50

- Adherence to time
- Clarity of project aim
- Clarity of data presentation/ conclusions/ perspectives of research
- Format of presentation
- X-factor

By conclusion of each presentation the Jury hands in the score sheet to the assistant for ranking. By the end the Jury will have 5 min to deliberate whether their assessment stands, and whether they agree to the Winner of the competition.

HN – HPV AND HEAD & NECK FORUM

Coordinators: K. Lang Kuhs (USA) • J. P. Klussmann (Germany)
H. Mirghani (France) • E. Rettig (USA)

The EUROGIN HPV and Head & Neck Cancer Forum highlights recent advances and areas of active research in the field of HPV-related head and neck cancers. This year's Forum features talks on epidemiology and prevention, HPV-OPC screening studies, updates on current management, innovations in surveillance and new discoveries of the molecular landscape of HPV-OPC tumors. New for this year, the Forum will also feature several panel discussions exploring the potential promise and peril of screening, surgery versus chemoradiation therapy and risks versus benefit of using liquid biopsy for HPV-OPC surveillance.

Thursday, February 9

Screening for HPV-OPC Chairs: K. Lang Kuhs (USA) • T. Waterboer (Germany)	14.00 • 15.30
• Updates on 2 US-based HPV-OPCscreening studies	**K. Lang Kuhs (USA)**
• Prevalence of HPV biomarkers among screened populations	**A. D'Souza (USA)**
• Biomarker-based screening trial updates	**T. Waterboer (Germany)**
• Modeling serologic screening for HPV-OPC	**H. Robbins (France)**
• Prediagnostic liquid biopsy	**D. Faden (USA)**
• PANEL: Pros vs. Cons of screening for HPV-OPC	**E. Sturgis (USA)**
	vs. K. Lang Kuhs (USA)
Coffee Break	15.30 • 16.00
Basic science Chair: S. Virani (France)	16.00 • 17.30
• Recurrent Respiratory Papillomatosis: Updates	**S. Pransky (USA)**
• HPV therapeutic vaccine trials	**A. Kejner (USA)**
• Cell plasticity in HPV-driven tumors	**J. Hess (Germany)**
• Single cell sequencing in HPV-OPC	**S. Puram (USA)**
• Granular stratification of OPC patients using standard H&E staining	**S. Klein (Germany)**
• Evaluation of HPV genome integration	**E. J. Speel (Netherlands)**
• Germline Genetics for risk of HPV-driven head and neck cancers	**S. Virani (France)**
Submitted papers Chair: K. Van Able (USA)	17.30 • 19.00

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Friday, February 10

Epidemiology and prevention of HPV-OPC Chair: E. Rettig (USA)	8.00 • 9.30
• HPV-OPC incidence trends	**A. Deshmukh (USA)**
• Oral HPV infection and HIV	**N. Osazuwa-Peters (USA)**
• Impact of tonsillectomy on risk of HPV-OPC	**J. D. Combes (France)**
• HPV vaccination for prevention of oral HPV infection	**A. Giuliano (USA)**
• What should be communicated to women with oncogenic genital HPV and their partners regarding the risk of oral viral transmission	**G. Barbara (Italy)**
• Patient priorities and concerns	**M. Windon (USA)**
Coffee Break	9.30 • 10.00
Management Chair: H. Mirghani (France)	10.00 • 11.30
• Outcomes beyond survival	**H. Starmer (USA)**
• Aggressive adjuvant radiation reduction after surgery for HPV-OPC	**D. Routman (USA)**
• ORATOR trials	**M. Patel (USA)**
• Overview of De-escalation strategies and potential of genomics for prediction	**M. Lechner (UK)**
• Neoadjuvant immunotherapy pre-CRT in HPV-OPC	**H. Mirghani (France)**
• PANEL: Surgery versus CRT for HPV-OPC	**C. Simon (Switzerland)** **vs. R. Haddad (USA)**
Lunch Break	11.30 • 13.15
Submitted papers Chair: J. Hess (Germany)	13.15 • 14.30
Molecular diagnosis and surveillance Chair: J. P. Klussmann (Germany)	14.30 • 16.00
• Prognostic implication of p16/HPV discordance	**L. Alemany (Spain)**
• Cell-free HPV DNA in urine	**C. Brenner (USA)**
• TTMV-HPV DNA for surveillance in the clinic	**E. Rettig (USA)**
• ctHPV-DNA: Techniques and their clinical utility	**N. Würdemann (Germany)**
• Randomized controlled trial of standard vs. liquid biopsy-based surveillance	**H. Mirghani (France)**
• PANEL: Pros vs. Cons of liquid biopsy for surveillance	**L. Mady (USA)** **vs. G. Hanna (USA)**

WS - SPECIALIZED WORKSHOP

Wednesday, February 8

Cervical cancer screening workshop

15.30 • 17.00

Coordinators: M. Elfström (Sweden) • P. Giorgi Rossi (Italy)
M. Rebolj (UK) • S. Van Dijk (Netherlands)

The workfield of cervical cancer screening is in full development. Due to tremendous efforts of researchers and researchgroups worldwide, we have already been able to achieve a lot in the field of innovation. In recent years, more evidence for new screening technologies has become available from scientific research. In order to achieve the objective of the WHO, it is important that research is implemented into cervical cancer screening programs. However, this implementation is not self-evident and can sometimes take quite a long time. By means of a discussion between researchers and clinicians, we want to provide more insight into this transition from research to implementation on the basis of 3 potential new screening technologies on the roadmap to eliminate cervical cancer: HPV-screening, self-sampling and methylation.

Introduction

P. Sasieni (UK)

An overview of the development of cervical cancer screening over the years, focusing on the achievements until now, in terms of absolute health gains and in terms of reduction and increase in inequities. And how further improvement can be reached by the introduction of (potential new) screening technologies.

HPV-based-screening PRO

H. Bogaards (Netherlands)

Research has shown that primary HPV screening can increase the sensitivity of screening programs. In addition HPV-testing may be accessible to more countries, as it is cheaper and easier to perform. And it's opening up opportunities for self-sampling and HPV-vaccinated cohorts. So, it's time to implement primary HPV screening everywhere to eliminate cervical cancer.

HPV-based-screening CON

U. Ivanus (Slovenia)

The time may be right scientifically, but then there are several practical obstacles that make it impossible to move quickly in certain countries. The Slovenian organized programme is coping with some unique challenges. Certain conditions must be met when implementing primary HPV screening.

Discussion

A discussion will be held with the participants of the workshop focusing on the conditions under which countries could successfully implement HPV-based screening.

WS - SPECIALIZED WORKSHOP

Wednesday, February 8

Cervical cancer screening workshop

15.30 • 17.00

Coordinators: M. Elfström (Sweden) • P. Giorgi Rossi (Italy)
M. Rebolj (UK) • S. Van Dijk (Netherlands)

Self-sampling PRO

TBC

Research in recent years gives strong indications that self-sampling can reach a significant part of the non-responder population of cervical cancer screening programs. Experiences from Sweden, especially since COVID19-times have shown great opportunities for self-sampling. Self-sampling is easy and reliable. Therefore, the time is right for the primary use of self-sampling in screening programs.

Self-sampling CON

A. Sargent (UK)

We need to move carefully on self-sampling, particularly in countries that have been operating a very efficient and quality-assured screening service for a long time. The early-adopter evidence is eye-opening in this respect. We will discuss the necessary mitigations, impact of lab-processes and what kind of research work needs to be prioritized. Not for every country, the time is right to introduce self-sampling.

Discussion

A discussion will be held with the participants of the workshop focusing on the conditions under which countries could successfully implement self-sampling.

Methylation PRO

C. Meijer (Netherlands)

Research in the field of biomarkers indicates that methylation as a triage method could increase the specificity of primary HPV screening programs. Introduction of primary HPV screening in several countries has shown that the sensitivity of the program increases, but at the same time the specificity decreases resulting in a higher proportion of unnecessary referrals. So, methylation shows enormous opportunities and the time is right to introduce methylation in the management of HPV positive women.

Methylation CON

S. Van Dijk (Netherlands)

To implement a new technique into organized screening programs, we need more than just research. For instance within the domains of equity, feasibility, acceptability, (balance of) desirable and undesirable effects, validation, CE-approval, high-throughput machines, trained professionals and cost-effectiveness. We cannot implement methylation in screening (yet).

Discussion

A discussion will be held with the participants of the workshop focusing on the conditions under which countries could successfully implement methylation.

COLPOSCOPY COURSE

Wednesday, February 8

Coordinators: J. Bornstein (Israel) • A. Singer (UK)

Opening J. Bornstein (Israel)	8.00 • 8.15
The normal cervix and the colposcopy examination A. Singer (UK)	8.15 • 9.00
Update in pathology and cytology for colposcopists S. Regauer (Austria)	9.00 • 9.45
Colposcopy of "abnormal" cervix, colposcopy terminology J. Bornstein (Israel)	9.45 • 10.30
Coffee Break	10.30 • 10.45
Management protocols of abnormal screening findings and the value of biomarkers J. Bonde (Denmark)	10.45 • 11.30
Treatment of cervical precancer and treatment's complications J. Bornstein (Israel)	11.30 • 12.15
Interactive session (What is your diagnosis) A. Singer (UK)	12.15 • 13.15
Course Summary A. Singer (UK)	13.15 • 13.30

LW – PROGRAMA WORKSHOP AEPCC

Presidenta: M. Ramírez

Comité científico:

A. Alba • J. De La Fuente • S. De Sanjosé • M. Del Pino • A. Torné

Organiza:

Asociación Española de Patología Cervical y Colposcopia

Viernes, 10 de Febrero	
Vacunación VPH J. De La Fuente	14.30 • 14.45
Cribado del cáncer de cérvix en España M. Ramírez	14.45 • 15.00
Patología vulvar premaligna Mª P. Cano	15.00 • 15.15
Patología anal premaligna M. Del Pino	15.15 • 15.30
Debate Modera: D. Andía	15.30 • 15.45
Charla magistral - Infección por VPH - Transmisión y latencia E. Franco	15.45 • 16.15
Preguntas Modera: S. De Sanjosé	16.15 • 16.30
Pausa Café	16.30 • 17.00
Charla magistral - Objetivo: eliminación cancer de cervix Modera: L. Bruni	17.00 • 17.30
Preguntas Modera: S. De Sanjosé	17.30 • 17.45
Presentación AEPCC-Guía A. Torné	17.45 • 18.00
Novedades en VPH/LSIL L. Fernández-Villarrenaga	18.00 • 18.15
Novedades en HSIL/AIS J. C. Quílez	18.15 • 18.30
Comité Clínico Moderan: M. Del Pino • A. Torné	18.30 • 19.15