Human Papillomavirus (HPV)-16/18 AS04-adjuvanted Vaccine: Immunological Superiority of the 2-dose Schedule Versus 2-dose and 3-dose Schedules of HPV-6/11/16/18 Vaccine; Results of a Randomised, Multicentre, Immunogenicity Trial Up to Month 24

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Background/Objective: 2 doses (2D) of GSK Vaccines' human papillomavirus (HPV)-16/18 AS04-adjuvanted vaccine induced superior anti-HPV-16/18 antibody response compared to 2D or 3D of Merck's HPV-6/11/16/18 vaccine 1 month (M) after last vaccination, as demonstrated in this phase IIIB, randomised, observer-blind trial (NCT01462357). Here, we present immunogenicity and safety results up to 18M after last vaccination (M24).

Method: 1078 healthy 9-14-year-old girls were enrolled and randomised (1:1:1) to receive 2D of HPV-16/18 AS04-adjuvanted vaccine (HPV-16/18[2D], N=360) or HPV-6/11/16/18 vaccine (HPV-6/11/16/18[2D], N=359) at M0,6 or 3D of HPV-6/11/16/18 vaccine at M0,2,6 (HPV-6/11/16/18[3D], N=359); 355, 344 and 349 girls, respectively, returned for the M24 visit. Non-inferiority and superiority in terms of immunogenicity (by enzyme-linked immunosorbent assay [ELISA]) of HPV-16/18[2D] versus HPV-6/11/16/18[2D] and HPV-6/11/16/18[3D] were sequentially evaluated in the M24 according-to-protocol immunogenicity cohort (ATP-I; N=968) and M24 total vaccinated cohort (TVC; N=1048), respectively. HPV-16/18-specific T-cell- and B-cell-mediated immune responses and safety were also assessed.

Result: At M24, anti-HPV-16/18 ELISA responses in the HPV-16/18[2D] group were noninferior and superior to those in HPV-6/11/16/18[2D] and HPV-6/11/16/18[3D] groups (Table); geometric mean titres were \geq 2.06-fold (HPV-16) and \geq 3.49-fold (HPV-18) higher for HPV-16/18[2D] versus HPV-6/11/16/18[2D] and HPV-6/11/16/18[3D] (TVC). CD4+ T-cell responses in HPV-16/18[2D] appeared higher than HPV-6/11/16/18[2D], while not being statistically significant, and similar to HPV-6/11/16/18[3D] for both antigens; memory B-cell responses appeared similar across groups. Safety was in line with the known safety profiles of both vaccines.

Conclusion: The superior anti-HPV-16/18 antibody response elicited after 2D of the HPV-16/18 AS04-adjuvanted vaccine versus 2D or 3D of the HPV-6/11/16/18 vaccine administered in 9-14-year-old girls was maintained up to M24. Cell mediated immune responses appeared similar or higher after HPV-16/18 vaccination than after HPV-6/11/16/18 vaccination.

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Table: Non-inferiority (A) and superiority (B) of anti-HPV-16/18 antibody responses in HPV-16/18[2D] versus HPV-6/11/16/18[2D] and HPV-6/11/16/18[3D], and immunogenicity results (C), (ELISA), 18 months after last vaccination (secondary sequential endpoint)

| Comparison | A. | A. Non-inferiority (ATP-I, initially seronegative subjects) | | | | B. Superiority* (TVC) | | |
|--------------------|--|---|----------------------------|---------------------------|----------|--|--|--|
| Antibody | SCR difference | | GMT ratio | | | GMT ratio | | |
| | | % (95% CI) | | (95% CI) | | (95% CI) | | |
| HPV-16/18[2D] vs | HPV | -6/11/16/18[2D] minus | HPV | 6/11/16/18[2D] divided | HP | V-16/18[2D] divided by | | |
| HPV-6/11/16/18[2D] | | HPV-16/18[2D] | | by HPV-16/18[2D] | 1 | HPV-6/11/16/18[2D] | | |
| Anti-HPV-16 | | -0.32 (-1.79; 0.88) | | 0.39 (0.34; 0.46) | | 2.49 (2.16; 2.88) | | |
| Anti-HPV-18 | | -6.94 (-10.29; - 4.63) | | 0.17 (0.15; 0.20) | | 5.79 (4.95 ; 6.77) | | |
| HPV-16/18[2D] vs | HPV-6/11/16/18[3D] minus | | HPV-6/11/16/18[3D] divided | | HP | HPV-16/18[2D] divided by | | |
| HPV-6/11/16/18[3D] | HPV-16/18[2D] | | by HPV-16/18[2D] | | 1 | HPV-6/11/16/18[3D] | | |
| Anti-HPV-16 | | 0.00 (-1.22; 1.20) | | 0.48 (0.43; 0.55) | | 2.06 (1.81 ; 2.35) | | |
| Anti-HPV-18 | | -3.41 (-6.00; - 1.91) | | 0.29 (0.25; 0.34) | | 3.49 (2.97 ; 4.10) | | |
| | C. Immunogenicity results (ATP-I, initially seronegative subjects; ELISA) SCR % (95% CI) | | | | | | | |
| Antibody | N | HPV-16/18[2D] | N | HPV-6/11/16/18[2D] | N | HDV 6/11/16/19[2D] | | |
| Antibody | N. | HPV-10/18[2D] | IN. | HPV-0/11/10/18[2D] | SIN S | HPV-6/11/16/18[3D] | | |
| Anti-HPV-16 | 318 | 100 (98.8; 100) | 313 | 99.7 (98.2; 100) | 312 | 100 (98.8; 100) | | |
| Anti-HPV-18 | 321 | 100 (98.9; 100) | 317 | 93.1 (89.7; 95.6) | 323 | 96.6 (94.0; 98.3) | | |
| ANTI-HPV-18 | | | GMT | | | | | |
| Anti-HPV-18 | | 2 | · · · | GMT | | | | |
| Anti-HPV-18 | | | | GMT (95% CI) | | | | |
| Antibody | N | HPV-16/18[2D] | N | | N | HPV-6/11/16/18[3D] | | |
| | N 318 | HPV-16/18[2D] 1304.3 (1201.0; 1416.4) | N 313 | (95% CI) | N 312 | HPV-6/11/16/18[3D] 631.9 (571.1; 699.1) | | |

Bolded values indicate that non-inferiority/superiority criteria were met. Non-inferiority criteria: the upper limit (UL) of the 95% confidence intervals (CI) for SCR difference <5%, and the UL of 95% CI for GMT ratio <2, for both anti-HPV-16 and -18 antibodies. Superiority criteria: the lower limit of the 95% CI for the GMT ratio >1. The 2-sided 95% CIs of GMT ratios between groups were computed using an analysis of variance (ANOVA) model.

*p-value=0.0001. ELISA, enzyme-linked immunosorbent assay (cut-off: 19 EL.U/ml for HPV-16 and 18 EL.U/ml for HPV-18); ATP-I, according-to-protocol cohort for immunogenicity; TVC, total vaccinated cohort; SCR, seroconversion rate; GMT, geometric mean titre; D, dose; N, number of subjects with available results.