EUROGIN

INTERNATIONAL MULTIDISCIPLINARY HPV CONGRESS

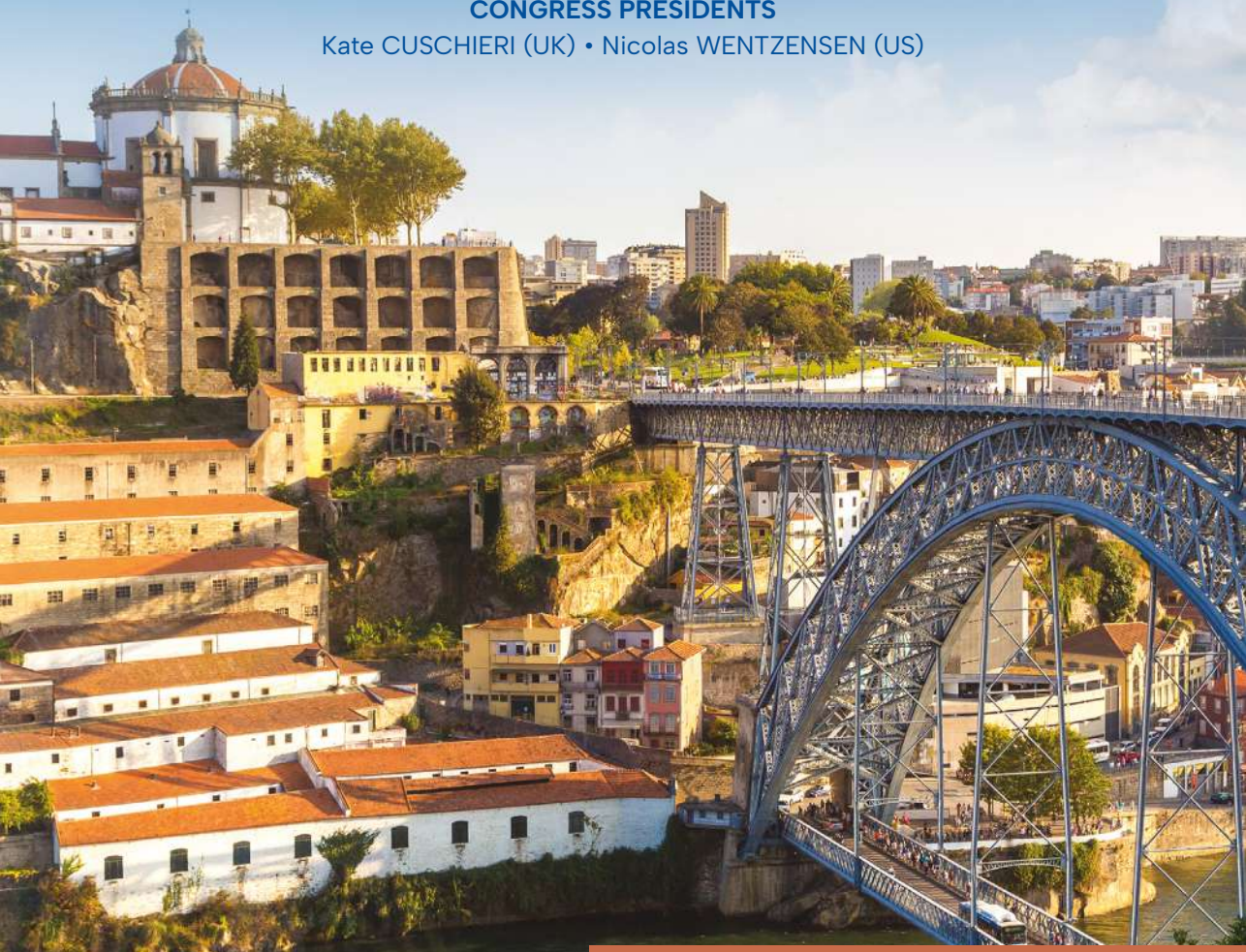
MARCH 16 | 19 2025

ALFÂNDEGA CONGRESS CENTER • PORTO, PORTUGAL

ADVANCING SCIENTIFIC EFFORTS TO CONTROL HPV-RELATED CANCERS

CONGRESS PRESIDENTS

Kate CUSCHIERI (UK) • Nicolas WENTZENSEN (US)



FINAL PROGRAM

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SUNDAY, MARCH 16

SS Scientific Session | FC Free Communications | WS Specialized Workshop | LW Local Workshop

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	ALFÂNDEGA P. AUDITORIUM	INFANTE HALL	D. MARIA HALL	ARRÁBIDA HALL	PORTO HALL
8.30 10.00	**SS 01** Structural and social factors that impact HPV driven cancers	**SS 03** HPV-test validation on clinician taken cervical samples	**SS 05** Update on anogenital carcinogenesis	**LW 01** Sessão de Abertura **LW 02** Sessão Científica I **LW 03** Sessão Científica II Atualidade Epidemiológica: Rastreio HPV e Vacinação no Mundo Lusófono	**WS 01** Colposcopy course
10.00 10.30	COFFEE BREAK				
10.30 12.00	**SS 02** 3rd edition of the European guidelines for quality assurance in cervical cancer screening	**SS 04** Global HPV laboratory network	**SS 06** Global inequalities in cervical cancer prevention	COFFEE BREAK **LW 04** Sessão Plenaria	
12.00 13.30	Industry sponsored symposium **SEEGENE**	LUNCH BREAK			
13.30 15.00	**SS 07** Real-world experience of the implementation of a screen-triage-treat strategy in LMICs	**FC 01** HPV prophylactic vaccines I	Industry sponsored symposium **COPAN**	**LW 05** Sessão Científica III O impacto do HPV na Mulher e no Homem: o Mundo Lusófono para além do Colo do Útero **LW 06** Sessão Científica IV A Investigação e o Mundo Lusófono	**WS 02** Vulvar diseases
15.00 17.00	**SS 08** HPV-testing on self-samples	**SS 09** The utility of urine for improved cervical cancer prevention	**SS 10** Cervical cancer control in underserved populations	**LW 07** Sessão Científica V O Impacto do HPV na Sociedade **LW 08** Encerramento	**WS 03** Anal cancer: Screening guidelines
17.30 20.00	30th Anniversary **followed by Welcome Reception** **EAST WING HALL, LEVEL 2** *(Access via Level 1)*				

MONDAY, MARCH 17

SS Scientific Session | CS Clinical Session | FC Free Communications | AI HPV and AI Forum | HN HPV and Head & Neck Forum

	Level 0	Level 2			
	ALFÂNDEGA P. AUDITORIUM	INFANTE HALL	D. MARIA HALL	ARRÁBIDA HALL	PORTO HALL
8.00 9.30	**AI 01** **Artificial intelligence in HPV-related precancers and cancers** Part I		**FC 02** **Molecular biology – Technology & testing**		**HN 01** **Clinical / Epidemiology I** ***Submitted papers***
9.30 10.00			**COFFEE BREAK**		
10.00 11.30	**COFFEE BREAK**		**FC 03** **Screening methods**	**FC 05** **Triage of HPV positive women I**	**HN 02** **Epidemiology and prevention**
	AI 02 **Artificial intelligence in HPV-related precancers and cancers** Part II – Free Communications			**FC 06** **Anal neoplasia – Vulvar neoplasia – Skin diseases I**	
11.30 12.45		Industry sponsored symposium **ABBOTT**	**FC 04** **At risk populations – Low resource settings**		**HN 03** **Clinical / Epidemiology II** ***Submitted papers***
12.45 14.00	Industry sponsored symposium **BD**	**LUNCH BREAK**			
14.00 15.30	**FC SS** **Expanding HPV vaccine implementation**	**SS 12** **Strategies for faster cervical cancer elimination**	**SS 13** **Long-term follow-up and impact studies for HPV vaccines**	**SS 14** **Evidence on the comparability of self-sampling VS provider-sampling for HPV testing**	**HN 04** **Screening for HPV+ oropharyngeal cancer**
15.30 16.00	**COFFEE BREAK**				
16.00 17.30	**SS 11** **Cervical cancer accelerated elimination policies**	**CS 01** **Point of care testing for cervical screening and management**	**CS 02** **Recommendations for the management of partners of women infected with high-risk HPV**	**SS 15** **Clinical indications for DNA methylation analysis for cervical cancer prevention**	**HN 05** **Liquid biopsy for HPV+ OPC diagnosis and surveillance**
17.30 19.00		**On the Shoulders of Giants** Honoring the Past, Inspiring the Future		**SS 16** **Cervical cancer in sub-Saharan Africa**	**HN 06** **Basic science I / RRP** ***Submitted papers***

TUESDAY, MARCH 18

SS Scientific Session | CS Clinical Session | FC Free Communications | WS Specialized Workshop | HN HPV and Head & Neck Forum

	Level 0	Level 2				Level 0
	ALFÂNDEGA P. AUDITORIUM	INFANTE HALL	D. MARIA HALL	ARRÁBIDA HALL	PORTO HALL	DESPACHANTES HALL
8.00 9.30	**SS 17** RISCC and PERCH: EU initiatives to eliminate cervical cancer	**SS 19** Enhancing cervical cancer screening by improving attendance and self-sampling	**CS 03** HPV and reproductive health	**FC 07** Epidemiology	**HN 07** Basic science II *Submitted papers*	
9.30 10.00	COFFEE BREAK				COFFEE BREAK	
10.00 11.30	**SS 18** HPV driven cancer in immunosuppressed populations	**SS 20** Single dose HPV vaccination	**CS 04** HPV in older women: Epidemiology, screening and management	**WS 04** Cervical cancer screening – from evidence to practice	**HN 08** Molecular insights into HPV+ OPC oncogenesis	
11.30 13.00	LUNCH BREAK					Industry sponsored symposium MSD
13.00 14.30	Industry sponsored symposium ROCHE	**SS 22** From gender-neutral vaccination to universal vaccination against HPV	**CS 05** Colposcopy: Discussion on challenging cases	**SS 24** HPV self-sampling among transgender and gender diverse individuals	**HN 09** New discoveries in molecular epidemiology	**FC 08** HPV prophylactic vaccines II
14.30 16.00	**SS 21** Debate session	**SS 23** Next generation analysis and bioinformatics	**CS 06** Management of early stage cervical cancer & AIS	**SS 25** Role of HLA in immune evasion of HPV-induced tumors	**HN 10** Innovations in personalized therapy	**FC 09** HPV screening I
16.00 16.30	COFFEE BREAK					COFFEE BREAK
16.30 18.00	**SS 26** Impact of interventions in the post-HPV vaccination world	**SS 27** Global evidence on HPV involvement in human malignancies	**CS 07** Recurrence of HSIL after treatment	**CS 08** Challenges and opportunities to implementation of secondary anal cancer prevention programs	**HN 11** Recurrent respiratory papillomatosis	**FC 10** Screening for women difficult to reach
18.00 19.30	**FC 12** Self-sampling I	**FC 13** Methylation I	**FC 14** HPV screening II	**FC 15** Anal neoplasia – Vulvar neoplasia – Skin diseases II	**FC 16** Diagnostics procedures – Management I	**FC 11** Triage of HPV positive women II

WEDNESDAY, MARCH 19

SS Scientific Session CS Clinical Session FC Free Communications

	Level 0	Level 2			
	ALFÂNDEGA P. AUDITORIUM	INFANTE HALL	D. MARIA HALL	ARRÁBIDA HALL	PORTO HALL
8.00 9.30	**SS 28** Validation of HPV tests for less established indications	**CS 09** Targeted therapies of HPV related cancers	**SS 30** Public advocacy and awareness campaigns to address barriers in HPV-associated cancer prevention	**FC 17** Self-sampling II	**FC 18** Diagnostics procedures – Management II
9.30 11.00	**SS 29** Quality assurance measures in countries that switched to HPV primary screening	**FC 19** HPV therapeutic vaccines – Immunotherapy	**FC 20** Advocacy, acceptability and psychology	**FC 21** Microbiome	**FC 22** Methylation II
11.00 12.30	**FC 23** HPV testing and genotyping	**FC 24** Economics and modeling	**FC 25** Public healh	**FC 26** Cervical neoplasia and others	
12.30 13.00					

SCIENTIFIC SESSIONS

Alfândega Porto Auditorium **8.30 • 10.00**

SS 01 • STRUCTURAL AND SOCIAL FACTORS THAT IMPACT HPV DRIVEN CANCERS

CHAIR: Mashele S. (South Africa) • Muchengeti M. (South Africa)

Structural factors, including disparities in access to healthcare, lack of vaccination programs, and limited access to screening programs, create barriers to early detection and prevention of HPV-driven cancers, particularly in low-income and marginalized communities. Social determinants, such as education, income, and cultural norms, also contribute to the prevalence of high-risk HPV infections and cancer development. Rural populations often have poor access to timely cancer care and often travel long distances to receive care. Due to historical factors, race is often linked to socioeconomic status, risks for acquiring HIV and/or HPV and access to cancer care. Additionally, social stigma and unequal access to sexual health resources can further limit prevention efforts. These inequities often result in delayed diagnosis and worse cancer outcomes, disproportionately affecting marginalized populations. Addressing both structural and social determinants is critical to reducing the burden of HPV-related cancers and improving public health outcomes.

SS 01-1 • Introduction	**Mashele S.** (South Africa) **Muchengeti M.** (South Africa)
SS 01-2 • Racial differences in HPV-driven cancers in South Africa	**Mashele S.** (South Africa)
SS 01-3 • HPV-associated squamous cell carcinoma in people living with HIV: The South African HIV cancer match study	**Kipo D.** (Kenya)
SS 01-4 • Cervical cancer screening in women with and without HIV in Eswatini	**Mkhatswa B.** (Swaziland)
SS 01-5 • Disparities in cervical cancer survival by HIV status and geographical region in Rwanda	**Businge L.** (Rwanda)
Discussion and Q&A	**Mashele S.** (South Africa) **Muchengeti M.** (South Africa)

SCIENTIFIC SESSIONS

Alfândega Porto Auditorium **10.30 • 12.00**

SS 02 • 3RD EDITION OF THE EUROPEAN GUIDELINES FOR QUALITY ASSURANCE IN CERVICAL CANCER SCREENING

CHAIR: Basu P. (France)

There is a strong determination to achieve cervical cancer elimination at the European level. Almost all the European Union Member States have introduced HPV vaccination in the national immunization program and many are gradually switching to HPV detection based cervical screening. There is a strong need to update the recommendations for HPV vaccination as well as HPV detection based screening. New evidence has been accumulated on single dose of HPV vaccine and HPV-Faster approach. The quality assurance guidelines on cervical screening for the EU is 10 years old. The RISCC study has recently generated evidence on implementation of risk-stratified cervical screening based on HPV vaccination status. IARC in collaboration with JRC (ISPRA) and supported by the European Commission is preparing the guidelines for HPV vaccination, cervical screening and further management of screen-positive women. The project named European Commission Initiative on Cervical Cancer (ECICvC) is also developing a quality assurance scheme encompassing the full continuum of care for cervical cancer - from primary prevention with vaccination to survivorship and palliative care in the line of similar initiatives for breast (ECIBC) and colorectal cancers (ECICC).

SS 02-1 • Introduction	**Basu P.** (France)
SS 02-2 • EU Initiative on cervical cancer – Key healthcare questions to be addressed	**Basu P.** (France)
SS 02-3 • Guideline development methodology	**Taghavi K.** (France)
SS 02-4 • First sets of recommendations from EU Guidelines	**Arbyn M.** (Belgium)
SS 02-5 • Developing a quality assurance scheme	**Dimitrova N.** (France)
SS 02-6 • The principles of risk-based screening	**Giorgi-Rossi P.** (Italy)
SS 02-7 • Triage of HPV+ women: What evidence can be derived from meta-analyses?	**Dhollander N.** (Belgium)
Discussion and Q&A	**Basu P.** (France)

SCIENTIFIC SESSIONS

Infante Hall **8.30 • 10.00**

SS 03 • HPV–TEST VALIDATION ON CLINICIAN TAKEN CERVICAL SAMPLES

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

Only clinically validated HPV assays should be used in primary cervical screening. Validation and regulatory requirements vary among countries. Whereas the original Meijer guidelines published in 2009 were pivotal in defining the minimal requirements that HPV tests targeting 13-14 high-risk had to fulfill in order to accept them in screening of clinician samples, they need updates in several aspects. Additionally, extended principles and concepts are needed to validate HPV tests targeting a limited number of HPV tests, for point-of-care HPV tests and for testing self-collected specimens. An internationally acceptable framework for HPV test validation like VALGENT and VALHUDES as well as recently launched WHO target product profile document for HPV tests contribute toward the goal of having more affordable and accurate clinically validated HPV tests.

SS 03-1 • Introduction	**Arbyn M.** (Belgium) **Poljak M.** (Slovenia)
SS 03-2 • Valgent 5	**Bonde J.** (Denmark)
SS 03-3 • Valgent 6	**Hawkes D.** (Australia)
SS 03-4 • WHO target product profiles for HPV testing	**Almonte M.** (Switzerland)
SS 03-5 • Updated list of validated HPV tests on clinician samples	**Dhillon S.** (Belgium)
SS 03-6 • How to validate HPV tests targeting a limited number of HPV tests	**Basu P.** (France)
SS 03-7 • New guidelines to assess intra- and inter-reproducibility of HPV tests	**Arbyn M.** (Belgium)
Discussion and Q&A	**Arbyn M.** (Belgium) **Poljak M.** (Slovenia)

SCIENTIFIC SESSIONS

Infante Hall **10.30 • 12.00**

SS 04 • GLOBAL HPV LABORATORY NETWORK

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

This session will highlight the Global HPV Laboratory Network (LabNet) and its role in standardizing and ensuring high-quality laboratory services for HPV detection worldwide. It will feature updates and insights from European National HPV Reference Laboratories (NRLs) including Belgium, Germany, Norway, Sweden, Italy, Scotland, Slovenia and France. Key topics include the pivotal role of NRLs in cervical cancer elimination, proficiency studies, international collaborative studies on HPV, sample adequacy, and collaborative efforts in E-learning resources and standards.

SS 04-1 • Introduction	**Arroyo Mühr L. S.** (Sweden) **Cuschieri K.** (UK)
SS 04-2 • The pivotal role of NRLs in advancing cervical cancer elimination efforts	**Silling S.** (Germany)
SS 04-3 • Proficiency studies for genotyping and screening	**Eklund C.** (Sweden)
SS 04-4 • International collaborative study on sensitivity and specificity for CIN2+ of viral amounts and types of HPV	**Yilmaz E.** (Sweden)
SS 04-5 • Sample adequacy	**Cocuzza C.** (Italy)
SS 04-6 • Collaborative efforts in developing E-learning resources and unified written standards	**Cuschieri K.** (UK)
SS 04-7 • NRL country updates: Belgium	**Padalko E.** (Belgium)
SS 04-8 • NRL country updates: France	**Lepiller Q.** (France)
SS 04-9 • NRL country updates: Slovenia	**Poljak M.** (Slovenia)
SS 04-10 • NRL country updates: Norway	**Söreng K.** (Norway)
Discussion and Q&A	**Arroyo Mühr L. S.** (Sweden) **Cuschieri K.** (UK)

SCIENTIFIC SESSIONS

D. Maria Hall **8.30 • 10.00**

SS 05 • UPDATE ON ANOGENITAL CARCINOGENESIS

CHAIR: Regauer S. (Austria) • Reich O. (Austria)

Squamous cell carcinogenesis in the anogenital region shares two common pathways. The most recent WHO classification of tumors separates squamous cancers of vulva, cervix, penis, anus into two etiologic groups. They arise either after infection with human papillomavirus as so-called HPV-associated squamous cell cancers or independent of HPV as so-called HPV-independent squamous cell cancers. The majority of squamous cell cancers of cervix and anus are HPV associated. Squamous cell cancers of vulva and penis, however, arise in about 50% independent of HPV in association with the lichenoid dermatoses, lichen planus and lichen sclerosus. This session provides an update on the role of reserve cells in the development of cervical precancers / SCC, and an overview on the natural history of anal precancers. It focuses on the precursor lesions of vulvar SCC with special emphasis on HPV independent precursors and provides an update / recent advances in the understanding of penile carcinogenesis.

SS 05-1 • Introduction	**Regauer S.** (Austria) **Reich O.** (Austria)
SS 05-2 • Vulva: Reproducible classification of pre-cancers	**Regauer S.** (Austria)
SS 05-3 • Cervix: The role of reserve cells in cervical squamous cell carcinogenesis	**Reich O.** (Austria)
SS 05-4 • Penis: Update on invasive penile cancer and precancers	**Regauer S.** (Austria)
SS 05-5 • Anus: Natural history of AIN	**Palefsky J.** (US)
Discussion and Q&A	**Regauer S.** (Austria) **Reich O.** (Austria)

SCIENTIFIC SESSIONS

D. Maria Hall **10.30 • 12.00**

SS 06 • GLOBAL INEQUALITIES IN CERVICAL CANCER PREVENTION: ARE WE CURRENTLY ON THE PATH TO CERVICAL CANCER ELIMINATION?

CHAIR: Brisson M. (Canada) • Drolet M. (Canada)

About 85% of cervical cancers worldwide occur in low- and middle-income countries (LMICs). The driving factors for these inequalities is disparity in access to cervical screening with 26% of women ever screened in LMICs compared to 83% in high-income countries (HICs). Inequalities have the potential to increase due to inequitable HPV vaccine distribution. Only 16% of girls are vaccinated in LMICs compared to 59% in HICs. To reduce global inequalities and reach cervical cancer elimination, in 2018, the WHO set a target of vaccinating 90% of girls, screening 70% of women, and treating 90% of pre-cancers/cancers. More than 5 years after this announcement, are we currently on the path to cervical cancer elimination? What is the potential evolution of inequalities in cervical cancer worldwide under current screening and vaccination coverage? What would be the potential impact of enhanced prevention strategies on inequalities and elimination?

SS 06-1 • Introduction	**Drolet M.** (Canada)
SS 06-2 • Updated estimates of global HPV vaccination coverage and cervical screening	**Bruni L.** (Spain)
SS 06-3 • Current worldwide inequalities in incidence and mortality of cervical cancer	**Singh D.** (France)
SS 06-4 • Expected increases in cervical cancer inequalities without enhanced HPV vaccination and screening coverage: Insights from global mathematical modeling	**Brisson M.** (Canada)
SS 06-5 • Cervical cancer elimination in low-and-middle-income countries: Interventions and research priorities	**Barnabas R.** (US)
Discussion and Q&A	**Brisson M.** (Canada) **Drolet M.** (Canada)

SCIENTIFIC SESSIONS

Alfândega Porto Auditorium **13.30 • 15.00**

SS 07 • REAL-WORLD EXPERIENCE OF THE IMPLEMENTATION OF A SCREEN-TRIAGE-TREAT STRATEGY IN LMICS

CHAIR: De Sanjosé S. (Spain) • Inturrisi F. (US)

The session aims to identify critical aspects of cervical cancer screening in LMICs within the PAVE consortium. Special attention is given to delivering screening in areas with high prevalence of cervical cancer and reaching women in rural, remote areas. The discussions focus on critical considerations related to HPV testing, both for the quality and turnaround time of results, and follow-up of HPV positives. Delays in HPV results negatively impact follow-up rates and make it more difficult to bring women back into care. Treatment is also challenging among women living with HIV who, not only are more susceptible to HPV infection and cervical cancer, but also have higher recurrence rates. Lastly, robust data collection systems are essential for accurately recording and identifying women and ensuring they remain in care.

SS 07-1 • Introduction	**De Sanjosé S.** (Spain) **Inturrisi F.** (US)
SS 07-2 • Targeting remote areas in Brazil	**Ribeiro A.** (Brazil)
SS 07-3 • Quality of HPV testing: Considerations on training, tests and performance of HPV laboratories	**Inturrisi F.** (US)
SS 07-4 • Strategies for recruitment and retainment in care in Tanzania	**Yeates K.** (Canada)
SS 07-5 • Follow-up and treatment among women living with HIV in the Dominican Republic	**Madeleine M.** (US)
SS 07-6 • Barriers and challenges in data collection for cervical cancer screening programs: Experiences from the field	**Conzuelo G.** (US)
Discussion and Q&A	**De Sanjosé S.** (Spain) **Inturrisi F.** (US)

SCIENTIFIC SESSIONS

Alfândega Porto Auditorium **15.00 • 17.00**

SS 08 • HPV-TESTING ON SELF-SAMPLES

CHAIR: Bonde J. (Germany) • Arbyn M. (Belgium)

Self-collected samples for HPV testing is a silver bullet closing the gaps in cervical cancer screening and advancing the 70% WHO screening coverage goal. This session has a broad scope with overviews on new evidence from updated meta-analyses, as well as new research in distribution methods, cost-effectiveness, triage of HPV positive self-samples, application of methylation biomarkers on self-collected samples, and experiences using self-collected samples for HPV screening in low- and middle-income countries.

SS 08-1 • Introduction	**Bonde J.** (Germany) **Arbyn M.** (Belgium)
SS 08-2 • Accuracy of HPV testing on self-samples: Update of meta-analyses, which tests can be accepted for testing on self-samples	**Arbyn M.** (Belgium)
SS 08-3 • Effectiveness to increase participation by offering self-sampling: A meta-analysis of randomized population trials	**Phoolcharoen N.** (Thailand)
SS 08-4 • Cost-effectiveness of HPV self-sampling strategies: Opt-in VS send-to-all scenarios	**Bonde J.** (Germany)
SS 08-5 • Findings of the VALHUDES studies	**Latsuzbaia A.** (Belgium)
SS 08-6 • Triage of women testing HPV+ on a self-sample, a meta-analysis	**Rezhake R.** (China)
SS 08-7 • Standardization of procedures to handle self-samples	**Cocuzza C.** (Italy)
SS 08-8 • Application of HPV testing on self-samples in low- and middle-income countries: Findings from the PAVE study	**De Sanjosé S.** (Spain)
SS 08-9 • Methylation markers to triage women with testing HPV+ on a self-sample	**Heideman D.** (Netherlands)
Discussion and Q&A	**Bonde J.** (Germany) **Arbyn M.** (Belgium)

SCIENTIFIC SESSIONS

Infante Hall **15.00 • 16.30**

SS 09 • THE UTILITY OF URINE FOR IMPROVED CERVICAL CANCER PREVENTION

CHAIR: Steenbergen R. (Netherlands) • Van Keer S. (Belgium)

Urine sampling offers several advantages over clinician-collected cervical and self-collected vaginal samples for cervical cancer prevention. One of the most important advantages being the ease of collection and the wide acceptance by women. The number of studies supporting the use of urine for HPV DNA detection are rising rapidly. Studies on clinical performance and evaluation in primary screen populations are just evolving. This session will discuss current developments on the analysis of HPV DNA and methylation markers for the detection of cervical lesions in urine, and evaluation thereof in primary screening populations. As will it discuss its potential for vaccination monitoring through HPV and its induced antibodies.

SS 09-1 • Introduction	**Steenbergen R.** (Netherlands) **Van Keer S.** (Belgium)
SS 09-2 • Updates on first-void urine sampling	**Vorsters A.** (Belgium)
SS 09-3 • The use of first-void urine to screen women aged 65-79 in the UK: The Catch-up Screen Project	**Gilham C.** (UK)
SS 09-4 • Efficacy of self-sampling strategies for cervical cancer screening in France: CapU4 study	**Ducancelle A.** (France)
SS 09-5 • Understanding local HPV-related immunity using first-void urine	**Bell M.** (Belgium)
SS 09-6 • The dynamics of HPV and methylation testing in urine	**Griffioen M.** (Netherlands)
SS 09-7 • Methylation of human tumour suppressor genes in first-void urine: The Danish experience	**Tranberg M.** (Denmark)
SS 09-8 • Vulvar cancer detection in urine and vulvar scrapes using methylation markers	**De Vries D.** (Netherlands)
Discussion and Q&A	**Steenbergen R.** (Netherlands) **Van Keer S.** (Belgium)

SCIENTIFIC SESSIONS

D. Maria Hall **15.00 • 16.30**

SS 10 • CERVICAL CANCER CONTROL IN UNDERSERVED POPULATIONS

CHAIR: Goodman M. (US) • Baussano I. (France)

The cervical cancer elimination strategy launched by the World Health Organization and currently under implementation in many countries worldwide, relies on three major targets, namely 90% of girls fully vaccinated by 15 years of age, screening and precancer treatment of 70% of women screened with a high-performance test by 35 and 45 years of age, and treatment and supportive care of 90% of women with a cancer or a precancerous lesion. For a wide range of reasons, in every and each country access of the population to health services is highly heterogeneous and some special populations are particularly vulnerable and do not benefit from local cervical cancer control measures. Hence, cervical cancer elimination cannot be attained in such populations through routine institutional approaches. This session is devoted to providing an overview of ongoing initiatives aimed at improving cervical cancer control in special populations.

SS 10-1 • Introduction	**Goodman M.** (US) **Baussano I.** (France)
SS 10-2 • Real-life implementation of screening for vulnerable groups	**Elfström M.** (Sweden)
SS 10-3 • Cancer RADAR – A study to assess the current cancer risk among individuals with a migration background across Europe	**Alberts C.** (Netherlands)
SS 10-4 • CBIG-SCREEN: Implementation research to increase participation to screening among vulnerable populations in Europe	**Mosquera Metcalfe A.** (Spain)
SS 10-5 • Cervical cancer screening in the trans and non-binary community	**Moscicki A. B.** (US)
SS 10-6 • Prevention of HPV-associated malignancies in disabled populations	**Shirazipour C.** (US)
SS 10-7 • Cervical cancer screening in homeless women	**Goodman M.** (US)
Discussion and Q&A	**Goodman M.** (US) **Baussano I.** (France)

FREE COMMUNICATIONS

Infante Hall **13.30 • 15.00**

FC 01 • HPV PROPHYLACTIC VACCINES I

CHAIR: Giuliano A. (US) • Lei J. (Sweden)

FC 01-1 • Incomplete seropositivity following a single dose of the human papillomavirus vaccine	**Luxembourg A.** (US)
FC 01-2 • Effectiveness of quadrivalent human papillomavirus vaccination against high-grade cervical lesions by age and doses: A population-based cohort study	**Wu S.** (Sweden)
FC 01-3 • Efficacy, immunogenicity, and safety of the 9-valent human papillomavirus (HPV) vaccine administered as a 3-dose regimen in Japanese males aged 16-26 years	**Sawata M.** (Japan)
FC 01-4 • Comparative effectiveness of bi- or quadrivalent HPV vaccines in partially VS fully vaccinated young women	**Dreyer G.** (South Africa)
FC 01-5 • Human papillomavirus infection rate and associated lesions in women aged 16-45 years who received HPV vaccine from 2016 to 2022	**Zhao C.** (China)
FC 01-6 • Actively promote the vaccination of human papillomavirus vaccine in China	**Lihui W.** (China)
FC 01-7 • Improving HPV vaccination practice facilitation outcomes: Short-term effects and maintenance	**Hull P.** (US)
FC 01-8 • Awareness, attitude and acceptance of gender neutral nonavalent HPV vaccine for HPV related infections among college students of a metropolitan city	**Gowda Seshadri J.** (India)
FC 01-9 • Higher plasma aflatoxin concentration is associated with increased risk of HPV 16 and HPV 18 detection and persistence among Ugandan women	**Tong Y.** (US)

SPECIALIZED WORKSHOPS

Porto Hall **8.30 • 12.00**

WS 01 • COLPOSCOPY COURSE

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

Welcome to the EUROGIN Colposcopy Course, where we embark on a journey through the dynamic realm of cervical precancer management. At its heart, colposcopy stands as an indispensable pillar of this discipline, demanding a fusion of knowledge and hands-on expertise. Throughout this program, you will gain a profound understanding of colposcope utilization, delve into the pivotal aspects of diagnosing and treating precancerous cervical lesions, explore the intricacies of pathology, and remain current on the application of biomarkers.

Colposcopy plays an essential role in the diagnosis and treatment of cervical precancer. It is recommended when abnormal cytology is present, specific types of HPV are detected, or clinical symptoms and early signs of invasive cancer become apparent.

The practice of colposcopy involves a meticulous visual examination of the cervical epithelium, utilizing either uniocular or binocular vision. Notably, it empowers the identification of specific abnormalities linked to squamous and glandular precancer, particularly after the application of a 5% acetic acid solution. This application induces changes in the epithelial and stromal blood vessels, making abnormalities visibly discernible.

Our course is traditionally guided by the esteemed Professor Albert Singer, and we are honored to have him once again co-leading this program alongside Professor Jacob Bornstein. Professor Bornstein's leadership of the IFCPC Nomenclature Committee has been instrumental in shaping contemporary colposcopy terminology.

WS 01-1 • PART I — 8.00 • 10.15

WS 01-1A • Opening	**Singer A.** (UK)
WS 01-1B • The normal cervix and the colposcopy examination	**Singer A.** (UK)
WS 01-1C • Update in pathology and cytology for colposcopists	**Bergeron C.** (France)
WS 01-1D • Colposcopy of "abnormal" cervix, colposcopy terminology	**Bornstein J.** (Israel)

WS 01-2 • PART II — 10.45 • 12.00

WS 01-2A • Management of screening findings in the age of HPV; advanced algorithms and biomarkers	**Bonde J.** (Denmark)
WS 01-2B • Treatment of cervical precancer and treatment's complications	**Bornstein J.** (Israel)
WS 01-2C • Interactive session (What is your diagnosis?)	**Singer A.** (UK)
WS 01-2D • Summary of course	**Bornstein J.** (Israel)

SPECIALIZED WORKSHOPS

Porto Hall **13.30 • 15.00**

WS 02 • VULVAR DISEASES

CHAIR: Bleeker M. (Netherlands) • Hampl M. (Germany)

Vulvar intraepithelial neoplasia (VIN) can be divided into human papillomavirus (HPV)-associated high-grade squamous intraepithelial lesion (HSIL) and HPV-independent VIN (d-VIN). HPV-associated HSIL is the most common precursor and usually affects patients between the ages of 40 and 50. HPV-independent VIN occurs mainly in older patients (>65 years) and is associated with vulvar inflammatory dermatoses such as lichen sclerosus (LS). Also young women with LS may develop d-VIN. The clinical course of d-VIN is more aggressive and the time to progression to invasive cancer is often short. Recent insights have been shown that HPV-independent VIN can be further divided into p53 mutant and p53 wild-type variants that confer different cancer risks. Patients with VIN often have recurrent disease, as well as multiple lesions at different anogenital sites (multifocal / multicentric disease). This workshop will provide state-of-the-art lectures on the clinicopathological aspects and treatment of this heterogeneous disease, as well as new insights into prognostic biomarkers.

WS 02-1 • Introduction	**Bleeker M.** (Netherlands) **Hampl M.** (Germany)
WS 02-2 • The past 30 years in the field of vulvar diseases: What went well?	**Bornstein J.** (Israel)
WS 02-3 • The past 30 years in the field of vulvar diseases: What needs to be improved?	**Preti M.** (Italy)
WS 02-4 • Update on the classification of vulvar neoplasia: Importance of immunohistochemistry	**Regauer S.** (Austria)
WS 02-5 • New developments in nonsurgical treatment of vulvar HSIL	**Hampl M.** (Germany)
WS 02-6 • Secondary HPV vaccination to prevent recurrence of vulvar preneoplasia / neoplasia: Is it recommended?	**Joura E.** (Austria)
WS 02-7 • New developments to improve the detection of vulvar lesions with a high cancer risk	**Bleeker M.** (Netherlands)
Discussion and Q&A	**Bleeker M.** (Netherlands) **Hampl M.** (Germany)

SPECIALIZED WORKSHOPS

Porto Hall **15.00 • 17.00**

WS 03 • ANAL CANCER: SCREENING GUIDELINES

CHAIR: Nyitray A. G. (US) • Palefsky J. (US)

Guidelines for anal cancer screening have recently been published in several countries. This session is a broad review of those recommendations. It addresses populations targeted for screening, country-specific differences in the guidelines, and the accuracy of familiar biomarkers. Finally, management and treatment of small tumors (SISCCA) and the potential for early detection of invasive anal cancer through palpation will be covered.

WS 03-1 • Introduction	**Nyitray A. G.** (US) **Palefsky J.** (US)
WS 03-2 • Anal cancer epidemiology among populations targeted for screening	**Deshmukh A.** (US)
WS 03-3 • Published anal precancer screening guidelines and FAQ, the US perspective	**Palefsky J.** (US)
WS 03-4 • Published anal precancer screening guidelines and FAQ, the French perspective	**Abramowitz L.** (France)
WS 03-5 • Cytology or HPV testing, or both?	**Hillman R.** (Australia)
WS 03-6 • Management and treatment of small tumors, with a focus on SISCCA	**Cuming T.** (UK)
WS 03-7 • Invasive anal cancer detection through DARE and self-palpation	**Nyitray A. G.** (US)
Discussion and Q&A	**Nyitray A. G.** (US) **Palefsky J.** (US)

LOCAL WORKSHOP

Arrábida Hall **8.30 • 17.00**

LW • WORKSHOP LUSÓFONO

HPV na Mulher e no Homem: Da Investigação ao Rastreio e Vacinação

PRESIDENTE DO COMITÊ ORGANIZADOR LOCAL: Medeiros R. (Portugal)

EQUIPA DE COORDENAÇÃO: Bicho M. C. (Portugal) • Franco E. (Canada)
Vieira Baptista P. (Portugal) • Medeiros R. (Portugal)

No âmbito do EUROGIN 2025 iremos organizar mais um Workshop Lusófono com o objetivo de permitir um fórum de discussão para os diferentes colegas que queiram apresentar os seus resultados e experiências em língua portuguesa. Estão convidados todos os colegas investigadores ou clínicos com interesse em participar. Com este Workshop Lusófono pretendemos construir um elo de união facilitando a troca de experiências científicas ou profissionais, a constituição de um fórum de discussão e a construção de uma rede agilizando projetos e interesses comuns com o devido enquadramento nas várias áreas de intervenção do EUROGIN.

LW 01 • SESSÃO DE ABERTURA — 8.30 • 8.45

MODERADORES: Cerqueira F. (Portugal) • Passos M. (Brasil) • Eleutério J. (Brasil)

LW 01-1 • A ACL-Associação Científica Lusófona e as suas atividades: Portugal, Brasil, Moçambique, Angola, Cabo Verde, São Tomé Príncipe, Guiné, Timor-Leste e Macau	**Bicho M. C.** (Portugal)

LW 02 • SESSÃO CIENTÍFICA I — 8.45 • 9.00

MODERADORES: Bicho M. (Portugal) • Passos M. (Brasil) • Eleutério J. (Brasil)

LW 02-1 • Erradicação das doenças por HPV no Mundo Lusófono: Biologia, história e impacto na sociedade	**Medeiros R.** (Portugal)

LW 03 • SESSÃO CIENTÍFICA II — 9.00 • 10.30

Atualidade Epidemiológica: Rastreio HPV e Vacinação no Mundo Lusófono

MODERADORES: Veloso V. (Portugal) • Passos M. (Brasil) • Pires M. C. (Portugal)

LW 03-1 • Atualidades: HPV e vacinação em Portugal	**Pedro A.** (Portugal)
LW 03-2 • Atualidades: HPV e vacinação no Brasil	**Cardial M.** (Brasil)
LW 03-3 • Atualidades: HPV e vacinação em Moçambique	**Lorenzoni C.** (Moçambique)
LW 03-4 • Atualidades: HPV e vacinação em Angola	**Guilherme M.** (Angola)
LW 03-5 • Atualidades: HPV e vacinação em Cabo Verde	**Barbosa C.** (Cabo Verde)
LW 03-6 • Impacto da Vacinaçao e Rastreio na Saude da Mulher no Norte de Portugal	**Tavares F.** (Portugal)

LW 04 • SESSÃO PLENARIA: CONFERENCIA MAGISTRAL — 11.00 • 11.30

MODERADORES: Bicho M. C. (Portugal) • Medeiros R. (Portugal)

LW 04-1 • Investigação básica e clínica sobre o papilomavirus humano: Uma história que merece ser contada	**Franco E.** (Canada)

LOCAL WORKSHOP

Arrábida Hall **8.30 • 17.00**

LW 05 • SESSÃO CIENTÍFICA III — 13.30 • 14.45

O impacto do HPV na Mulher e no Homem: O Mundo Lusófono para além do Colo do Útero

MODERADORES: Passos M. (Brazil) • Felix A. (Portugal) • Sousa C. (Portugal)

LW 05-1 • HPV e o seu impacto na doença ginecológica	**Felix A.** (Portugal)
LW 05-3 • HPV em Homens e trabalhadores do sexo	**Wendland A. M.** (Brasil)
LW 05-4 • HPV e o Cancro da Cabeça e Pescoço : Novos biomarcadores na era genomica	**Cochicho D.** (Portugal)
LW 05-5 • O HPV e o rastreio e tratamento das lesões pré-cancerosas anais	**Albuquerque A.** (Portugal)
LW 05-6 • HPV e doença vulvovaginal	**Do Val I.** (Brasil)
LW 05-7 • Metástases do cancro do colo do útero: O papel do HPV	**Bartosh C.** (Portugal)

LW 06 • SESSÃO CIENTÍFICA IV — 14.45 • 15.45

A Investigação e o Mundo Lusófono

MODERADORES: Levi J. E. (Brazil) • Barbosa C. (Cabo Verde) • Cruz C. (Portugal)

LW 06-1 • A investigação em HPV no Instituto Português de Oncologia do Porto	**Medeiros R.** (Portugal)
LW 06-2 • HPV e doença cervicovaginal: Novas estratégias para a ginecologia	**Tacla M.** (Brasil)
LW 06-3 • HPV, projectos contra o cancro e Angola	**Chimpolo M. M.** (Angola)
LW 06-4 • Investigação em Moçambique: HPV e muito mais	**Carrilho C.** (Moçambique)
LW 06-5 • Nanopartículas lipídicas com imiquimod e funcionalizadas com aptamero para o tratamento de lesões causadas pelo vírus do papiloma humano	**Maocha I.** (Portugal)
LW 06-6 • As instituições lusófonas e a Investigação: O caso do Instituto Bento da Rocha Cabral	**Bicho M.** (Portugal)

LW 07 • SESSÃO CIENTÍFICA V — 15.45 • 16.25

O Impacto do HPV na Sociedade

MODERADORES: Cerqueira F. (Portugal) • Carrilho C. (Moçambique) • Guilherme M. (Angola)

LW 07-1 • A genotipagem do HPV em 462 401 mulheres do rastreio do cancro do colo do útero da região norte de Portugal	**Sousa H.** (Portugal)
LW 07-2 • Avaliação de um estudo de coorte de mulheres HPV positivas: Utilidade da análises da metilação	**Sousa C.** (Portugal)
LW 07-3 • A vacinação, infertilidade e saúde reprodutiva	**Vieira Baptista P.** (Portugal)
LW 07-4 • Avaliação endoscópica de lesões de HPV em otorrinolaringologia	**Dias Ó.** (Portugal)
LW 07-5 • A DGS e as coberturas vacinais contra o vírus do papiloma humano em Portugal: Progressos e desafios	**Pereira N.** (Portugal)

LW 08 • ENCERRAMENTO WORKSHOP LUSÓFONO — 16.25 • 17.00

Medeiros R. (Portugal) • Bicho M. C. (Portugal) • Franco E. (Canada) • Vieira Baptista P. (Portugal)

30th Anniversary CEREMONY

30 YEARS OF INNOVATION, COLLABORATION, AND FUTURE VISION: CELEBRATING A LEGACY IN SCIENTIFIC ADVANCEMENT

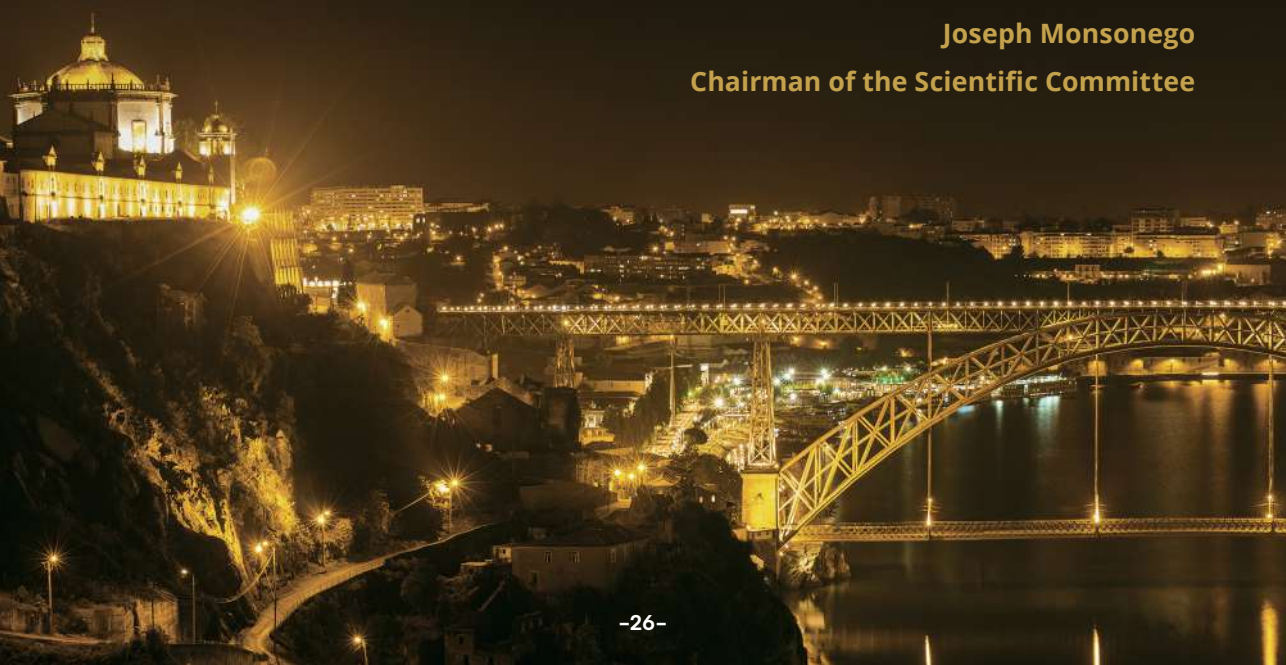
As we reflect on three decades of dedication, innovation, and collaboration, our hearts are filled with immense pride and gratitude. Thirty years ago, a vision was born—a vision to transform the scientific landscape of HPV -driven cancers.

From humble beginnings, we have grown into a global network of passionate experts and scientists, united by a common goal: to advance knowledge, share experiences, and pioneer new research pathways. Together, we have achieved what once seemed impossible.

This celebration is not just about looking back; it is about looking forward with hope and determination. Together, with the new generation of scientists, we will continue to push the boundaries of science. We will inspire and innovate, driven by the same passion and commitment that have brought us this far.

Thank you, from the bottom of our hearts, for being part of this extraordinary adventure. Your dedication, enthusiasm, and hard work have made EUROGIN what it is today—a beacon of hope, a hub of innovation, and a community that makes a difference.

Joseph Monsonego
Chairman of the Scientific Committee



SUNDAY, MARCH 16 | 17.30 • 20.00

EAST WING HALL (Level 2)

Everybody is welcome, including accompanying persons.
No badge required.

Introduction — **JOSEPH MONSONEGO**

Historical Overview — **EDUARDO FRANCO**

A look back at the key milestones and growth of the organization over 30 years

Key Achievements: Three Decades of Progress

1st Decade: Advances in screening — **CHRIS MEIJER**

2nd Decade Research in primary prevention — **ANNA GIULIANO**

3rd Decade: Global disease control efforts — **JOAKIM DILLNER**

Testimonials from Senior Scientists — **ALBERT SINGER • SILVIA FRANCESCHI**
JACK CUZICK • KARI SYRJÄNEN
MARC ARBYN • JENNIFER S. SMITH

Conclusion by the Congress Presidents — **KATE CUSCHIERI**
NICOLAS WENTZENSEN

Sharing their vision on the challenges and future of research in the field

FOLLOWED BY WELCOME RECEPTION

Networking and informal discussions over food and drinks

ARTIFICIAL INTELLIGENCE FORUM

Alfândega Porto Auditorium **8.00 • 12.30**

AI • ARTIFICIAL INTELLIGENCE IN HPV–RELATED PRECANCERS AND CANCERS

Leveraging artificial intelligence in screening and management of HPV–related precancers and cancers

CHAIR: Franco E. (Canada) • Monsonego J. (France)

MODERATORS: Wentzensen N. (US) • Madathil S. (Canada)

Join us for an insightful session on Artificial Intelligence in HPV-related precancers and cancers, where we explore the growing role of AI in transforming cancer screening, diagnosis, and management.
This session will cover the latest AI technologies in cervical cancer screening, trustworthy AI in clinical practice, and machine learning models for predicting HPV-driven cancer progression. Experts will share real-world applications, discuss challenges, and highlight AI-enhanced tools like colposcopy. Engage in dynamic discussions on AI's future in healthcare and collaborative opportunities.
Don't miss this opportunity to understand how AI is reshaping the landscape of oncology.

AI 01 • PART I — 8.00 • 10.15

AI 01-1 • Opening introduction to AI in oncology	**Rydzewski N. R.** (US)
AI 01-2 • AI in cervical cancer screening: Current advances and future directions	**Basu P.** (France)
AI 01-3 • AI-enhanced colposcopy: Improving interpretability and trustworthiness via natural language explanations	**Madathil S.** (Canada)
AI 01-4 • Developing robust and reliable AI algorithms for clinical applications: The example of Cytoreader	**Grabe N.** (Germany)
AI 01-5 • How to move AI-based tests into clinical practice	**Wentzensen N.** (US)
AI 01-6 • AI regulation in healthcare within the European Union	**Schmidt J.** (Germany)
Panel discussion and closing remarks: The future of AI in HPV-related disease management	
Discussion and Q&A	

ARTIFICIAL INTELLIGENCE FORUM

Alfândega Porto Auditorium **8.00 • 12.30**

AI 02 • PART II – FREE COMMUNICATIONS 10.45 • 12.30

AI 02-1 • Artificial intelligence as a potential tool to boost cervical cancer screening programs using individualized risk prediction	**Garcia-Serrano A.** (Sweden)
AI 02-2 • A prediction model for high-grade cervical lesions using machine learning in Swedish women	**Deng Y.** (Sweden)
AI 02-3 • New method for hrHPV screening using the deepFM-RF model: A multicenter, multi-ethnic validation study	**Hu Z.** (China)
AI 02-4 • Deep learning and HPV pleomorphic multiorgan induced lesions: Automated detection and differentiation of cervical and anal squamous cancers precursors – a multicentric study	**Mascarenhas M.** (Portugal)
AI 02-5 • Automated evaluation of p16/ki67 dual stain cytology as an artificial intelligence-based biomarker for detection of cervical intraepithelial neoplasia of grade 2 or worse in HPV-positive women in cervical cancer screening	**Gustafson L. W.** (Denmark)
AI 02-6 • The IMP diagnostics Roadmap to Implement the Genius™ digital diagnostics system in real-life clinical practice	**Montezuma D.** (Portugal)
AI 02-7 • Effect of an artificial intelligence-guided colposcopy for detection of cervical precancer and cancer: A multicentre, randomized, crossover trial	**Xue P.** (China)
AI 02-8 • Large language models in cervical cancer control education: Comparing ChatGPT and Baichuan4 to human-generated multiple choice questions	**Ma J.** (China)
AI 02-9 • Artificial intelligence based screening by colposcopy: An image catalogue to build machine learning algorithms for female genital schistosomiasis and gynaecological disorders	**Fusco D.** (Germany)
AI 02-10 • County-level HPV vaccination rates: Analysis of 10 million publicly-insured US adolescents	**Sonawane K.** (US)

SCIENTIFIC SESSIONS

Alfândega Porto Auditorium **16.00 • 17.30**

SS 11 • CERVICAL CANCER ACCELERATED ELIMINATION POLICIES

CHAIR: Baussano I. (France) • Franco E. (Canada)

The cervical cancer elimination strategy launched by the World Health Organization and currently under implementation in many countries worldwide, relies on three major targets, namely 90% of girls fully vaccinated by 15 years of age, screening and precancer treatment of 70% of women screened with a high-performance test by 35 and 45 years of age, and treatment and supportive care of 90% of women with a cancer or a precancerous lesion.
The successful and sustainable implementation of the measures essential to reach elimination by year 2030 is highly context specific, furthermore the ability to efficiently integrate HPV vaccination with cervical cancer screening is key to accelerate elimination. This session is devoted to providing an overview of population-based interventions aimed at accelerating cervical cancer elimination both in high- and low / middle-income countries and critically discuss cervical cancer elimination goal indicators.

SS 11-1 • Introduction	**Baussano I.** (France) **Franco E.** (Canada)
SS 11-2 • Rethinking cervical cancer elimination goal indicators and criteria to stop screening	**Franco E.** (Canada)
SS 11-3 • Overview of population-based interventions aimed at accelerating cervical cancer elimination	**Robles C.** (Spain)
SS 11-4 • How public health decision modeling can inform cervical cancer accelerated elimination policies	**Gini A.** (France)
SS 11-5 • Screening policies for HPV vaccinated women across EU	**Giorgi Rossi P.** (Italy)
SS 11-6 • HPV-FASTER-Implement: Cervical cancer elimination policies among vulnerable populations across Europe	**Bardou M.** (France)
SS 11-7 • Perspectives on faster cervical cancer elimination	**Dillner J.** (Sweden)
Discussion and Q&A	**Baussano I.** (France) **Franco E.** (Canada)

SCIENTIFIC SESSIONS

Infante Hall **14.00 • 15.30**

SS 12 • STRATEGIES FOR FASTER CERVICAL CANCER ELIMINATION

CHAIR: Dillner J. (Sweden)

The session will review the scientific basis of the different possible strategies for achieving cervical cancer elimination as soon as possible. The general concept of achieving faster elimination using concomitant vaccination and screening will be reviewed, followed by an evaluation of this strategy's effectiveness. The special considerations in relation to providing the most effective and long lasting protection for vulnerable women (both screening and vaccination) are highlighted as well as models for estimation of how the different choices for strategy will affect the timepoint (target year) when cervical cancer is eliminated. The possible impact on transmission by vaccination of HPV-positive women will be presented and the path chosen for faster elimination in an LMIC country (Rwanda) will be described. Finally, the choice of screening after elimination of incident HPV will be reviewed.

SS 12-1 • Introduction	**Dillner J.** (Sweden)
SS 12-2 • Overview on faster cervical cancer elimination	**Bosch X.** (Spain)
SS 12-3 • Using concomitant vaccination and screening for faster elimination of incident HPV	**Dillner J.** (Sweden)
SS 12-4 • Faster cervical cancer elimination in vulnerable populations	**Bardou M.** (France)
SS 12-5 • Modeling a faster timepoint for HPV elimination	**Baussano I.** (France)
SS 12-6 • HPV vaccination of HPV positive women: Effects on viral infectivity	**Pavón M. A.** (Spain)
SS 12-7 • The Rwanda faster cervical cancer elimination initiative	**Uwinkindi F.** (Rwanda)
SS 12-8 • Cervical cancer screening after elimination of incident HPV	**Arroyo Mühr L. S.** (Sweden)
Discussion and Q&A	**Dillner J.** (Sweden)

D. Maria Hall **14.00 • 15.30**

SS 13 • LONG-TERM FOLLOW-UP AND IMPACT STUDIES FOR HPV VACCINES

CHAIR: Poljak M. (Slovenia)

The session will review and discuss real-world long-term follow-up and impact studies for HPV vaccines, data systems for assessing the impact of national HPV vaccination programs and challenges and prospects of long-term follow-up studies for HPV vaccination programs.

SS 13-1 • Introduction	**Poljak M.** (Slovenia)
SS 13-2 • Real-world impact data of HPV vaccine effectiveness in the UK	**Palmer T. J.** (UK)
SS 13-3 • Real-world impact data of HPV vaccine effectiveness in Canada	**Ogilvie G.** (Canada)
SS 13-4 • Real-world impact data of HPV vaccine effectiveness in Australia	**Bateson D.** (Australia)
SS 13-5 • How to assess long-term impact of HPV vaccines in LMIC	**Baussano I.** (France)
Discussion and Q&A	**Poljak M.** (Slovenia)

SCIENTIFIC SESSIONS

Arrábida Hall **14.00 • 15.30**

SS 14 • EVIDENCE ON THE COMPARABILITY OF SELF-SAMPLING VS PROVIDER-SAMPLING FOR HPV TESTING

CHAIR: De Sanjosé S. (Spain) • Inturrisi F. (US)

The session aims to provide recent evidence on the comparability of HPV assay and collection methods to detect oncogenic HPV types in cervical screening. Self-sampling is known to be highly accepted and to increase uptake of screening, reaching women who may not otherwise visit clinics. However, validating the use of self-sampling as the primary method for HPV testing globally is essential for large-scale implementation. The session presents recent evidence from a variety of settings, including recent studies in resource-limited settings and real-world implementation in national programs in European settings.

SS 14-1 • Introduction	**De Sanjosé S.** (Spain) **Inturrisi F.** (US)
SS 14-2 • Performance of GeneXpert on provider-collected VS ScreenFire on self-collected samples among women living with HIV in Malawi	**Mungo C.** (US)
SS 14-3 • Performance of careHPV on provider-collected VS ScreenFire on self-collected samples in the Scale project in El Salvador	**Soler M.** (US)
SS 14-4 • Performance of ScreenFire HPV testing on provider-collected VS self-collected samples in Oportunidad - Dominican Republic	**Madeleine M.** (US)
SS 14-5 • Implementation of HPV self-sampling in Spain	**Bruni L.** (Spain)
SS 14-6 • Implementation of HPV self-sampling in the Netherlands and a real-world comparison of the performance of self-sampling and provider-sampling	**Berkhof H.** (Netherlands)
Discussion and Q&A	**De Sanjosé S.** (Spain) **Inturrisi F.** (US)

SCIENTIFIC SESSIONS

Arrábida Hall **16.00 • 17.30**

SS 15 • CLINICAL INDICATIONS FOR DNA METHYLATION ANALYSIS FOR CERVICAL CANCER PREVENTION

CHAIR: Heideman D. (Netherlands) • Steenbergen R. (Netherlands)

Altered DNA methylation is one of the key epigenetic events that contributes to the development of cancer. HPV-driven carcinogenesis is associated with increased DNA methylation. Changes in DNA methylation patterns are already detectable at the stage of precancerous lesions and can be measured in exfoliated cells using sensitive molecular methods. Accordingly, DNA methylation analysis has been evolved as a promising tools for risk stratification in cervical cancer screening and management of CIN. This session will discuss clinical indications for DNA methylation analysis for cervical cancer prevention.

SS 15-1 • Introduction	**Heideman D.** (Netherlands) **Steenbergen R.** (Netherlands)
SS 15-2 • DNA methylation as a triage marker for colposcopy referral in HPV-based cervical cancer screening	**Henrique R.** (Portugal)
SS 15-3 • DNA methylation analysis for risk-stratification of HPV-positive women with low-grade cytology	**Heideman D.** (Netherlands)
SS 15-4 • Could DNA methylation be used as a primary cervical screening method?	**Dreyer G.** (South Africa)
SS 15-5 • DNA methylation analysis for monitoring vaccinated women	**Louvanto K.** (Finland)
SS 15-6 • DNA methylation analysis for posttreatment monitoring of cervical cancer patients and management of women with CIN2/3	**Van Trommel N.** (Netherlands)
Discussion and Q&A	**Heideman D.** (Netherlands) **Steenbergen R.** (Netherlands)

SCIENTIFIC SESSIONS

Arrábida Hall **17.30 • 19.00**

SS 16 • CERVICAL CANCER IN SUB-SAHARAN AFRICA

CHAIR: Muchengeti M. (South Africa) • Kapambwe S. (South Africa)

Nearly all cervical cancers are preventable, yet cervical cancer remains the most common cause of cancer death in women in sub-Saharan Africa. The WHO 90-70-90 global strategy aims to vaccinate 90% of girls with HPV vaccine by 15 years of age, screen at least 70% of women by 35 and 45 years of age and treat 90% of women with pre-cancer or invasive cervical cancer in order to eliminate cervical cancer as a public health problem. However, data to monitor the progress of this strategy in sub-Saharan Africa are fragmented and in silos. Data for HPV vaccination, cervical cancer screening and treatment, population-based cancer registries, HIV surveillance and death registries are governed separately though harmonized population-based data are needed to accurately measure baseline and progress towards elimination. We present the work of the Johannesburg IARC-GICR Centre of Expertise for cervical cancer elimination in harmonizing existing data sources to better understand the epidemiology of cervical cancer in sub-Saharan Africa.

SS 16-1 • Introduction: Harmonizing cervical cancer screening data and population-based cervical cancer data in sub-Saharan Africa – The IARC-GICR Centre of Expertise	**Mashele S.** (South Africa)
SS 16-2 • Cervical cancer survival in Mauritius	**Koon Sun Pat M.** (Mauritius)
SS 16-3 • Cervical cancer screening outcomes by HIV status in Bulawayo, Zimbabwe	**Tapera T.** (Zimbabwe)
SS 16-4 • Cervical cancer screening outcomes by HIV status in Kilimanjaro, Tanzania	**Kalonge S.** (Tanzania)
Discussion and Q&A	**Muchengeti M.** (South Africa) **Kapambwe S.** (South Africa)

CLINICAL SESSIONS

Infante Hall **16.00 • 17.30**

CS 01 • POINT OF CARE TESTING FOR CERVICAL SCREENING AND MANAGEMENT

CHAIR: Cuschieri K. (UK) • Wentzensen N. (US)

We urgently need HPV tests that are accurate and safe to support cervical cancer elimination goals. While there is an increasing number of HPV tests that have been shown to be fit for purpose for cervical screening in a laboratory context, we should ensure these are complimented by those that can be delivered in the field as Point of Care (POC) tests. The recent update of the WHO Target Product Profiles for both laboratory and POC HPV tests serve as a clarion call to the community to focus their energies on relevant developments in the testing space that can have a global impact.
In this session we will hear from world experts on the challenges and opportunities around POC testing; contributions will include an overview on the WHO HPV target product profiles, how we can adapt systems and know-how from other non-HPV POC systems to our advantage, examples of POC HPV tests in development and finally methods for validation and implementation of POC in the field.

CS 01-1 • Introduction	**Cuschieri K.** (UK) **Wentzensen N.** (US)
CS 01-2 • Updated target product profiles for HPV point of care tests	**Almonte M.** (Switzerland)
CS 01-3 • What can we learn and adapt from other POC tests?	**Poljak M.** (Slovenia)
CS 01-4 • Early detection of HPV using direct lysis of affordable dry swabs for molecular point-of-care	**Omballa V.** (US)
CS 01-5 • Validation and implementation of HPV point-of care tests	**Inturrisi F.** (US)
Discussion and Q&A	**Cuschieri K.** (UK) **Wentzensen N.** (US)

CLINICAL SESSIONS

D. Maria Hall **16.00 • 17.30**

CS 02 • RECOMMENDATIONS FOR THE MANAGEMENT OF PARTNERS OF WOMEN INFECTED WITH HIGH-RISK HPV

CHAIR: Bornstein J. (Israel) • Preti M. (Italy)

While management protocols for women diagnosed with human papillomavirus (HPV) through cervical cancer screening are well-established, the implications of this sexually transmitted infection for their male partners remain less clearly defined. Nonetheless, several significant clinical and psychological concerns arise when a woman is tested positive for high risk HPV. Many women report having unanswered questions about their HPV test results. However, to date, evidence-based guidance on issues such as partner notification and implications on sexual habits, remains insufficient. In this session, we aim to outline the current clinical perspectives, recommendations, and areas requiring further investigation regarding the management of partners of women infected with high-risk HPV.

CS 02-1 • Introduction and presentation of the current CDC approach	**Bornstein J.** (Israel)
CS 02-2 • Emotional impact of a positive HPV result on the patient	**Vieira Baptista P.** (Portugal)
CS 02-3 • Physical and emotional implications for the partner of HPV-positive women	**Schejter E.** (Israel)
CS 02-4 • Should the partner be informed of the HPV status? The impact of HPV latency	**Bornstein J.** (Israel)
CS 02-5 • Should the partner be vaccinated for HPV and / or use condoms?	**Joura E.** (Austria)
CS 02-6 • Call for research of data gaps highlighted during the session	**Preti M.** (Italy)
Discussion and Q&A	**Bornstein J.** (Israel) **Preti M.** (Italy)

FREE COMMUNICATIONS

Alfândega Porto Auditorium **14.00 • 15.30**

FC SS • EXPANDING HPV VACCINE IMPLEMENTATION

CHAIR: Giuliano A. (US)

HPV-related diseases and cancers are associated with substantial clinical, economic, and humanistic burden in both men and women. HPV vaccines are a safe and efficacious intervention to prevent HPV-related diseases and cancers. Yet, global HPV immunization coverage for 2018 is estimated at 12.2%. This session aims to address advancements in vaccination implementation strategies, such as expanded population for gender neutral vaccination in low / middle income countries and gender-diverse adults, and alternative settings for vaccination. Pharmacists are poised to play a pivotal role in HPV vaccination, as evidenced by studies examining the utilization of pharmacies for vaccine administration in U.S. adults. Research will also delve into identifying barriers and facilitators to these initiatives using the Consolidated Framework for Implementation Research (CFIR). Moreover, discussions will encompass the acceptability of initiating the HPV vaccine series at age nine among U.S. providers and parents, as well as the broader impact of vaccination on anogenital wart incidence and real-world effectiveness across genders.

FC SS-1 • Introduction — **Giuliano A.** (US)

A. EXPANDING POPULATION

FC SS-A1 • Lessons Learned from Bhutan on extending girls-only HPV vaccination program to boys: A qualitative study — **Wu L.** (Taiwan)

FC SS-A2 • Human papillomavirus disease prevention in gender-diverse adults with a cervix — **Goodman E.** (US)

FC SS-A3 • Pharmacy study title - utilization of pharmacies to administer HPV vaccination in US adults — **Chen Y. T.** (US)

B. EXPANDING LOCATION / FOOTPRINT

FC SS-B1 • Identifying barriers and facilitators to pharmacy-based HPV vaccination using the Consolidated Framework for Implementation Research (CFIR): A qualitative analysis from pharmacists and pharmacy managers in Canada and the US — **Fisher-Borne M.** (US)

C. SPECIAL FOCUS ON AGE 9 (COUNTRY SURVEY AND DATA)

FC SS-C1 • Potential opportunities for human papillomavirus vaccination in the United States at age 9: Analysis of vaccine administration trends at well visits in adolescents — **Saxena K.** (US)

FC SS-C2 • Acceptability and perception of age 9 HPV vaccine series initiation among US providers and parents — **Dempsey M.** (US)

D. PUBLIC HEALTH IMPACT

FC SS-D1 • The impact of HPV vaccination on the incidence of anogenital warts in Israeli men and women — **Tadese B. K.** (US)

FCSS-D2 • A systematic review of real-world effectiveness and impact of administering human papillomavirus (HPV) vaccination in males during 2009-2024 — **Wang V.** (US)

Discussion and Q&A — **Giuliano A.** (US)

FREE COMMUNICATIONS

D. Maria Hall **8.00 • 9.30**

FC 02 • MOLECULAR BIOLOGY – TECHNOLOGY & TESTING

CHAIR: Cuschieri K. (UK) • Yilmaz E. (Sweden)

FC 02-1 • A comparative analysis of EU IVDR and Japanese PMDA performance evaluation protocols: Insights from the HPV PLUS ELITE MGB KIT study	**Jonckheere J.** (Belgium)
FC 02-2 • Single-nucleotide polymorphism in the PPARGC1B gene correlating with the development of HPV chronicity in Rwandan women living with HIV	**Uwamungu S.** (Sweden)
FC 02-3 • HPV circulating tumor DNA as a marker to monitor response to pembrolizumab and vorinostat combination in patients with advanced HPV-related squamous cell carcinoma	**Jeannot E.** (France)
FC 02-4 • Circulating cell-free HPV DNA as a valuable tool for post-treatment assessment of treatment response and monitoring of recurrence in cervical cancer patients	**Bønløkke S.** (Denmark)
FC 02-5 • HPV E4/p16INK4a immunohistochemistry for the prediction of CIN2 regression - a historical cohort study	**Hammer A.** (Denmark)
FC 02-6 • The role of tumor suppressor SPZ1 in human papillomavirus (HPV) E7-mediated oncogenesis	**Mushtaq R. M.** (UK)
FC 02-7 • Genetic manipulations of EPLIN/LIMA1 expression delineate its role in cervical carcinogenesis and permit its exploitation as a putative therapeutic target	**Pappa K.** (Greece)
FC 02-8 • Non-canonical functions of telomerase RNA component in viruses-associated cancer	**Liu X.** (US)
FC 02-9 • ZNF671 methylation as molecular marker in cervical dysplasia during pregnancy?	**Dübbel L.** (Germany)
FC 02-10 • Evaluation of HPV31 prevalence and viral load in women referred for colposcopy	**Cocuzza C.** (Italy)
FC 02-11 • The role of vaginal microbiota in human papillomavirus (HPV) clearance and persistence	**Sani C.** (Italy)
FC 02-12 • A new targeted therapy for human-HPV hybrid extrachromosomal DNA	**Nakagawa T.** (Japan)

FREE COMMUNICATIONS

D. Maria Hall **10.00 • 11.30**

FC 03 • SCREENING METHODS

CHAIR: Carozzi F. (Italy)

FC 03-1 • Brussels VALHUDES protocol: An improved framework for clinical validation of sample-collection strategies	**Arbyn M.** (Belgium)
FC 03-2 • International clinical and analytical validation of the Seegene Allplex HPV HR assay with SurePath screening samples from the Danish cervical screening program	**Pedersen H.** (Denmark)
FC 03-3 • Exploring quantitative precision for HPV detection: Transposing the RIATOL qPCR assay to the QIAcuity digital PCR system	**Pereira R.** (Belgium)
FC 03-4 • Is there a place for next generation sequencing in HPV screening?	**Leenders W.** (Netherlands)
FC 03-5 • Randomized non-inferiority trial on the effect of frequent versus infrequent cervical cancer screening in Finnish women vaccinated as early adolescents	**Ortega Llobet M.** (Sweden)
FC 03-6 • Exploring the impact of point-of-care testing paired with cervical screening pathways in remote Aotearoa New Zealand	**Lawton B.** (New Zealand)
FC 03-7 • Thin-layer cervical sample evaluation: Conventional light microscopy versus digital whole-slide imaging	**Pompeo G.** (Italy)
FC 03-8 • The daily peer review of abnormal cervical slides: 5 years of data collection and new potential quality indicators to monitor individual and laboratory performances	**Giachini C.** (Italy)
FC 03-9 • Cervical cancer screening utilization and practice patterns in government-based clinics in Puerto Rico	**Ortiz A. P.** (Puerto Rico)
FC 03-10 • Comparison of traditional and social media recruitment methods for an online questionnaire study in hrHPV positive women	**Kregting L.** (Netherlands)
FC 03-11 • Nationwide analysis of the cervical cancer prevention pathway in Estonia	**Šavrova A.** (Estonia)
FC 03-12 • Your cervical cancer screening program will not be stronger than your weakest link	**Steben M.** (Canada)

FREE COMMUNICATIONS

D. Maria Hall **11.30 • 12.45**

FC 04 • AT RISK POPULATIONS – LOW RESOURCE SETTINGS

CHAIR: Yeates K. (Canada) • Mashele S. (South Africa)

FC 04-1 • Feasibility of topical artesunate for cervical precancer treatment among women living with HIV in Kenya: Preliminary results from a phase I trial	**Mungo C.** (US)
FC 04-2 • The integration project: A comprehensive approach to four world health organization women's health priorities in Eswatini	**Norris T.** (Canada)
FC 04-3 • Applications of a comprehensive type-specific HPV-STI NGS assay across diverse sample types	**Gharizadeh F.** (US)
FC 04-4 • Challenges of implementing a multi-dose HPV vaccine schedule for adolescents living with HIV after adoption of a single-dose national strategy for cervical cancer elimination in Zambia	**Silver M. I.** (US)
FC 04-5 • Assessment of cervical cancer knowledge and awareness gaps among high-risk javad tribal women in Southern India	**Francis D. L.** (India)
FC 04-6 • The role of HPV on the resolution of female genital schistosomiasis lesions and their persistence	**Marchese V.** (Germany)
FC 04-7 • Evaluating determinants of HPV vaccine uptake in Zimbabwe: a qualitative analysis using the integrated behavioral model	**Makadzange T.** (Zimbabwe)
FC 04-8 • Determinants of HPV vaccine uptake in Zimbabwe: Quantitative analysis using the integrated behavioral model	**Makadzange T.** (Zimbabwe)

FREE COMMUNICATIONS

Arrábida Hall **10.00 • 11.00**

FC 05 • TRIAGE OF HPV POSITIVE WOMEN I

CHAIR: Cloostermans L. (Netherlands) • Palmer T. J. (UK)

FC 05-1 • Using additional risk factors in the formation of cervical (pre) malignancy risk profiles for the triage of hrHPV positive women in screening	**Boonstra M.** (Netherlands)
FC 05-2 • The p16/Ki-67 dual stain: A triage tool - What is the reality in Portugal Center region?	**Mateus D.** (Portugal)
FC 05-3 • Viral load: A promising marker for triage of women screened positive for a high-risk oncogenic HPV genotype?	**Bourlet T.** (France)
FC 05-4 • Persistent HPV-DNA positivity with triage PAP test negative: Contribution of genotyping and E6/E7 mRNA	**Zanconati F.** (Italy)
FC 05-5 • Optimizing CIN2+ risk stratification in HPV DNA-positive women: A comparison of 7-Type HPV mRNA testing and cytology	**Sørbye S. W.** (Norway)
FC 05-6 • Uncovering histologic findings in persistent low-grade cytology cases in a tertiary-level hospital In Madeira, Portugal	**Sargaço M. I.** (Portugal)

Arrábida Hall **11.00 • 12.30**

FC 06 • ANAL NEOPLASIA – VULVAR NEOPLASIA – SKIN DISEASES I

CHAIR: Palefsky J. (US) • Hampl M. (Germany)

FC 06-1 • Anal intraepithelial neoplasia screening in women from the largest center for lower genital tract disease in China	**Cong Q.** (China)
FC 06-2 • Multizonal anogenital neoplasia in women with genital precancer and cancer: Baseline findings from a prospective clinical trial	**Liu Y.** (US)
FC 06-3 • Biomarkers for anal cancer screening: Systematic review and meta-analysis	**Macedo A. C.** (Brazil)
FC 06-4 • A case of verrucous carcinoma of the vulva in a patient with human immunodeficiency virus (HIV) infection	**Jacques S.** (Portugal)
FC 06-5 • Carbon dioxide laser for the treatment of localized provoked vulvodynia	**Zhang Q.** (China)
FC 06-6 • Exploration of biomarkers in multizonal intraepithelial neoplasia: Understanding epithelial transformation (MINUET)	**Vidali S.** (UK)
FC 06-7 • Synchronous HPV infections in anal canal in patients with HPV-related gynecological diseases	**Brzezinski M.** (Poland)
FC 06-8 • Clinical characteristics of post-hysterectomy vaginal malignant tumor: A retrospective analysis of cytology, high-risk HPV, colposcopic impression and previous history for hysterectomy	**Xiao F.** (China)

ON THE SHOULDERS OF GIANTS

HONORING THE PAST, INSPIRING THE FUTURE

INFANTE HALL | 17.30 • 19.00

CHAIR: Meijer C. (Netherlands) • Dillner J. (Sweden)

As we mark the 30th anniversary of EUROGIN, it is our honor to welcome back many of the pioneers and senior members whose instrumental roles have profoundly shaped the scientific community. Their visionary leadership and unwavering dedication have been pivotal in establishing a dynamic and thriving network of researchers.
This session provides a valuable opportunity to honor and remember those exceptional contributors to our field. Their pioneering research and relentless enthusiasm have laid the groundwork for our vibrant community. As dedicated advocates of our mission to combat HPV-driven cancers, their legacies continue to fuel our discoveries and efforts, saving lives and inspiring ongoing innovation worldwide.

Introducing **CHRIS MEIJER**	**Berkhof H.** (Netherlands)
Introducing **JOAKIM DILLNER**	**Elfström M.** (Sweden)
Introducing **SILVIA FRANCESCHI**	**Baussano I.** (France)
HPV epidemiology and carcinogenesis, 3 decades of breakthroughs	**SILVIA FRANCESCHI**
Introducing **MARC ARBYN**	**Bonde J.** (Denmark)
HPV testing, bridging the past and future	**MARC ARBYN**
Introducing **JACK CUZICK**	**Wentzensen N.** (US)
Cervical cancer screening, celebrating a new paradigm	**JACK CUZICK**
Introducing **EDUARDO FRANCO**	**Ogilvie G.** (Canada)
Prevention of HPV-associated cancers: A beautiful journey in cancer control research	**EDUARDO FRANCO**

HPV AND HEAD & NECK FORUM

Porto Hall **8.00 • 19.00**

COORDINATORS:

Lang Kuhs K. A. (US) • Klussmann J. P. (Germany) • Virani S. (France) • Rettig E. (US)

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, screening, molecular diagnosis and surveillance, innovations in personalized medicine, and new discoveries in basic science.
The Forum will also feature several debates exploring screening and the risks versus benefits of liquid biopsy testing for surveillance.

HN 01 • CLINICAL / EPIDEMIOLOGY I

Submitted Papers

8.00 • 9.30

CHAIR: Fratta E. (Italy)

HN 01-1 • Prognostic impact of HPV-status and tobacco smoking in patients ≥70 years surgically treated for oropharyngeal cancer	**Polesel J.** (Italy)
HN 01-2 • Liquid biopsies with circulating plasma HPV-DNA measurements - a clinically applicable surveillance tool for patients with HPV-positive oropharyngeal cancer	**Kronberg Jakobsen K.** (Denmark)
HN 01-3 • Detection of human papillomavirus cell-free DNA in liquid biopsies predicts recurrence of oropharyngeal cancer	**Rosing F.** (Germany)
HN 01-4 • Epidemiology & treatment trends in oropharyngeal cancer in Eastern Denmark	**Groenhoej C.** (Denmark)
HN 01-5 • Nordic oropharyngeal squamous cell carcinoma cohort	**Hansen J.** (Denmark)
HN 01-6 • Demographic and clinical patterns in HPV-associated oropharyngeal cancer: Reflections of global trends in a local cohort	**Monteiro C.** (Portugal)
HN 01-7 • HPV oral status in French women with HPV genital infection: The PAPILLOR study	**Guillet J.** (France)
HN 01-8 • Public health authorities' information on the association between human papillomavirus and oropharyngeal squamous cell carcinoma in Western countries: A cross-sectional study	**Gebeke F.** (Denmark)
HN 01-9 • Deciphering the link between HPV positivity in non-smokers and HPV negativity in smokers with head and neck cancer	**Hoffmann M.** (Germany)

HPV AND HEAD & NECK FORUM

Porto Hall **8.00 • 19.00**

HN 02 • EPIDEMIOLOGY AND PREVENTION

10.00 • 11.30

CHAIR: Lang Kuhs K. A. (US)

The epidemiology of HPV-driven head and neck cancers has evolved rapidly over the past several decades, with tremendous geographic variation. Further changes are expected in the near future, as the impact of HPV vaccination takes effect. Understanding epidemiologic trends, and the risk factors that drive them, is critical to shaping public health policy and messaging. This session will feature recent trends in oropharyngeal cancer incidence and oral HPV epidemiology, as well as highlight the emerging role of HPV in other head and neck cancers.

HN 02-1 • Introduction	**Lang Kuhs K. A.** (US)
HN 02-2 • Current and future epidemiology of HPV-positive oropharyngeal cancer in the United States	**Deshmukh A.** (US)
HN 02-3 • Global trends in oropharyngeal cancer	**Lorenzoni V.** (France)
HN 02-4 • Etiological involvement in head and neck cancers outside the oropharynx	**Alemany L.** (Spain)
HN 02-5 • The emerging role of HPV in sinonasal cancers	**London N. R.** (US)
HN 02-6 • Updates in natural history of oral HPV infection	**Giuliano A.** (US)
Discussion and Q&A	**Lang Kuhs K. A.** (US)

HN 03 • CLINICAL / EPIDEMIOLOGY II

Submitted Papers

11.30 • 12.45

CHAIR: Kejner A. (US)

HN 03-1 • Knowledge gaps at diagnosis of human papillomavirus-mediated oropharyngeal carcinoma	**Windon M.** (US)
HN 03-2 • Swallowing outcomes in patients treated with radiation based therapies for HPV associated oropharyngeal cancers	**Starmer H.** (US)
HN 03-3 • Call for increased community education regarding common HPV-associated cancers within the urban safety-net hospital population	**Joseph N.** (US)
HN 03-4 • Oral human papillomavirus incidence among a general adult population in the US: Results from the PROGRESS (Prevalence of oral HPV infection, a global assessment) study	**Alemany L.** (Spain)
HN 03-5 • Oral human papillomavirus prevalence and risk factors among adults in the United Kingdom - PROGRESS Study	**Pavón M. A.** (Spain)
HN 03-6 • High-risk HPV in rare sinonasal carcinomas: A multi-institutional case-control study to ascertain behavioral risk factors and seroprevalence	**Tanavde V.** (US)

HPV AND HEAD & NECK FORUM

Porto Hall **8.00 • 19.00**

HN 04 • SCREENING FOR HPV+ OROPHARYNGEAL CANCER

14.00 • 15.30

CHAIR: Waterboer T. (Germany) • Rettig E. (US)

Human papillomavirus-driven oropharyngeal squamous cell carcinoma incidence continues to rise in many parts of the world. Although promising biomarkers are under study, screening is not yet possible. This session will highlight recent advances and ongoing research in the field, featuring an expert panel discussion on practical considerations for screening and early detection in the clinic.

HN 04-1 • Introduction — **Waterboer T.** (Germany), **Rettig E.** (US)

HN 04-2 • State of the science for oropharyngeal cancer screening — **Robbins H.** (France)

HN 04-3 • Oropharyngeal cancer screening in populations with cancer health disparities — **Lang Kuhs K. A.** (US)

HN 04-4 • Updates on the Hamburg HPV-OPC screening study (PHORECAST) — **Waterboer T.** (Germany)

HN 04-5 • TRINITY updates - Onward to remote self-sampling, TEJAS — **Sturgis E.** (US)

HN 04-6 • Panel: What should clinicians do if patients ask for screening?

- **Windon M.** (US)
- **D'Souza A.** (US)
- **Marklund L.** (Sweden)
- **Van Abel K.** (US)
- **Von Buchwald C.** (Denmark)

Discussion and Q&A — **Waterboer T.** (Germany), **Rettig E.** (US)

HPV AND HEAD & NECK FORUM

Porto Hall **8.00 • 19.00**

HN 05 • LIQUID BIOPSY FOR HPV+ OPC DIAGNOSIS AND SURVEILLANCE

16.00 • 17.30

CHAIR: Brenner C. J. (US) • Von Buchwald C. (Denmark)

This session on molecular diagnosis and surveillance in HPV-related oropharyngeal cancer offers a comprehensive exploration of cutting-edge advancements in the field. The program begins with an overview of current pathology guidelines, emphasizing the evolving standards for diagnosing and monitoring the disease. Talks will describe the use of HPV circulating tumor DNA (HPV ctDNA) in both plasma and urine as non-invasive diagnostic tools, highlighting their potential and limitations for recurrence monitoring. Updates to the clinical application and ongoing clinical trials for using HPV ctDNA in surveillance will also be examined, showcasing its evolving role in monitoring disease progression. A pivotal discussion will center on findings from recent national clinical trials, providing the most up-to-date evidence on the feasibility, advantages, and potential issues of integrating liquid biopsies into clinical care. The session culminates in a dynamic panel debate weighing the pros and cons of implementing ctDNA testing in the clinical management of HPV-related oropharyngeal cancer.

HN 05-1 • Introduction	**Brenner C. J.** (US) **Von Buchwald C.** (Denmark)
HN 05-2 • Liquid biopsy for the diagnosis and surveillance of HPV+ oropharyngeal cancer	**Faden D.** (US)
HN 05-3 • Emerging HPV-agnostic ctDNA assays	**Rettig E.** (US)
HN 05-4 • Update on surveille HPV trial status and presentation of screen HPV trial design	**Mirghani H.** (France)
HN 05-5 • Urine-based cfHPVDNA testing for HPV+ oropharyngeal cancer	**Brenner C. J.** (US)
HN 05-6 • Debate: Clinical use of ctHPVDNA testing for diagnosis and surveillance of HPV+ oropharyngeal cancer	**Swiecicki P.** (US) ***VS*** **Roof S. A.** (US)
Discussion and Q&A	**Brenner C. J.** (US) **Von Buchwald C.** (Denmark)

HPV AND HEAD & NECK FORUM

Porto Hall **8.00 • 19.00**

HN 06 • BASIC SCIENCE I / RRP

Submitted Papers

17.30 • 19.00

CHAIR: George J. (Germany)

HN 06-1 • Clinically validated HPV-6 and HPV-11 subtyping assay to guide management of patients with recurrent respiratory papillomatosis	**Wikenheiser-Brokamp K.** (US)
HN 06-2 • The burden of recurrent respiratory papillomatosis in adults and children (BREATH) study in France: A retrospective study using the national claims database	**Farge G.** (France)
HN 06-3 • Impact of HPV vaccination on juvenile laryngeal papillomas and conjunctival papillomas: Incidence and analysis of HPV subtypes in relation to vaccination	**Aakilde M.** (Denmark)
HN 06-4 • Burden of human papillomavirus-related head and neck cancers in Portugal	**Waterboer T.** (Germany)
HN 06-5 • High-risk human papillomavirus in patients with oral carcinoma and oral potentially malignant disorders in Serbia	**Petrovic A.** (Serbia)
HN 06-6 • Pilot study unraveling the interaction between HPV and the microbiome in the oropharynx	**Fernandes B.** (Portugal)
HN 06-7 • Detection of methylated tumor markers in head and neck cancer and tumor environment	**Schmitz M.** (Germany)
HN 06-8 • Specificity and sensitivity of circulating HPV-DNA in patients with oropharyngeal squamous cell carcinoma	**Kloch Bendtsen S.** (Denmark)
HN 06-9 • A predictive approach to oral HPV prevention trial enrichment	**Madathil S.** (Canada)

HPV AND HEAD & NECK FORUM

Porto Hall **8.00 • 18.00**

HN 07 • BASIC SCIENCE II

Submitted Papers

8.00 • 9.30

CHAIR: Faden D. (US)

HN 07-1 • TNM 8 staging system beyond p16: Double HPV/p16 status is superior to p16 alone in predicting outcome in oropharyngeal squamous cell carcinoma	**Kronberg Jakobsen K.** (Denmark)
HN 07-2 • Determining the relationships between quantitative HPV DNA liquid biopsy results and circulating immune cell populations in HPV-positive head and neck squamous cell carcinoma	**Wofford W.** (US)
HN 07-3 • Longitudinal monitoring of HPV-associated oropharynx cancer treated with chemoradiation using an HPV whole genome sequencing liquid biopsy (HPV-DeepSeek)	**Bakhtiar M.** (US)
HN 07-4 • Automated multiplex serology enables high-throughput screening for high-risk oropharyngeal cancer antibody profiles	**Kröller L.** (Germany)
HN 07-5 • Comparative analysis of shotgun sequencing and genotyping for HPV detection in oral brush and stimulated whole saliva samples	**Kamaja M.** (Finland)
HN 07-6 • Focal epithelial hyperplasia	**Silling S.** (Germany)
HN 07-7 • HPV DNA/RNA detection in various oral and oropharyngeal biomaterials identifies active HPV infections also in non-neoplastic tonsils	**Quabius E. S.** (Germany)
HN 07-8 • Efficacy of DNA methylation biomarkers in head and neck cancer	**Sousa Cunha A. R.** (Portugal)

HPV AND HEAD & NECK FORUM

Porto Hall **8.00 • 18.00**

HN 08 • MOLECULAR INSIGHTS INTO HPV+ OPC ONCOGENESIS

10.00 • 11.30

CHAIR: Virani S. (France) • Fenton T. (UK)

This session provides a deep dive into the molecular mechanisms driving HPV-related cancers, with a focus on the cellular and viral factors that contribute to carcinogenesis. Attendees will explore how HPV infection alters host cellular processes, including immune evasion, DNA damage repair, and tumor microenvironment interactions. Key topics will include the role of viral genetics, splicing mechanisms, and cellular origins of HPV-driven cancers, along with emerging insights into resistance to treatment. The session emphasizes cutting-edge research on the fundamental biological processes behind HPV-associated cancers, fostering interdisciplinary discussion on how these insights can inform future therapeutic and diagnostic innovations.

HN 08-1 • Introduction	**Virani S.** (France) **Fenton T.** (UK)
HN 08-2 • The APOBEC3 genes, their role in HPV+ OPC and variation across the global population	**Fenton T.** (UK)
HN 08-3 • Expression of the HPV E6 and E7 oncogenes is controlled at the level of RNA splicing	**Schwartz S.** (Sweden)
HN 08-4 • Cellular origins of HPV driven cancer at the oropharynx and the cervix; conceptual similarities with differences in the detail	**Doorbar J.** (UK)
HN 08-5 • Time to recognize carcinoma in situ (CIS) as an entity in HPV-related tonsillar carcinoma (TSCC): CIS in tonsils is similar to HSIL in cervix and precedes invasive growth	**Näsman A.** (Sweden)
HN 08-6 • The deubiquitinase USP14 promotes NFkB activity and radiation-resistance in HNSCC	**Morgan E.** (UK)
Discussion and Q&A	**Virani S.** (France) **Fenton T.** (UK)

HPV AND HEAD & NECK FORUM

Porto Hall **8.00 • 18.00**

HN 09 • NEW DISCOVERIES IN MOLECULAR EPIDEMIOLOGY

13.00 • 14.30

CHAIR: Virani S. (France) • Mazul A. (US)

This session highlights the latest advancements in molecular epidemiology related to HPV-driven cancers, with a focus on oropharyngeal cancer (OPC). Presentations will explore how genetic, environmental, and social factors intersect to influence cancer risk and outcomes. Topics include the role of germline HLA risk factors in HPV-driven OPC, the complex interactions between HPV and smoking, and how race and socioeconomic status impact tumor progression through molecular signatures. Additionally, new research on DNA methylation patterns in HPV-related OPC will be discussed, emphasizing their prognostic and therapeutic implications. The session aims to bridge the gap between genetic predisposition, environmental exposures, and cancer outcomes, fostering a comprehensive understanding of HPV-related cancer epidemiology and its potential for personalized prevention and treatment strategies.

HN 09-1 • Introduction	**Virani S.** (France) **Mazul A.** (US)
HN 09-2 • Germline HLA risk of HPV-driven OPCs	**Virani S.** (France)
HN 09-3 • HPV and smoking – shouldn't every phenotype have a genotype?	**Hayes N.** (US)
HN 09-4 • EMT signature, Race and SES in HPV-driven OPCs	**Mazul A.** (US)
HN 09-5 • DNA methylation in HPV-driven oropharyngeal cancer: Prognostic and therapeutical value	**Fratta E.** (Italy)
HN 09-6 • Genetic changes in HPV-driven OPSCC	**George J.** (Germany)
Discussion and Q&A	**Virani S.** (France) **Mazul A.** (US)

HPV AND HEAD & NECK FORUM

Porto Hall **8.00 • 18.00**

HN 10 • INNOVATIONS IN PERSONALIZED THERAPY

14.30 • 16.00

CHAIR: Klussmann J. P. (Germany)

This session will review several approaches to personalized therapy for HPV-associated cancer. These are designed to reduce the significant long-term side effects of conventional head and neck cancer treatment with surgery and radiotherapy. These include therapeutic vaccinations or biomarker-adapted adjuvant therapies. Neoadjuvant concepts will also be discussed. The session will, therefore, review important results and considerations for improving the treatment of HPV-associated head and neck cancer.

HN 10-1 • Introduction	**Klussmann J. P.** (Germany)
HN 10-2 • VB10.16 with pembrolizumab in patients with recurrent/ metastatic HNSCC	**Bratland Å.** (Norway)
HN 10-3 • Innovations in personalized therapy for HPV-driven oropharyngeal cancer	**Hanna G.** (US)
HN 10-4 • CHARE-40: A phase I/II trial of therapeutic HPV vaccine (BNT113)	**Ottensmeier C.** (UK)
HN 10-5 • Neoadjuvant chemoimmunotherapy with response-adaptive therapy for HPV+ oropharyngeal cancer	**Rosenberg A.** (US)
HN 10-6 • Therapeutic vaccination for HPV-positive oropharynx cancer	**Routman D.** (US)
HN 10-7 • Biomarker-guided postoperative adjuvant therapy for HPV-positive oropharynx cancer	**Chen L.** (US)
Discussion and Q&A	**Klussmann J. P.** (Germany)

HN 11 • RECURRENT RESPIRATORY PAPILLOMATOSIS

16.30 • 18.00

CHAIR: Best S. (US)

Recurrent Respiratory Papillomatosis (RRP) has been a vexing clinical problem for over 150 years, with recurrent growths in the airway managed by serial surgical debridement, exacting a tremendous toll on patients and their caregivers. This session will review state-of-the-art treatments now available for RRP and low-risk HPV, including a variety of non-surgical strategies used to control papilloma growth and address the underlying causative viral infection. Results of key clinical trials will be discussed, as the field moves towards a non-surgical management strategy for this chronic disease.

HN 11-1 • Introduction	**Best S.** (US)
HN 11-2 • RRP: The clinical problem	**Best S.** (US)
HN 11-3 • Local bevacizumab injections as a surgical adjunct in RRP	**Jackowska J.** (Poland)
HN 11-4 • Clinical results of immune checkpoint inhibition in RRP	**Friedman A.** (US)
HN 11-5 • Systemic bevacizumab for treatment of aggressive RRP	**Klein A.** (US)
HN 11-6 • Gene therapy / Therapeutic vaccination for low-risk HPV	**Pransky S.** (US)
Discussion and Q&A	**Best S.** (US)

SCIENTIFIC SESSIONS

Alfândega Porto Auditorium **8.00 • 9.30**

SS 17 • RISCC AND PERCH: EU INITIATIVES TO ELIMINATE CERVICAL CANCER

CHAIR: Arbyn M. (Belgium) • Berkhof H. (Netherlands)

Two large projects funded by the European Commission, RISCC and PERCH, have recently been completed. RISCC aims to improve cervical cancer screening by using risk stratification to determine who should be screened and who should be referred for colposcopy. PERCH aims to increase HPV vaccination coverage in European countries, improve surveillance systems, and increase knowledge and awareness of HPV-related disease in target populations. In the first part of this session, the main results of RISCC will be presented and an overview of different screening policies and triage policies for HPV-positive women will be provided. A large-scale implementation of risk-based screening in Sweden will also be presented. In the second part of this session, the current status of HPV vaccination in Europe will be presented and actions will be provided to improve HPV vaccination. Both RISCC and PERCH aim to work towards the World Health Organization's (WHO) goal of eliminating cancer.

SS 17-1 • Introduction	**Arbyn M.** (Belgium) **Berkhof H.** (Netherlands)

A. SCREENING

SS 17-A1 • Current European policies for cervical cancer screening and triage of HPV+ women	**Arbyn M.** (Belgium)
SS 17-A2 • Risk-based screening, an overview of the RISCC network	**Berkhof H.** (Netherlands)
SS 17-A3 • Swedish implementation of risk-based screening	**Dillner J.** (Sweden)

B. VACCINATION

SS 17-B1 • PERCH: A European joint action to improve HPV vaccination in the member states	**Bucciardini R.** (Italy)
SS 17-B2 • Status of HPV vaccination in Europe	**Bruni L.** (Spain)
SS 17-B3 • Actions to improve HPV vaccination in Europe, how to bring the message to the public	**Ivanus U.** (Slovenia)
Discussion and Q&A	**Arbyn M.** (Belgium) **Berkhof H.** (Netherlands)

SCIENTIFIC SESSIONS

Alfândega Porto Auditorium **10.00 • 11.30**

SS 18 • HPV DRIVEN CANCER IN IMMUNOSUPPRESSED POPULATIONS

CHAIR: Moscicki A. B. (US) • Goodman M. (US)

People with immunosuppressive conditions, such as HIV infection or a solid organ transplant, have an elevated risk for developing HPV-driven cancers. This elevated risk arises in large part due to lack of immune clearance and chronic persistence of oncogenic HPV infections. Other factors contribute, such as high-risk sexual activity and tobacco use. Additional conditions, such as autoimmune diseases and treatment with targeted immune-modulating medications, may also pose an elevated risk for HPV-driven cancers. As people with these conditions live longer and age, their risk for HPV-driven cancers may increase over time. As a result, screening these populations for HPV-driven cancers based on estimates of absolute risk will likely be important.

SS 18-1 • Introduction	**Moscicki A. B.** (US) **Goodman M.** (US)
SS 18-2 • HPV driven cancer risk in solid organ transplant recipients	**Goodman M.** (US)
SS 18-3 • Autoimmune disease and anal cancer risk	**Moscicki A. B.** (US)
SS 18-4 • HPV driven cancer in people with HIV - the South Africa HIV cancer match study	**Kipo D.** (Ghana)
SS 18-5 • Anogenital disease in immunosuppressed populations	**Silverberg M.** (US)
Discussion and Q&A	**Moscicki A. B.** (US) **Goodman M.** (US)

SCIENTIFIC SESSIONS

Infante Hall **8.00 • 9.30**

SS 19 • ENHANCING CERVICAL CANCER SCREENING BY IMPROVING ATTENDANCE AND SELF-SAMPLING

CHAIR: Wisman B. (Netherlands) • Heideman D. (Netherlands)

In this scientific session on enhancing cervical cancer screening by improving attendance and self-sampling, we will discuss innovations in cervical cancer screening, focusing on self-sampling, attendance rates, and effective triage testing. Cervical cancer remains a global health challenge, but recent developments in self-sampling have created opportunities to increase screening participation, particularly among under-screened populations. Self-sampling allows women to collect samples in the privacy and comfort of their own homes, addressing barriers like stigma, limited access to healthcare facilities, and logistical challenges.

This session will explore the latest evidence on how self-sampling initiatives impact screening attendance, which sociodemographics are related to using self-sampling and examine triage testing strategies for women who test HPV positive on a self-sample to ensure that women with an underlying lesion are accurately identified and managed. With effective triage testing following HPV self-sampling, we can improve early detection and reduce the incidence and mortality of cervical cancer.

SS 19-1 • Introduction	**Wisman B.** (Netherlands) **Heideman D.** (Netherlands)
SS 19-2 • Enhancing equity in cervical screening - initiatives to increase screening participation	**Bateson D.** (Australia)
SS 19-3 • Sociodemographics of women using self-sampling	**Hansen B.** (Norway)
SS 19-4 • DNA methylation as triage test in hrHPV-positive women using self-sampling	**Wisman B.** (Netherlands)
SS 19-5 • Extended HPV genotyping in hrHPV-positive women using self-sampling	**Tranberg M.** (Denmark)
SS 19-6 • Implementation of risk assessment in hrHPV-positive women using self-sampling	**Wentzensen N.** (US)
Discussion and Q&A	**Wisman B.** (Netherlands) **Heideman D.** (Netherlands)

SCIENTIFIC SESSIONS

Infante Hall **10.00 • 11.30**

SS 20 • SINGLE DOSE HPV VACCINATION: UPDATES ACROSS RESEARCH DOMAINS

CHAIR: Brisson M. (Canada) • Mugo N. (Kenya)

HPV vaccines received regulatory approval and were recommended for use in young girls nearly two decades ago. Uptake is mostly high in resource-rich settings. In lower resource settings where the burden of cervical cancer is disproportionately high, access and uptake to HPV vaccines are nowhere near satisfactory despite evidence that HPV vaccination is highly cost-effective and a significant value-for-money investment. The discovery that only a single dose of the HPV vaccines may be needed to confer adequate protection may make equitable access to HPV vaccines possible. Indeed, the recent WHO recommendation allowing for one or two doses is already gaining traction. This session aims to update the state of the science related to single-dose HPV vaccination vaccine efficacy, effectiveness and durability, health and economic impacts, and global policy changes.

SS 20-1 • Introduction	**Brisson M.** (Canada)
SS 20-2 • Single-dose HPV vaccine clinical trial data	**Mugo N.** (Kenya)
SS 20-3 • Single-dose HPV vaccine effectiveness data	**Drolet M.** (Canada)
SS 20-4 • Health and economic impact of single-dose HPV vaccination	**Brisson M.** (Canada)
SS 20-5 • Global policy changes, decision making and implications for national immunization programs	**Ndiaye C.** (Senegal)
Discussion and Q&A	**Brisson M.** (Canada) **Mugo N.** (Kenya)

CLINICAL SESSIONS

D. Maria Hall **8.00 • 9.30**

CS 03 • HPV AND REPRODUCTIVE HEALTH

CHAIR: Louvanto K. (Finland) • Trottier H. (Canada)

HPV has far-reaching implications beyond cervical cancer, influencing reproductive health in multiple ways. This session delves into the emerging evidence surrounding HPV's role in infertility, pregnancy complications, and vertical transmission, as well as the impact of cervical lesion treatments on obstetrical outcomes. We will also explore how HPV vaccination may shape reproductive health outcomes and the broader implications for clinical practice. Our experts will present concise insights on these topics, followed by a comprehensive discussion. Join us for an engaging exploration of how HPV research is reshaping our understanding of reproductive health and guiding future interventions.

CS 03-1 • Introduction	**Louvanto K.** (Finland) **Trottier H.** (Canada)
CS 03-2 • HPV role in infertility	**Bornstein J.** (Israel)
CS 03-3 • HPV during pregnancy and risk of birth complications	**Trottier H.** (Canada)
CS 03-4 • Cervical lesion treatments impact on obstetrical complications	**Wiik J.** (Sweden)
CS 03-5 • Vertical transmission of HPV during perinatal period	**Benard A.** (Canada)
CS 03-6 • HPV vaccinations impact on the reproductive health	**Koivisto T.** (Finland)
Discussion and Q&A	**Louvanto K.** (Finland) **Trottier H.** (Canada)

CLINICAL SESSIONS

D. Maria Hall **10.00 • 11.30**

CS 04 • HPV IN OLDER WOMEN: EPIDEMIOLOGY, SCREENING AND MANAGEMENT

CHAIR: Carozzi F. (Italy) • Sundström K. (Sweden)

Most guidelines recommend cessation of screening at around the age of 65 in women with a sufficiently negative screening history. As the population ages, the need for disease prevention in older age groups is likely to increase. However, in older age groups we have a low prevalence of incident infections and little data on the proportion of persistent HPV infections that would lead to cancer after a latency period. After menopause, the cervix undergoes significant physiological changes that can lead to discomfort during speculum insertion, reduced accuracy, and potential harm from overtreatment. So far, it's difficult to make a strong and clear decision about increasing age. Extending the duration of screening means finding the right balance between the benefits of reducing cancer, while limiting the harms and costs of overscreening.

CS 04-1 • Introduction	**Carozzi F.** (Italy) **Sundström K.** (Sweden)
CS 04-2 • Age at last screening and remaining lifetime risk of cervical cancer in older women	**Franco E.** (Canada)
CS 04-3 • Screening in older women: What has changed with the introduction of HPV testing?	**Hammer A.** (Denmark)
CS 04-4 • HPV genotyping distribution in older women	**Sundström K.** (Sweden)
CS 04-5 • New HPV infection in older women and risk of progression	**Wentzensen N.** (US)
CS 04-6 • How to manage older women with persistent infection	**Elfgren K.** (Sweden)
CS 04-7 • Cervical cancer stage at diagnosis and survival among women ≥65 years	**Preti M.** (Italy)
Discussion and Q&A	**Carozzi F.** (Italy) **Sundström K.** (Sweden)

FREE COMMUNICATIONS

Arrábida Hall **8.00 • 10.00**

FC 07 • EPIDEMIOLOGY

CHAIR: Franceschi S. (Italy) • D'Souza A. (US)

FC 07-1 • Cervical cytology and HPV distribution in Cape Verde: A snapshot of a country taken during its first HPV nation-wide vaccination campaign	**Macedo Pinto I.** (Portugal)
FC 07-2 • Primary HPV sample collection and 20-year follow-up of the ARTISTIC Trial cohort	**Gilham C.** (UK)
FC 07-3 • HPV prevalence in transgender in two reference centers in Brazil	**Baldon E.** (Brazil)
FC 07-4 • Are multiple-genotype human papillomavirus infections associated with virus persistence?	**Leal M.** (Portugal)
FC 07-5 • Population-based age-period-cohort analysis of declining human papillomavirus prevalence in Sweden	**Gray P.** (Sweden)
FC 07-6 • Insights on HPV genotyping results in Portuguese private practice	**Costa L.** (Portugal)
FC 07-7 • Incidence trends of anogenital warts in Sweden 2006-2022	**Lei J.** (Sweden)
FC 07-8 • Factors associated with persistent oncogenic oral HPV infections by age group in the HIM study	**Mandishora R. S.** (US)
FC 07-9 • Analysis of high-risk human papillomavirus (hrHPV) genotypes in multiple infections in women referred to colposcopy	**Martinelli M.** (Italy)
FC 07-10 • Cervical cancer mortality trends in England and Poland	**Peto J.** (UK)
FC 07-11 • Differences between conditional and overall survival in oropharyngeal squamous cell carcinoma HPV-positive and HPV-negative: Analysis by age, clinical stage and other risk factors	**De Abreu M.** (Brazil)
FC 07-12 • HPV vaccine impact - a portal to new discoveries?	**Vaughan L.** (US)
FC 07-13 • The burden of anogenital, oral, and cervical HPV-related diseases in people living with HIV: A systematic literature review	**Tadese B. K.** (US)
FC 07-14 • Epstein-Barr virus (EBV) serology and its association with oral human papillomavirus (HPV) infection outcomes in children during the first three years of their lives	**Rinne S.** (Finland)

SPECIALIZED WORKSHOPS

Arrábida Hall **10.00 • 11.30**

WS 04 • CERVICAL CANCER SCREENING – FROM EVIDENCE TO PRACTICE

CHAIR: Cloostermans L. (Netherlands) • Rebolj M. (UK)

At EUROGIN a lot of evidence for screening is presented. The evidence for HPV-based screening has been very compelling for years. But the implementation from evidence to practice is not easy. Some countries are still struggling with the switch to HPV-screening. Barriers can occur in very different ways (legislation, funding, evidence, acceptance from public and professionals, politics, etc). In this session we ask implementation managers from several countries to share their pitfalls and solutions. This is interesting for other managers, but also for researchers to broaden their knowledge and valorization).

WS 04-1 • Introduction — **Cloostermans L.** (Netherlands), **Rebolj M.** (UK)

WS 04-2 • Panel discussion

- **E. Brouwer** (Netherlands)
- **L. Cloostermans** (Netherlands)
- **R. Ivanauskiene** (Lithuania)
- **P. Pearmain** (UK)
- **M. Rebolj** (UK)
- **R. Serizawa** (Denmark)

SCIENTIFIC SESSIONS

Alfândega Porto Auditorium **14.30 • 16.00**

SS 21 • DEBATE SESSION

CHAIR: Cuschieri K. (UK) • Palmer T. J. (UK) • Franco E. (Canada)

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, or disease management. They present their arguments and then debate with each other. The session in 2025 will showcase debates on four key areas: (i) will the push for cervical cancer elimination increase inequity within and between countries, (ii) the optimal age for HPV vaccination – infant or pre-teens, (iii) is morphology of value in HPV positive triage, and (iv) does VIA have a place in cervical cancer screening. Presenters are not necessarily staunch supporters of the position they were asked to defend; they can be neutral or even prefer the other side. They were asked to provide the audience with a clear and balanced view of the state of the controversy or evolving science in each area.

SS 21-1 • Introduction

Cuschieri K. (UK)
Palmer T. J. (UK)
Franco E. (Canada)

SS 21-2 • Accelerating HPV-related cancer elimination: Will it increase disparities in health?

> Yes — **Herrero R.** (Costa Rica)
> No — **Bateson D.** (Australia)

SS 21-3 • Should HPV vaccination policy target infants instead of pre-teens or teens?

> Yes — **Bonanni P.** (Italy)
> No — **Hanley S.** (UK)

SS 21-4 • Should VIA be used as cervical cancer screening in low resource settings?

> Yes — **McMullen W.** (UK)
> No — **De Sanjosé S.** (Spain)

SS 21-5 • Is there a role for morphological assessments in triage of HPV positive screening tests?

> Yes — **Franco E.** (Canada)
> No — **Dillner J.** (Sweden)

Discussion and Q&A

Cuschieri K. (UK)
Palmer T. J. (UK)
Franco E. (Canada)

SCIENTIFIC SESSIONS

Infante Hall **13.00 • 14.30**

SS 22 • FROM GENDER-NEUTRAL VACCINATION TO UNIVERSAL VACCINATION AGAINST HPV: A CHANGE OF PARADIGM IN PUBLIC HEALTH

CHAIR: Bonanni P. (Italy) • Vorsters A. (Belgium)

This session aims to present the concept of 'Universal HPV Vaccination' as an evolution of 'Gender-Neutral Vaccination' for consideration by stakeholders and policymakers.
Achieving 90% global HPV vaccine coverage among females remains a significant challenge, with access being a key barrier. This includes issues such as the availability of vaccines, logistical hurdles in implementing national programs, and limited resources that sometimes limit vaccination efforts to a single birth cohort. The universal HPV vaccination approach has the potential to increase demand, which in turn can drive expanded access and availability. This approach aligns with trends observed in recent years, where increased uptake has contributed to enhanced supply and affordability of other vaccines. By accelerating these dynamics, we can advance more rapidly toward the goal of cervical cancer elimination while providing comprehensive protection against HPV-related diseases for both females and males.
This session will delve into critical topics such as the appropriate age for immunization programs, vaccine supply, integration with secondary prevention efforts, and the use of modeling to guide strategies, in addition also the perspective and challenges of lower-middle-income countries will be addressed.

SS 22-1 • Introduction	**Bonanni P.** (Italy) **Vorsters A.** (Belgium)
SS 22-2 • Cultural and implementation advantages of universal HPV vaccination: Not only a change of terminology	**Vorsters A.** (Belgium)
SS 22-3 • Is HPV vaccination at a lower age a feasible option in both low income and high income countries? Opportunities and challenges	**Franco E.** (Canada)
SS 22-4 • Shortage of HPV vaccines and new international producers: Where we are now	**Bloem P.** (Switzerland)
SS 22-5 • Elimination of HPV-associated cancer: Vaccines and beyond	**Franceschi S.** (Italy)
SS 22-6 • Feasibility of HPV infection elimination: A modeling perspective	**Baussano I.** (France)
SS 22-7 • Perspective of a LMIC country	**Mugo N.** (Kenya)
Discussion and Q&A	**Bonanni P.** (Italy) **Vorsters A.** (Belgium)

SCIENTIFIC SESSIONS

Infante Hall **14.30 • 16.00**

SS 23 • NEXT GENERATION ANALYSIS AND BIOINFORMATICS

CHAIR: Stosic M. (Norway) • Arroyo Mühr L. S. (Sweden)

NGS and bioinformatics are critical for advancing HPV research, impacting areas such as genomics, viral detection, integration, variant calling, and microbiome analysis. These topics directly influence the understanding and management of HPV-related cancers. The session will discuss different analytical approaches providing a holistic view of current advancements in the field.

SS 23-1 • Introduction	**Stosic M.** (Norway) **Arroyo Mühr L. S.** (Sweden)
SS 23-2 • Quality assurance and NGS for HPV detection	**Godoy L.** (Canada)
SS 23-3 • HPV integration	**Molina M.** (Netherlands)
SS 23-4 • HPV variant calling - insights into evolution and cervical cancer development	**Söreng K.** (Norway)
SS 23-5 • The interplay between the constituents of the microbiome in cancer development	**Rounge T. B.** (Norway)
SS 23-6 • A novel triaging tool in cervical cancer screening – Performance of a DNA methylation test in a population-based cohort	**Barrett J.** (Austria)
SS 23-7 • Simulations: Optimizing laboratory and bioinformatics methods	**Stosic M.** (Norway)
Discussion and Q&A	**Stosic M.** (Norway) **Arroyo Mühr L. S.** (Sweden)

SCIENTIFIC SESSIONS

Arrábida Hall **13.00 • 14.30**

SS 24 • HPV SELF-SAMPLING AMONG TRANSGENDER AND GENDER DIVERSE INDIVIDUALS

CHAIR: Nyitray A. G. (US)

Transgender and gender diverse (TGD) individuals have a gender identity that differs from their sex assigned at birth. Transgender men and non-binary adults assigned female at birth are just as likely as cisgender women (those whose gender identity matches their sex assigned at birth) to be exposed to HPV, but are less likely to have had cervical cancer screening. Evidence suggests that transgender women and non-binary people assigned male at birth may have higher exposure to both HPV and HIV than heterosexual cisgender men. TGD patients face multiple barriers to HPV prevention including anticipated or experienced harassment in medical settings and gender dysphoria (distress associated with the disconnect between identity anatomy) from physical exams. Therefore, HPV self-sampling has been proposed to overcome many barriers to HPV-related cancer screening among TGD individuals. The symposium will present data from several studies examining HPV self-sampling among transgender and non-binary people. Content proposed includes an overview of the unique needs of these populations regarding attitudes towards HPV self-sampling at several body sites and in different settings (e.g., the clinic versus at home sampling).

Learning Objectives: Participants should understand the needs of the transgender community pertaining to HPV self-testing.

- Acceptability of HPV self-testing at different body sites among transgender people
- Feasibility of at-home self-testing
- Comparisons between in-clinic and at-home sampling
- Special considerations for transmasculine and non-binary people with a cervix
- Special considerations for transfeminine and non-binary people assigned male at birth

SS 24-1 • Introduction	**Nyitray A. G.** (US)
SS 24-2 • Anal cancer screening beliefs, behaviors, and knowledge among cisgender, transgender, and gender-diverse people in the prevent anal cancer studies	**Nyitray A. G.** (US)
SS 24-3 • Self-sampling for human papillomavirus testing in a transgender and gender diverse population assigned female at birth	**Brouwer A. F.** (US)
SS 24-4 • HPV self-sampling among transmasculine and non-binary adults with a cervix	**Berner A. M.** (UK)
SS 24-5 • Feasibility and acceptability of HPV self-sampling among transfeminine and non-binary adults assigned male at birth	**Berner A. M.** (UK)
Discussion and Q&A	**Nyitray A. G.** (US)

SCIENTIFIC SESSIONS

Arrábida Hall **14.30 • 16.00**

SS 25 • ROLE OF HLA IN IMMUNE EVASION OF HPV–INDUCED TUMORS

CHAIR: Hillemanns P. (Germany)

HPV infection triggers the development of several cancers. On the other hand, polymorphisms of the gene-rich Human Leukocyte Antigen (HLA) locus, in particular within the Major Histocompatibility Complex (MHC) gene clusters, have been linked to the risks for cervical cancer and for head and neck cancer and contribute to disease heritability. However, relatively little is known about the exact genes involved, their interplay and how they modify the acquisition and persistence of HPV infection. More insights into the mechanisms of immune escape that is potentially associated with HLA risk variants would be needed to develop means of targeted therapy and prevention. The session "Role of HLA in immune evasion of HPV-induced tumors" serves to present current knowledge about the important role of HLA for two prominent HPV-associated cancers, cervical cancer and oropharyngeal cancer, and will discuss the possibilities to use this knowledge in future research and medical practice.

SS 25-1 • Introduction	**Hillemanns P.** (Germany)
SS 25-2 • HLA variants as risk factors in cervical cancer	**Ramachandran D.** (Germany)
SS 25-3 • Role of HLA for risk and prognosis of head and neck squamous cell carcinoma	**Virani S.** (France)
SS 25-4 • HLA class I loss of function and its association with the progression of cervical intraepithelial neoplasia	**Kawazu M.** (Japan)
SS 25-5 • MHC-associated peptides in human cervical tumours	**Ternette N.** (UK)
Discussion and Q&A	**Hillemanns P.** (Germany)

SCIENTIFIC SESSIONS

Alfândega Porto Auditorium **16.30 • 18.00**

SS 26 • IMPACT OF INTERVENTIONS IN THE POST-HPV VACCINATION WORLD

CHAIR: Lehtinen M. (Finland) • Dillner J. (Sweden)

Prophylactic vaccination is a powerful tool that changes exposure to infections and associated disease morbidity, and eventually need to tackle the diseases. In his plenary lecture professor Marc Lipsitch from Harvard University will elaborate the impact of vaccination on important public health issues associated with common infections. HPV type-replacement and various interactions of non-vaccine HPV types will be evaluated by doctors Ville Pimenoff and Karin Sundström from Karolinska Institute. Dr. Iacopo Baussano (IARC) presents model of world without oncogenic HPV types after which Dr. Hans Berkhof from Amsterdam Free University will assess risk-based cervical screening in the post-vaccination world. Finally, Dr. Simopekka Vänskä from the Finnish Institute for Health & Welfare will describe model-based pros and cons of ongoing HPV interventions.

SS 26-1 • Understanding the effects of vaccination on infections and diseases	**Lipsitch M.** (US)
SS 26-2 • Evaluating HPV type-replacement using randomized trials with LTFU	**Pimenoff V.** (Sweden)
SS 26-3 • Interactions of infections with benign and oncogenic HPV types	**Sundström K.** (Sweden)
SS 26-4 • Risk-based screening after gender-neutral vaccination	**Berkhof H.** (Netherlands)
SS 26-5 • Risk-based screening for cervical cancer in Europe, a modeling study	**Baussano I.** (France)
SS 26-6 • Potential of interventions in differentially evolving situations	**Vänskä S.** (Finland)

SCIENTIFIC SESSIONS

Infante Hall **16.30 • 18.00**

SS 27 • GLOBAL EVIDENCE ON HPV INVOLVEMENT IN HUMAN MALIGNANCIES AT SPECIFIED NON-GENITAL SITES

CHAIR: Syrjänen K. (Finland) • Syrjänen S. (Finland)

Apart from cancers of the genital tract, human papillomaviruses (HPV) are associated with a large number of benign, premalignant and malignant lesions at different anatomic sites in both genders. Malignant tumors and their precursors are usually attributed to the oncogenic (high-risk, HR) HPV types, whereas benign lesions (mostly papillomas) are ascribed to the low-risk (LR) HPV types, most notably HPV6 and HPV11. The evidence linking HPV to each individual tumor category can be classified as: 1) established, 2) emerging, and 3) controversial. After some years of break, a special session is included in the EUROGIN program, addressing the global evidence on HPV involvement in these non-genital tumors, including cancers at the following anatomic sites: I) sinonasal, ii) larynx, iii) lung, iv) esophagus. In addition to these four specific presentations, three other cancers with emerging evidence on HPV will be shortly addressed in the Introduction: I) breast, ii) colorectum, and iii) prostate.

SS 27-1 • Introduction	**Syrjänen K.** (Finland)
SS 27-2 • HPV is associated with a subset of lung cancer	**Sequeira T.** (Portugal)
SS 27-3 • Global evidence on HPV involvement in sinonasal carcinomas	**Syrjänen S.** (Finland)
SS 27-4 • Pooled prevalence of HPV in laryngeal carcinomas	**Dias O.** (Portugal)
SS 27-5 • HPV involvement in esophageal cancer	**Syrjänen K.** (Finland)
Discussion and Q&A	**Syrjänen K.** (Finland) **Syrjänen S.** (Finland)

CLINICAL SESSIONS

D. Maria Hall **13.00 • 14.30**

CS 05 • COLPOSCOPY: DISCUSSION ON CHALLENGING CASES

CHAIR: Bouchard C. (Canada)

This session: "Colposcopy: Discussion on challenging cases" is designed to enhance clinical skills and decision-making for physicians. The session will offer a comprehensive platform for analyzing complex cases, discussing the challenges often faced in diagnosing and managing cervical pathology associated with special conditions such as obesity, vaginal atrophy and cervical stenosis as well as vaginal lichen planus of the patients. Renowned speakers will also propose tips and tricks to help physicians to perform satisfying colposcopy in these circumstances and eliminate HSIL and cancerous lesions that can be difficult to diagnose.

CS 05-1 • Introduction	**Bouchard C.** (Canada)
CS 05-2 • Obesity in colposcopy	**Bentley J.** (Canada)
CS 05-3 • Severe atrophy & cervical stenosis in colposcopy	**Hillemanns P.** (Germany)
CS 05-4 • Vaginal lichen planus in colposcopy	**Bornstein J.** (Israel)
Discussion and Q&A	**Bouchard C.** (Canada)

CLINICAL SESSIONS

D. Maria Hall **14.30 • 16.00**

CS 06 • MANAGEMENT OF EARLY STAGE CERVICAL CANCER & AIS

CHAIR: Siegler E. (Israel)

The treatment of Early Stage Cervical Cancer (ESCC) stage I A 2-I B 2(FIGO 2018) is radical hysterectomy (RH) and pelvic lymphadenectomy. Studies describe that between 52%-97.5% of women who undergo RH have no residual cancer in the surgical specimen. Is RH an outdated operation? Should conization and lymphadenectomy or simple hysterectomy be the new standard of care? How can we choose wisely the women for less radical operations? We will discuss the role of conization before RH. Should it become a standard intervention before hysterectomy? The standard treatment of Adeno Carcinoma in Situ (AIS) is hysterectomy but we will present the options of conservative management of AIS.
A study examined if negative HR-HPV short term (meaning 6 weeks) after conization of ESCC and AIS was in high correlation with absence of residual tumor in the final pathology. May negative HR-HPV be an additional parameter for risk assessment and decision making to reduce radicality of the treatments. Finally we will try to summarize all that data and describe parameters of detecting the ideal candidates for conservative interventions and to predict the future treatment of ESCC and AIS.

CS 06-1 • Introduction	**Siegler E.** (Israel)
CS 06-2 • Conization before hysterectomy?	**Matanes E.** (Israel)
CS 06-3 • Conservative management of AIS	**Grigore M.** (Romania)
CS 06-4 • HPV as a test of cure after conization of early stage cervical cancer and AIS?	**Siegler E.** (Israel)
CS 06-5 • The future of early stage cervical cancer treatments	**Joura E.** (Austria)
Discussion and Q&A	**Siegler E.** (Israel)

CLINICAL SESSIONS

D. Maria Hall **16.30 • 18.00**

CS 07 • RECURRENCE OF HSIL AFTER TREATMENT

CHAIR: Aro K. (Finland) • Louvanto K. (Finland)

The recurrence of HSIL following treatment presents significant challenges in cervical cancer prevention. This session will examine key factors contributing to recurrent and residual disease after cervical LEEP, the risks associated with persistent HPV infections post-treatment, and the critical role of tailored follow-up protocols in managing HSIL cases. Additionally, we will discuss fertility-sparing approaches in adenocarcinoma in situ (AIS) and the implications for post-treatment monitoring. Join us for an in-depth discussion on optimizing patient outcomes through evidence-based strategies and addressing the complexities of managing HSIL recurrence.

CS 07-1 • Introduction	**Aro K.** (Finland) **Louvanto K.** (Finland)
CS 07-2 • Reasons of recurrent and residual disease after cervical LEEP	**Athanasiou A.** (Greece)
CS 07-3 • Risk of persistent HPV infection after treatment	**Hammer A.** (Denmark)
CS 07-4 • Post-treatment follow-up after HSIL	**Adams R. A.** (South Africa)
CS 07-5 • Fertility sparing in AIS and post-treatment follow-up	**Aro K.** (Finland)
Discussion and Q&A	**Aro K.** (Finland) **Louvanto K.** (Finland)

CLINICAL SESSIONS

Arrábida Hall **16.30 • 18.00**

CS 08 • CHALLENGES AND OPPORTUNITIES TO IMPLEMENTATION OF SECONDARY ANAL CANCER PREVENTION PROGRAMS

CHAIR: Palefsky J. (US) • Nyitray A. G. (US)

Guidelines for anal cancer screening have recently been published in several countries. These guidelines focus on a small subset of the population believed to be at high risk of anal cancer. Despite this, implementation of these guidelines is currently very challenging due to the limited availability of clinicians trained in screening, and identification and treatment of anal high-grade squamous intraepithelial lesions (HSIL). This session addresses current requirements for training clinicians in these tasks, how training could be accelerated, and how training programs can be scaled up to meet the demand. Another element of demand is the need to follow individuals after they have been screened or treated for HSIL. Current screening guidelines offer algorithms for repeated screening of those who do not need referral for high resolution anoscopy or standard anoscopy, but there is currently little guidance on how to follow individuals after treatment for HSIL. Finally the session will address another element of demand, i.e. defining the populations that should be screened, and how screening algorithms might need to be modified to suit those populations.

CS 08-1 • Introduction	**Palefsky J.** (US) **Nyitray A. G.** (US)
CS 08-2 • Overview of the biggest challenges to implementation of secondary anal cancer prevention programs	**Palefsky J.** (US)
CS 08-3 • What standards are needed for HRA competence and how can we increase the number of HRA providers?	**Hillman R.** (Australia)
CS 08-4 • What standards are needed for competence in anal HSIL treatment and how can we increase the number of providers treating anal HSIL?	**Goldstone S.** (US)
CS 08-5 • When do we stop screening for anal HSIL?	**Nyitray A. G.** (US)
CS 08-6 • How do we follow people after HSIL treatment and when do we stop?	**Gaisa M.** (US)
CS 08-7 • Secondary anal cancer prevention in high-risk people not living with HIV	**Rosa-Cunha I.** (US)
Discussion and Q&A	**Palefsky J.** (US) **Nyitray A. G.** (US)

FREE COMMUNICATIONS

Despachantes Hall **13.15 • 14.45**

FC 08 • HPV PROPHYLACTIC VACCINES II

CHAIR: Paavonen J. (Finland)

FC 08-1 • Acceptance of human papillomavirus vaccination and parents' willingness to vaccinate their daughters in Ethiopia: A systematic review and meta-analysis	**Habteyohannes A. D.** (Ethopia)
FC 08-2 • HPV vaccine effectiveness at primary HPV screening among the first cohorts targeted by catch-up vaccination	**Acuti Martellucci C.** (Italy)
FC 08-3 • The HPV serology standardization initiative: Aims and progress to date at the Frederick National Laboratory for Cancer Research	**Pinto L.** (US)
FC 08-4 • Prevalence of CIN2+ in vaccinated and unvaccinated women infected by HPV types not preventable by the bi/quadrivalent vaccines	**Armaroli P.** (Italy)
FC 08-5 • The mechanism of HPV L1 capsid protein mediated escape from vaccine immunity	**Sui L.** (China)
FC 08-6 • It's not too late to vaccinate: A quality improvement project aiming to improve human papillomavirus (HPV) vaccine uptake at time of loop electrosurgical excision procedure (LEEP)	**Lewis J.** (Canada)
FC 08-7 • HPV2: Phase 2 clinical trial evaluating secondary HPV vaccination after treatment of high-grade cervical lesions	**Alloy N.** (France)
FC 08-8 • Is Finland loosing the battle against HPV: Continued suboptimal HPV vaccine coverage	**Paavonen J.** (Finland)
FC 08-9 • High Impact of quadrivalent human papillomavirus vaccination on the prevalence of high-risk HPV infections and cervical abnormalities: a retrospective study from Northern Portugal	**Rosário A.** (Portugal)

FREE COMMUNICATIONS

Despachantes Hall **14.45 • 16.15**

FC 09 • HPV SCREENING I

CHAIR: Ogilvie G. (Canada) • Elfström M. (Sweden)

FC 09-1 • Clinically validated HPV assays offer comparable long-term safety in primary cervical cancer screening: A 9-year follow-up of a population-based screening cohort	**Oštrbenk A.** (Slovenia)
FC 09-2 • Limited value of extended HPV genotyping in screening for cervical glandular lesions	**Kööpikkä J.** (Finland)
FC 09-3 • Quality assurance of an HPV screening program using proportion of "HPV-negative" HSIL	**Lagheden C.** (Sweden)
FC 09-4 • Scalable and validated HPV testing: High-throughput, self-sampling and affordability for LIMCs	**Li H.** (Sweden)
FC 09-5 • Risk stratification by HPV genotype in HPV primary screening in the South-East Health region in Norway	**Li H.** (Sweden)
FC 09-6 • Implementation of HPV HR testing in primary screening in the Czech Republic	**Rob L.** (Czech Republic)
FC 09-7 • Population-based implementation of primary HPV screening using both self-screening and liquid-based cytology	**Gentile L.** (Canada)
FC 09-8 • Clinical validation of the Sansure® Human Papillomavirus DNA Diagnostic Kit for use in primary cervical cancer screening	**Dhillon S.** (Belgium)
FC 09-9 • Evaluation of the 60+ screening algorithm in the Capital Region of Denmark	**Tønnes Pedersen B.** (Denmark)
FC 09-10 • Previous abnormality is associated with long-time increased risk of HPV positivity among women over 50 years old: A registry-based cohort study	**Yao Q.** (Sweden)
FC 09-11 • Effect of HPV vaccination in the Norwegian childhood immunization program: HPV prevalence and incidence of Cervical Intraepithelial Neoplasia (CIN)	**Engesæter B.** (Norway)

FREE COMMUNICATIONS

Despachantes Hall **16.30 • 18.00**

FC 10 • SCREENING FOR WOMEN DIFFICULT TO REACH

CHAIR: Goodman M. (US) • Smith J. S. (US)

FC 10-1 • Socioeconomic and geographical inequalities in long-term non-attendance in the organized cervical screening program in Sweden after the introduction of HPV self-sampling	**Milerad H.** (Sweden)
FC 10-2 • Geographic accessibility, availability, and economic affordability of health services for cervical cancer prevention in rural areas of Cuenca, Ecuador	**Pozo-Palacios J.** (Ecuador)
FC 10-3 • HPV screening of the indigenous women , custodians of the Amazon rain forest - if not now when ?	**Niamatali C.** (GY)
FC 10-4 • Cervical cancer and homelessness in the United States: human-centered design of shelter-based screening	**Rodriguez N.** (US)
FC 10-5 • Reminder with personal phone call in order to increase attendance in human papillomavirus (HPV) 16/18-positive women in self-sample	**Heneby M.** (Sweden)
FC 10-6 • Assessment of cervical cancer screening behavior, barriers, and factors associated with under- and over-screening in rural communities of Cuenca, Ecuador: A cross-sectional study	**Delgado López D.** (Ecuador)
FC 10-7 • Under-screened women's experiences with human papillomavirus (HPV) self-collection in the MyBodyMyTest-3 randomized controlled trial	**Chalem A.** (US)
FC 10-8 • Implementation of urine-based HR-HPV testing for cervical cancer prevention in a rural clinic in Eswatini	**Baldi S. L.** (Italy)
FC 10-9 • The role of community health ambassadors in engaging under screened communities to participate in HPV self-sampling in Canada	**Fullerton M.** (Canada)
FC 10-10 • First-void urine: A promising alternative sample for cervical cancer screening	**Chenafi-Adham S.** (France)
FC 10-11 • Increasing cervical cancer screening rates among unscreened and underscreened people who face barriers to screening	**Bunzeluk K.** (Canada)

FREE COMMUNICATIONS

Despachantes Hall **18.00 • 19.30**

FC 11 • TRIAGE OF HPV POSITIVE WOMEN II

CHAIR: Dhillon S. (Belgium) • Bonde J. (Denmark)

FC 11-1 • HPV sublineages in Danish cervical cancer screening samples detected by NGS	**Andersen K.** (Denmark)
FC 11-2 • Evaluation of the multiple HPV-based "screen and triage" algorithms in real world settings of China	**Rezhake R.** (China)
FC 11-3 • The role of p16/Ki67 dual-staining in HPV-based cervical cancer screening for risk-based HSIL/CIN2+ detection	**Mazurec K.** (Poland)
FC 11-4 • Evaluation of p16/Ki67 dual stain and extended genotyping for triage and management of individuals testing positive for human papillomavirus in a diverse US population	**Risley C.** (US)
FC 11-5 • Droplet digital PCR & methylation: A new approach for HPV-positive women triage	**Salta S.** (Portugal)
FC 11-6 • Cervical cell lift - a novel method for the spatial mapping biological markers and grading of HPV-infected cervical lesions	**Nagayasu E.** (UK)
FC 11-7 • High-grade lesions probability in ASCUS HPV positive patient according to HPV type	**Rigori C.** (France)
FC 11-8 • Risk stratification of HPV-positive women using extended HPV genotyping and cervical histology correlation	**Iacobone A. D.** (Italy)

FREE COMMUNICATIONS

Alfândega Porto Auditorium **18.00 • 19.30**

FC 12 • SELF-SAMPLING I

CHAIR: Giorgi Rossi P. (Italy) • Hawkes D. (Australia)

FC 12-1 • Large-scale, controlled study comparing analytical quality of three HPV self-sampling devices for self-collected cervical cancer screening	**Arum A.** (Denmark)
FC 12-2 • Look twice before you leap? - Is HPV self-sampling a safe choice as last cervical screening sample before program exit?	**Frandsen P.** (Denmark)
FC 12-3 • Clinical validation of a three-marker methylation panel to detect CIN3+ in the Dutch population-based screening programme	**Wisman B.** (Netherlands)
FC 12-4 • The current state of DNA methylation biomarkers in self-collected liquid biopsies for the early detection of cervical cancer: a literature review	**Sumiec E.** (UK)
FC 12-5 • Stability of HPV after exposure to 3- and 5-day extreme temperature shipping conditions on novel self-collection device	**Hawkes D.** (Australia)
FC 12-6 • Differential release of female genital secretions components and HPV DNA by veil, swabs, non-woven tissue and vaginal tampon	**Belec L.** (France)
FC 12-7 • At-home HPV self-collect device for cervical screening	**Aviki E.** (US)
FC 12-8 • Easy, simple and safe: Large-scale preference study on Danish women's preferences in HPV self-sampling devices	**Korsgaard Andreasen E.** (Denmark)
FC 12-9 • Evaluation of a population based mailed and opportunistic in-clinic HPV-self sampling in a large US health system	**Green B.** (US)
FC 12-10 • Barriers to cervical screening and the potential for self-sampling methods to improve screening uptake in people from ethnically diverse backgrounds living in the UK: The Alternative CErvical Screening (ACES) diversity study	**Cao J.** (UK)

FREE COMMUNICATIONS

Infante Hall **18.00 • 19.30**

FC 13 • METHYLATION I

CHAIR: Heideman D. (Netherlands) • Van Trommel N. (Netherlands)

FC 13-1 • DNA methylation markers for triage in high-risk HPV screening: Identifying and addressing research gaps — **Nedjai B.** (UK)

FC 13-2 • Type-specific and overlapping DNA methylation markers for female gynaecological cancers and HPV-associated cancers — **Van Den Borst E.** (Belgium)

FC 13-3 • Methylation of promoters of the genes ASTN1, DLX1, ITGA4, RXFP3, SOX17 and ZNF671 in patients conized by CIN 2/3 and its relationship with the histological results of the conization specimen — **Hansel A.** (Germany)

FC 13-4 • HPV genes methylation as a possible prognostic biomarker in women with cytological diagnosis of low-grade lesion — **De Marco L.** (Italy)

FC 13-5 • DNA methylation and somatic variants as features in a machine learning methodology for CIN3 progression in hr-HPV positive women — **Ladoukakis E.** (UK)

FC 13-6 • Clinical utility of Digital PCR (dPCR) platform for DNA methylation detection (S5 classifier) to improve triage of hrHPV positive women attending cervical cancer screening programme — **Yim Z. Y. S.** (UK)

FC 13-7 • Improving risk stratification in cervical cancer screening using DNA methylation: Evidence from a 12-year matched case-control study — **Costanzi J. M.** (Norway)

FC 13-8 • Validation of a methylation index in an independent cohort, using an Epigenome-Wide Association Study (EWAS) — **Ellis L. B.** (UK)

FC 13-9 • Non-invasive diagnosis of vulvar dysplasia using methylation markers — **Becker S.** (Germany)

FREE COMMUNICATIONS

D. Maria Hall **18.00 • 19.30**

FC 14 • HPV SCREENING II

CHAIR: Preti M. (Italy) • Lehtinen M. (Finland)

FC 14-1 • Impact of multiple HPV infections in routine cervical cancer screening	**Koskela N.** (Finland)
FC 14-2 • The prevalence of HPV types in Brazilian women	**Amaral J.** (Brazil)
FC 14-3 • Prevalence of HR-HPV infection in cervical samples from women screened by genotyping in the city of Sorocaba - SP - Brazil	**Zonta M. A.** (Brazil)
FC 14-4 • Genotype-specific persistence of genital HPV and its role in cervical precancer risk stratification	**Numminen E.** (Finland)
FC 14-5 • Extended HPV genotyping and the cumulative risk of precancerous lesions in the Finnish cervical cancer screening program	**Leino A.** (Finland)
FC 14-6 • HPV screening using extended genotyping and near realtime multi laboratory quality assurance monitoring in the Netherlands	**Schuurman R.** (Netherlands)
FC 14-7 • Significant protective effect of a previous negative mRNA HPV test in precancer risk of women with low-grade cytology. REINA longitudinal study in Spain	**Granados Carreño R.** (Spain)
FC 14-8 • The performance of p16/Ki-67 dual staining for risk stratification in cervical cancer screening	**Neves C.** (Portugal)
FC 14-9 • Improved CIN2+ risk stratification in cervical screening: cytology and HPV mRNA (16, 18, 45) co-testing of 116,000 samples	**Falang B. M.** (Norway)
FC 14-10 • Randomized non-inferiority trial on the effect of frequent versus infrequent cervical cancer screening in Finnish women vaccinated as early adolescents	**Lehtinen M.** (Finland)
FC 14-11 • Comparison of cytological and HPV-based screening within population-based screening program in Finland	**Partanen V. M.** (Finland)
FC 14-12 • Molecular screening and HPV prevalence: First insights from Angola	**Reis A.** (Angola)

FREE COMMUNICATIONS

Arrábida Hall **18.00 • 19.30**

FC 15 • ANAL NEOPLASIA – VULVAR NEOPLASIA – SKIN DISEASES II

CHAIR: Nyitray A. G. (US) • Joura E. (Austria)

FC 15-1 • HPV genotyping and cytology co-testing for anal cancer screening: HRA/histological assessment and evaluation of the «HPV burden» as a new potential parameter associated with AIN lesions	**Bisanzi S.** (Italy)
FC 15-2 • Anal histologic high-grade squamous intraepithelial lesions (HHSIL) incidence after semi-annual anal screening in a cohort of women with HIV: AIDS malignancy consortium (AMC) 084	**Chiao E.** (US)
FC 15-3 • Recurrence burden in patients with high-grade vulvar intraepithelial neoplasia	**De Vries D. C.** (Netherlands)
FC 15-4 • Epidemiological profiling of persistent cutaneous warts: Insights gained from type-specific HPV prevalence	**Redzic N.** (Belgium)
FC 15-5 • Detection of alpha-HPV types in cutaneous squamous cell carcinoma associated with markers of carcinogenesis	**Ferré V. M.** (France)
FC 15-6 • Efficacy of a multi-ingredient coriolus versicolor-based vaginal gel on high-risk HPV clearance and repair of low-grade cervical lesions: Final results from the PALOMA 2 clinical trial	**López B.** (Spain)

FREE COMMUNICATIONS

Porto Hall **18.00 • 19.30**

FC 16 • DIAGNOSTICS PROCEDURES – MANAGEMENT I

CHAIR: Bleeker M. (Netherlands) • Elfgren K. (Sweden)

FC 16-1 • HPV distribution and oncological outcomes in Norwegian women undergoing fertility-sparing surgery for early-stage cervical cancer (2000-2022)	**Lie A.** (Norway)
FC 16-2 • Current challenges in cotesting: A clinical case	**Costa J.** (Portugal)
FC 16-3 • Dynamic spectral imaging colposcopy VS. regular colposcopy for detecting CIN2+ in women referred with HPV-positive and/or low-grade cytology	**Munk Bertelsen V.** (Denmark)
FC 16-4 • Increased treatment referrals post-introduction of human papillomavirus (HPV) cervical cancer screening and risk and rates of subsequent adverse obstetric outcomes	**Smith L. W.** (Canada)
FC 16-5 • Value of laser, photodynamic therapy, and follow-up observation in the management of cervical low-grade squamous intraepithelial lesions: a prospective cohort study	**Zhang L.** (China)
FC 16-6 • Evaluating the influence of transformation zone types on cervical margin status following LEEP	**Neves Da Silva M.** (Portugal)
FC 16-7 • Pregnancy outcome in women after cervical conization	**Farhat J.** (Portugal)
FC 16-8 • Effectiveness of multi-ingredient coriolus-versicolor-based vaginal gel in human papillomavirus (HPV) positive Greek women younger and older than 40 years. A sub-analysis of PAPILOBS GR study	**Michail G.** (Greece)

SCIENTIFIC SESSIONS

Alfândega Porto Auditorium **8.00 • 9.30**

SS 28 • VALIDATION OF HPV TESTS FOR LESS ESTABLISHED INDICATIONS

CHAIR: Poljak M. (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 and testing and procedure for samples other than clinician-collected cervical specimens. Session will propose criteria for HPV tests validation protocols for other indications / specimens.

SS 28-1 • Introduction	**Poljak M.** (Slovenia)
SS 28-2 • Criteria for HPV tests validation protocols for triage of borderline cytology using clinician-collected specimens	**Bonde J.** (Denmark)
SS 28-3 • Criteria for HPV tests validation protocols for post-treatment monitoring using clinician-collected specimens	**Oštrbenk Valenčak A.** (Slovenia)
SS 28-4 • Validation protocols for collection devices and HPV tests for self-samples	**Cocuzza C.** (Italy)
SS 28-5 • Validation protocols for collection devices and HPV tests for urine samples	**Vorsters A.** (Belgium)
SS 28-6 • Validation protocols for HPV tests for blood samples	**Cuschieri K.** (UK)
SS 28-7 • Validation protocols for collection devices and HPV tests for oral samples	**Alemany L.** (Spain)
Discussion and Q&A	**Poljak M.** (Slovenia)

SCIENTIFIC SESSIONS

Alfândega Porto Auditorium **9.30 • 11.00**

SS 29 • QUALITY ASSURANCE MEASURES IN COUNTRIES THAT SWITCHED TO HPV PRIMARY SCREENING

CHAIR: Cocuzza C. (Italy) • Arroyo Mühr L. S. (Sweden)

WHO recommendations include primary screening with a high-performance HPV test as one of the three key pillars for the elimination of cervical cancer, together with vaccination and treatment. As a result, several countries worldwide have switched from cytology-based to HPV primary screening for cervical cancer prevention. Furthermore, the introduction of HPV-based primary screening has opened to the possibility of performing testing on self-collected samples, improving women's participation and reducing health-service costs.

Whilst well-established guidelines for quality assurance in cytology-based screening have been available for many years, there is presently still the need to establish internationally recognized quality assurance recommendations and measures for the implementation of the different strategies of HPV-based primary screening in different settings, including low-and middle-income countries. This session will focus on the experience of countries that have implemented different HPV-based screening programs in providing assurance to ensure robust and accurate performance of HPV testing.

SS 29-1 • Introduction	**Cocuzza C.** (Italy) **Arroyo Mühr L. S.** (Sweden)
SS 29-2 • WHO target product profiles for HPV testing	**Almonte M.** (Switzerland)
SS 29-3 • Status of HPV-based screening in Europe	**Arbyn M.** (Belgium)
SS 29-4 • Experiences in organized self-sampling HPV-based screening in the Netherlands	**Schuurman R.** (Netherlands)
SS 29-5 • Lessons learned from HPV-primary screening in Australia	**Hawkes D.** (Australia)
SS 29-6 • Experiences of HPV-based screening in low-resource countries (PAVE study)	**Inturrisi F.** (US)
SS 29-7 • Audits for quality assurance of HPV-based screening	**Arroyo Mühr L. S.** (Sweden)
Discussion and Q&A	**Cocuzza C.** (Italy) **Arroyo Mühr L. S.** (Sweden)

SCIENTIFIC SESSIONS

D. Maria Hall **8.00 • 9.30**

SS 30 • PUBLIC ADVOCACY AND AWARENESS CAMPAIGNS TO ADDRESS BARRIERS IN HPV-ASSOCIATED CANCER PREVENTION

CHAIR: Olkov I. (France) • Hanley S. (UK)

Although the WHO Global Strategy on Acceleration of Cervical Cancer Elimination was announced in 2020, a number of countries still remain too far from the target pillars of this strategy. What can we do and how may we work together as a community to close gaps in access to HPV vaccination, cervical screening and treatment among communities and countries? This session will explore how we can improve public awareness and address barriers and stigma to drive action on HPV and cancer prevention.

SS 30-1 • Introduction	**Olkov I.** (France) **Hanley S.** (UK)
SS 30-2 • Why are advocacy and awareness campaigns an important part of preventing HPV-related cancers?	**Olkov I.** (France)
SS 30-3 • Addressing HPV vaccine hesitancy in Japan: Challenges, cultural perspectives, and public health strategies	**Hanley S.** (UK)
SS 30-4 • Raising awareness on cervical cancer prevention in central Asia and Uzbekistan	**Zahirova N.** (UZ) **Egamberdiev D.** (UZ)
SS 30-5 • Barriers in HPV screening from patients and women's perspectives. How can we overcome them?	**Urkmez E.** (US)
SS 30-6 • Vaccine hesitancy and recovery in Ireland	**Morissey Y.** (Ireland)
Discussion and Q&A	**Olkov I.** (France) **Hanley S.** (UK)

CLINICAL SESSIONS

Infante Hall **8.00 • 9.30**

CS 09 • TARGETED THERAPIES OF HPV RELATED CANCERS

CHAIR: Von Knebel Doeberitz M. (Germany) • Meijer C. (Netherlands)

The discovery of the link between persistent papillomavirus infections and various human cancers, especially cervical cancer, was made nearly 40 years ago. Since then, basic research has clarified how these viruses contribute to the transformation of human cells, identified the viral genes central to human carcinogenesis, and demonstrated the significant preventive potential of vaccines in blocking initial infections. However, this research has yet to produce targeted therapies, leaving most patients reliant on tissue- and cell-destructive treatments such as surgery, radiation, and chemotherapy. This session will summarize recent advancements in systemic therapy for invasive cervical cancer, covering chemo-radiation, immunotherapy, and novel targeted therapies now approaching clinical-stage research and trials.

CS 09-1 • Introduction	**Von Knebel Doeberitz M.** (Germany) **Meijer C.** (Netherlands)
CS 09-2 • A review of the current stage of clinical trials to treat HPV-related cancers	**Hillemanns P.** (Germany)
CS 09-3 • Identification of anti-HPV and anti-tumor small molecule inhibitors using 3-dimensional tissue systems	**Broker T.** (US)
CS 09-4 • Therapeutic vaccination approaches to treat HPV-mediated (pre)cancers	**Riemer A.** (Germany)
CS 09-5 • Demethylating treatment as a novel therapeutic concept against HPV-induced precancerous lesions: Update on the DelVIN trial, a clinical phase I study evaluating the safety and preliminary efficacy of local decitabine treatment of human papillomavirus-induced VIN grade 2/3	**Prigge E.** (Germany)
Discussion and Q&A	**Von Knebel Doeberitz M.** (Germany) **Meijer C.** (Netherlands)

FREE COMMUNICATIONS

Arrábida Hall **8.00 • 9.30**

FC 17 • SELF-SAMPLING II

CHAIR: Wisman B. (UK) • Vorsters A. (Belgium)

FC 17-1 • HPV self-sampling for cervical cancer screening in China: A multi-center study	**Ji X.** (China)
FC 17-2 • Urine human papillomavirus (HPV) testing as a strategy for cervical screening in high-risk older women: The Alternative CErvical Screening (ACES) 65+ study	**Crosbie E.** (UK)
FC 17-3 • Comparison of healthcare worker versus self-collected HPV DNA cervical cancer screening in HIV positive and HIV negative women	**Snyman L. C.** (South Africa)
FC 17-4 • Self-sampling versus physicians' sampling for cervical cancer screening - agreement	**Mongia A.** (Italy)
FC 17-5 • Results of direct mailing of HPV self-sampling kits in the Dutch population-based cervical screening programme	**De Kok I.** (Netherlands)
FC 17-6 • Implementing primary care-based in-clinic HPV self-sampling to increase cervical cancer screening rates and reduce screening disparities: Results from a quasi-experimental study in U.S. community-based clinics	**Pratt R.** (US)
FC 17-7 • Barriers to cervical cancer screening and experiences with mailed self-collection kits for HPV testing among Asian/Asian American women in a U.S. safety net health system	**Montealegre J.** (US)
FC 17-8 • Engaging stakeholders to create an HPV self-collection practice facilitation guide	**Tiro J.** (US)
FC 17-9 • Will gynaecologists offer self sampling test for HPV diagnosis to their patients? Perceived barriers and advantages of self-sampling among gynaecologists in Cuenca, Ecuador	**Vega Crespo B.** (Ecuador)
FC 17-10 • Human papillomavirus genotype and cycle threshold value from self-samples and risk of high-grade cervical lesions: A post-hoc analysis of a modified stepped-wedge implementation feasibility trial	**Lei J.** (Sweden)

FREE COMMUNICATIONS

Porto Hall **8.00 • 9.30**

FC 18 • DIAGNOSTICS PROCEDURES – MANAGEMENT II

CHAIR: Siegler E. (Israel) • Milread H. (Sweden)

FC 18-1 • Colposcopic diagnostics cervical glandular intra-epithelial neoplasia and new therapy	**Jeremic I.** (Serbia)
FC 18-2 • Evaluation of a national External Quality Assessment (EQA) program for colposcopic examinations in Sweden 2022-2024	**Elfgren K.** (Sweden)
FC 18-3 • Beyond colposcopy: Outcomes of cone biopsy without prior evidence of HSIL in women with persistent HPV infection	**Valente Abreu M.** (Portugal)
FC 18-4 • One stop cervical cancer screening and management	**Kuruvilla J.** (Sweden)
FC 18-5 • Comparative study of topical 5-aminolevulinic acid photodynamic therapy and surgery in treating cervical intraepithelial neoplasia grade III	**Zang M.** (China)
FC 18-6 • Stratified mucin-producing intraepithelial lesion - it is not a reason to SMILE	**Martins B.** (Portugal)
FC 18-7 • Efficacy of ALA-PDT in treating cervical low-grade squamous intraepithelial lesions with high-risk HPV patients: A multicentre randomized controlled trial	**Qiu L.** (China)

FREE COMMUNICATIONS

Infante Hall **9.30 • 11.00**

FC 19 • HPV THERAPEUTIC VACCINES – IMMUNOTHERAPY

CHAIR: Von Knebel Doeberitz M. (Germany) • Hillemanns P. (Germany)

FC 19-1 • DNA immunotherapy, INO-3107, is safe, effective, and elicits an antigen-specific T-cell response in adults with HPV-6 & 11 recurrent respiratory papillomatosis	**Sumner M.** (US)
FC 19-2 • Lipid nanoparticles outperform electroporation in delivering therapeutic HPV DNA vaccines	**Li M.** (China)
FC 19-3 • Application of cytokines in cervical secretion for high grade squamous intraepithelial lesion caused by HR-HPV infection	**Wang X.** (China)
FC 19-4 • The effect of bivalent HPV vaccination on cervical cancer and CIN3+ in the Netherlands: Preliminary results of a national linkage study	**Middeldorp M.** (Netherlands)
FC 19-5 • Quadrivalent HPV16 therapeutic vaccine candidate induces robust and broad T cell responses and therapeutic efficacy in preclinical tumor model	**Bardenfleth M.** (Denmark)
FC 19-6 • Effects of systemic treatment with the demethylating agent decitabine are augmented by CDA inhibition in HPV-induced tumors: A preclinical study	**Schlegel L.** (Germany)
FC 19-7 • Acceptability of vaginally delivered therapeutic HPV vaccines in women in low-resource settings	**Ogilvie G.** (Canada)
FC 19-8 • Application of amniotic membrane for treating chronic cervicitis: A case series	**Farzaneh F.** (Iran)

FREE COMMUNICATIONS

D. Maria Hall **9.30 • 11.00**

FC 20 • ADVOCACY, ACCEPTABILITY AND PSYCHOLOGY

CHAIR: Osasuwa Peters N. (US) • Hanley S. (UK)

FC 20-1 • Boys, men and HPV: A global call for gender-neutral HPV vaccination	**Winterflood D.** (UK)
FC 20-2 • HPV knowledge and acceptance of HPV vaccination among men who have sex with men (MSM) in Germany: Results of a cross-sectional study	**Lang L.** (Germany)
FC 20-3 • HPV vaccination beyond the commonly known primary prevention: Survey of attitude and knowledge among polish OBGYNs - an interim analysis	**Trojnarska D.** (Poland)
FC 20-4 • Promoting cervical cancer prevention in the age of social media: Health education, market agendas, and screening uptake among Chinese women	**Zhao W.** (China)
FC 20-5 • 18-26-year-old non-college-educated young adults & TikTok influence: An exploration of perceptions of the HPV vaccine	**Burke-Garcia A.** (US)
FC 20-6 • Human papillomavirus (HPV) vaccination decision-making among adolescent girls in Japan	**Tomoi H.** (UK)
FC 20-7 • Claiming choices: Increasing the acceptability of cervical cancer screening among women and girls in rural Eswatini	**Baldi S. L.** (Italy)
FC 20-8 • Educational and communication strategies to improve HPV vaccination uptake: A systematic literature review	**D'Ambrosio F.** (Italy)
FC 20-9 • Design and evaluation of a human papillomavirus awareness-raising campaign in a limited-resource setting: Insights from difference-in-difference analysis in the Boeny region of Madagascar	**Kislaya I.** (Germany)
FC 20-10 • Impact of digital communication message on HPV vaccine decision-making among Japanese mothers: Online randomized controlled trial	**Kobayashi K.** (UK)
FC 20-11 • Knowledge, awareness and perceptions of HPV and genital cancers in Tunisia: Focus groups discussions insights	**Ben Mansour N.** (Tunisia)
FC 20-12 • Preferences and experiences for women participating in the Dutch hrHPV screening for cervical cancer: What is important?	**Dieleman M.** (Netherlands)

FREE COMMUNICATIONS

Arrábida Hall **9.30 • 11.00**

FC 21 • MICROBIOME

CHAIR: Moscicki A. B. (US)

FC 21-1 • The potential association between lower genital tract infections and the development of cervical cancer: A comprehensive data analysis from Western China	**Cai B.** (China)
FC 21-2 • Host DNA methylation and cervicovaginal microbiota potential role in HPV infection progression	**Sousa C.** (Portugal)
FC 21-3 • Exploring the interaction between cervix HPV, oral-nasal microbiota, and systemic inflammatory responses	**Matos A.** (Portugal)
FC 21-4 • Exploring the interplay of the vaginal microbiome, cervical cytology and HPV testing	**Trajkova K.** (Macedonia)
FC 21-5 • Impact of DNA isolation method on a microbial community standard assessed by metagenomics nanopore sequencing - implications for vaginome research	**Loonen A.** (Netherlands)
FC 21-6 • Efficacy of an intensive regimen of a multi-ingredient Coriolus versicolor-based vaginal gel in enhancing HPV clearance: Results from the PALOMA clinical trial	**Serrano L.** (Spain)
FC 21-7 • Cervicovaginal bacterial communities in adult Malagasy women of reproductive age with human papillomavirus infection and female genital schistosomiasis	**Hey J. C.** (Germany)

FREE COMMUNICATIONS

Porto Hall **9.30 • 11.00**

FC 22 • METHYLATION II

CHAIR: Steenbergen R. (Netherlands) • Gilham C. (UK)

FC 22-1 • Hypermethylation of FAM19A4 and hsa-mir124-2 in vaginal self-samples	**Forslund O.** (Sweden)
FC 22-2 • Performance of a six-methylation-marker assay on predicting post-LEEP pathological results of cervical HSIL patients: A retrospective study	**Hong Z.** (China)
FC 22-3 • Development of a bisulfite-free DNA methylation marker-based diagnostic test for cervical cancer diagnostics	**Stieber G.** (Germany)
FC 22-4 • Risk stratification of HSIL progression using longitudinal methylation and HPV genotype analysis	**Pikkujämsä H.** (Finland)
FC 22-5 • Novel triple-target panels utilizing methylation-sensitive restriction enzyme-based quantitative PCR for detecting advanced cervical precancers and cancers among high-risk HPV-positive women	**Chen S.** (China)
FC 22-6 • Primary ASCL1/LHX8 host-cell methylation analysis VS primary HPV screening in the IMPROVE primary HPV screening study	**Costa S.** (Netherlands)
FC 22-7 • Assessing methylation-based triage assays in HPV screening: A proof-of-concept study using archived cervical DNA samples	**Vanden Broeck D.** (Belgium)
FC 22-8 • Large scale clinical validation of the Methica CC Kit, a molecular triage test for cervical cancer screening	**De Waard J.** (Netherlands)
FC 22-9 • Evaluation of host gene methylation in HPV-negative women in a real-world clinical setting	**Costa M.** (Portugal)

FREE COMMUNICATIONS

Alfândega Porto Auditorium **11.00 • 13.00**

FC 23 • HPV TESTING AND GENOTYPING

CHAIR: Sundström K. (Sweden) • Arroyo Mühr L. S. (Sweden)

FC 23-1 • HPV genotype distribution in HSIL/CIN2+ among women with chronic inflammatory disorders: Population-based case-control study	**Sundström K.** (Sweden)
FC 23-2 • Distribution and role of high-risk human papillomavirus genotypes in women with cervical intraepithelial neoplasia: A retrospective analysis from Wenzhou, Southeast China	**Hu Y.** (China)
FC 23-3 • Human papillomavirus genotypes distribution among women screened for cervical cancer in a rural healthcare facility in Eswatini	**Fappani C.** (Italy)
FC 23-4 • Cervical and anal HPV diversity in women living with HIV	**Siqueira D.** (Brazil)
FC 23-5 • Genotype distribution of high-risk human papillomavirus among women in Azerbaijan	**Aslanova E.** (Azerbaijan)
FC 23-6 • Distribution of circulating human papillomavirus genotypes in patients attending the national screening program in the Peruvian Amazon, 2024	**Solis-Ponce L. G.** (Peru)
FC 23-7• Prevalence of human papillomavirus genotypes in Latvia among women participating in screening	**Stašulāne A.** (Latvia)
FC 23-8 • HPV HR test in the follow-up after fertility sparing surgery stage I cervical cancer	**Robová K.** (Czech Republic)
FC 23-9 • Optimization and analytical validation of the Allplex HPV28 genotyping assay for use in first-void urine samples	**Bell M.** (Belgium)
FC 23-10 • High rate of non-vaccine high-risk HPV genotypes in cervical cytology samples classified as atypical in women from Mpumalanga and Gauteng, South Africa	**Govender K.** (South Africa)
FC 23-11 • Human papillomavirus (HPV) genotype-specific prevalence and progression of high-grade cervical lesions (CIN2/3+) and cancer in HPV-positive women: A European pooled analysis	**Kroon K. R.** (Netherlands)
FC 23-12 • A multimatrix approach to HPV testing: Evaluating the HPV Plus Elite MGB kit across FFPE, semen, and urine samples	**Kehoe K.** (Belgium)
FC 23-13 • Triage management method research of high risk HPV 5+9 genotyping in the population with ASC-US in cytological initial screening: A multicenter research from China	**Zeng X.** (China)
FC 23-14 • IVDR implementation: Analytical and clinical validation of genotyping in FFPE samples	**Abreu C.** (Portugal)
FC 23-15 • Recommendations for the implementation in Chile of extended genotyping for human papilloma virus in screening and follow-up	**Acuña M. J.** (Chili)
FC 23-16 • Exploring HPV genotyping: A new horizon for FFPE samples	**Azinheira S.** (Portugal)

FREE COMMUNICATIONS

Infante Hall **11.00 • 12.30**

FC 24 • ECONOMICS AND MODELING

CHAIR: De Kok I. (Netherlands) • Drolet M. (Canada)

FC 24-1 • The economic burden of human papillomavirus-related diseases in China	**Diakite I.** (US)
FC 24-2 • Assessing the influence of male vaccination on public health benefit of HPV vaccines against all HPV related diseases in China under different increasing VCR scenarios: A modeling study	**Diakite I.** (US)
FC 24-3 • An adaptable modeling framework to explore benefits of risk-based cervical cancer screening in Europe: A case study in Italy	**Gini A.** (France)
FC 24-4 • Method for estimating age distribution of acquisition of causal HPV infection from CIN2+ diagnosis data: US and UK as case studies	**Cherif A.** (US)
FC 24-5 • Estimating the age of acquisition of disease-causal HPV infection in women who develop CIN2+ in England	**Engelbrecht K.** (UK)
FC 24-6 • An almost model-free method for forecasting HPV-related disease	**Palmer C.** (US)
FC 24-7 • Potential health impact of therapeutic HPV vaccines in China: A modeling study	**Pan C.** (China)
FC 24-8 • The cost-effectiveness of the HPV screening program for unvaccinated, mixed, and vaccinated cohorts	**Schevenhoven V.** (Netherlands)

FREE COMMUNICATIONS

D. Maria Hall **11.00 • 12.30**

FC 25 • PUBLIC HEALTH

CHAIR: Sasieni P. (UK)

FC 25-1 • Insurance instability and rurality in the Western United States: Key factors in HPV missed vaccination opportunities among Latino/a and American Indian/Alaska native children/adolescents	**Kepka D.** (US)
FC 25-2 • Readiness assessment for cervical cancer elimination in Europe	**Karamousouli E.** (Greece)
FC 25-3 • Failing to eradicate vaccine-type HPV: The long-term fiscal burden of neglecting a public good	**Favato G.** (UK)
FC 25-4 • Physician perspectives on the HPV decide tool for mid-adult HPV vaccination in the United States	**Thompson E.** (US)
FC 25-5 • No girl left behind: Integration of multi-sectoral data to identify Out-of-School (OOS) girls in Bangladesh for HPV vaccination	**Mostari S.** (Bangladesh)
FC 25-6 • Influences on HPV vaccine hesitant young adults across two cultures: Youth voices	**Sheinfeld Gorin S.** (US)
FC 25-7 • Understanding socioeconomic, racial, and geographic inequities in HPV-related health outcomes and health resource utilization in the US	**Saraiya M.** (US)
FC 25-8 • Circulating genotypes of human papillomavirus in adult women of reproductive age from Madagascar: A cross-sectional study to explore needs and opportunities for HPV vaccination in the country	**Garsevanidze E.** (Germany)

FREE COMMUNICATIONS

Arrábida Hall **11.00 • 12.45**

FC 26 • CERVICAL NEOPLASIA AND OTHERS

CHAIR: Vieira Baptista P. (Portugal) • Smith J. (US)

FC 26-1 • Long term risk of cervical carcinoma after CIN treatment: Analysis of 6517 cases	**Pollano B.** (Italy)
FC 26-2 • The expression of Nanog is associated with the progression and worse prognosis of cervical cancer	**Rabelo-Santos S. H.** (Brazil)
FC 26-3 • The value of folate receptor-mediated cervical special dyeing technique in the screening of cervical lesions	**Wang Y.** (China)
FC 26-4 • Risk of non-cervical anogenital human papillomavirus-related cancer and precancer after active surveillance of cervical intraepithelial neoplasia grade 2: A population-based cohort study	**Eriksen D. O.** (Denmark)
FC 26-5 • Cervical cancer and opportunistic screening in Madeira Island - Portugal: A 24 year retrospective analysis	**Barradas M. I.** (Portugal)
FC 26-6 • Prevalence of cervical premalignant/malignant lesions and their association with High-Risk HPV types and risk factors in Bafoussam, West Region, Cameroon: A cross-sectional study	**Kambou Kountchou K. D.** (Cameroon)
FC 26-7 • Locally advanced HPV associated cervical cancer in patients vaccinated againts HPV prior to coitarche	**Janovska N.** (Czech Republic)
FC 26-8 • Effect of thermal ablation of Danish women ≥40 years of age with persistent HPV infection; a randomized clinical study	**Nielsen T. D.** (Denmark)
FC 26-9 • Clinical profile and risk factors of endocervical adenocarcinomas: Impact of HPV status	**Agria F.** (Portugal)
FC 26-10 • Management and outcomes of adenocarcinoma in situ of the cervix: A seven-year retrospective study	**Cordoeiro M.** (Portugal)
FC 26-11 • Impact of HPV vaccination on the incidence of high-grade cervical lesions or worse in unvaccinated individuals: A Swedish register study	**Meglic E.** (Sweden)
FC 26-12 • Managing cervical invasive carcinoma in pregnancy – A clinical case	**Farhat J.** (Portugal)