

EFFECT OF A *CORIOLUS VERSICOLOR*-BASED VAGINAL GEL FOR HIGH-RISK HPV CLEARANCE AND CYTO-NORMALIZATION IN A 44-YEAR-OLD PATIENT WITH HR-HPV PERSISTENCE OF MORE THAN 10 YEARS

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INTRODUCTION

Human papillomavirus (HPV) infection is one of the most frequent sexually transmitted infections and high-risk (HR) oncogenic strains of HPV are behind virtually all cases of invasive cervical cancer. Although prophylactic vaccines are highly effective, they have no therapeutic effect. In this clinical case, a *Coriolus versicolor*-based vaginal gel treatment was assessed for HR-HPV clearance and cyto-normalization.

METHODS:

A clinical case of 44-year-old woman, ex-smoker from 2018, who attended for a routine follow-up visit due to a history of persistent infection for 12 years with a HR-HPV strain and both low-grade and high-grade squamous intraepithelial lesions in the cervix and vagina (Fig 1 and 2). The patient was subjected to two excisional therapies (large loop excision of the transformation zone) in 2007 and 2009 and one cervical CO2 vaporization in 2013, plus another vaginal CO2 vaporization in 2014 which reduced the extension and grade of the lesions. The follow up of the case showed 4 years of viral persistence and intermittent appearance of HPV-linked cytological alterations. At the time of the visit, she presented low-grade cervical lesions and was positive for HPV type 53. Therefore, a conservative treatment with the *Coriolus versicolor* based vaginal gel was prescribed (1 cannula/day for 1 month + 1 cannula/alternate days for 5 months) in 2019.

RESULTS:

After several surgical procedures and a long history of HR-HPV persistency, the patient achieved complete cyto-normalization and HR-HPV clearance with a 6-month treatment period of the *Coriolus versicolor* based vaginal gel.

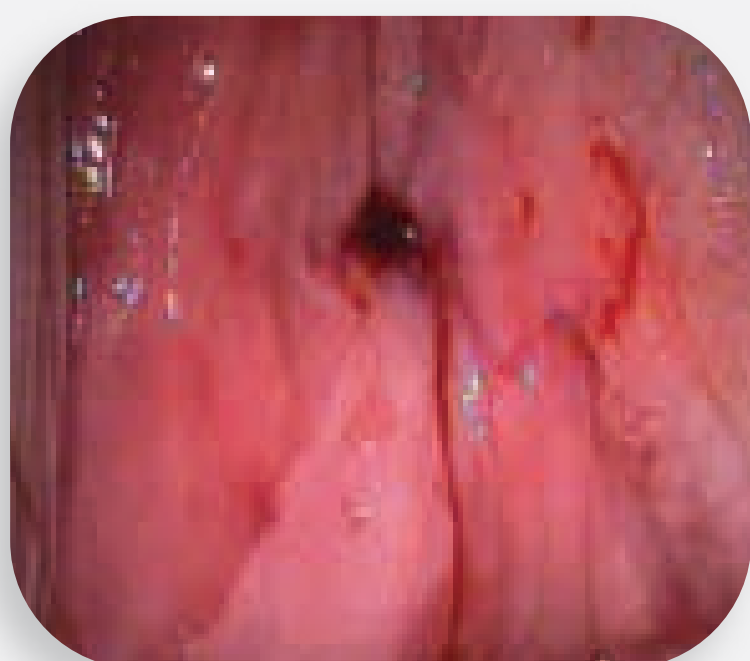


Fig. 1. Colposcopy/vaginoscopy Abril 2013. Transformation zone 3 cervix. Major changes in cervix and left-hand side posterior cul-de-sac and anterior vaginal face. Previous cytology: HSIL, Biopsy: HSIL/CIN and VaIN.

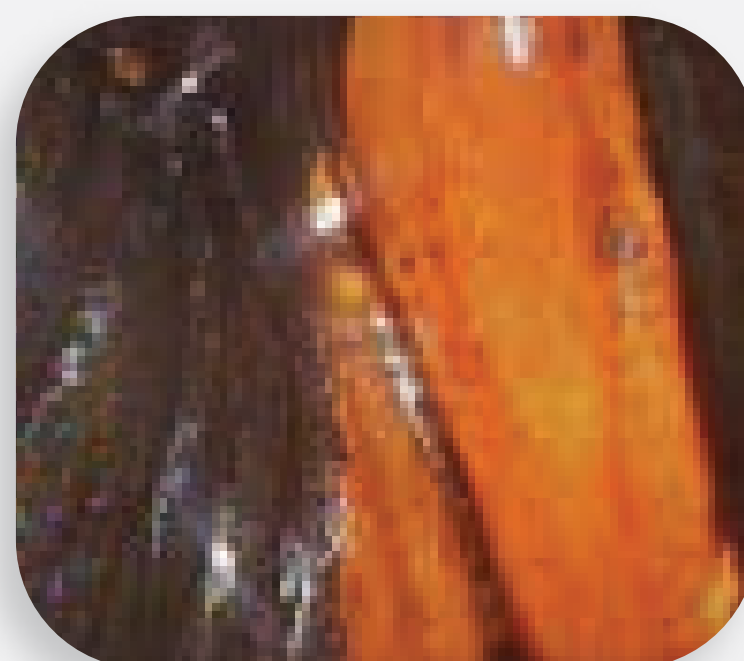
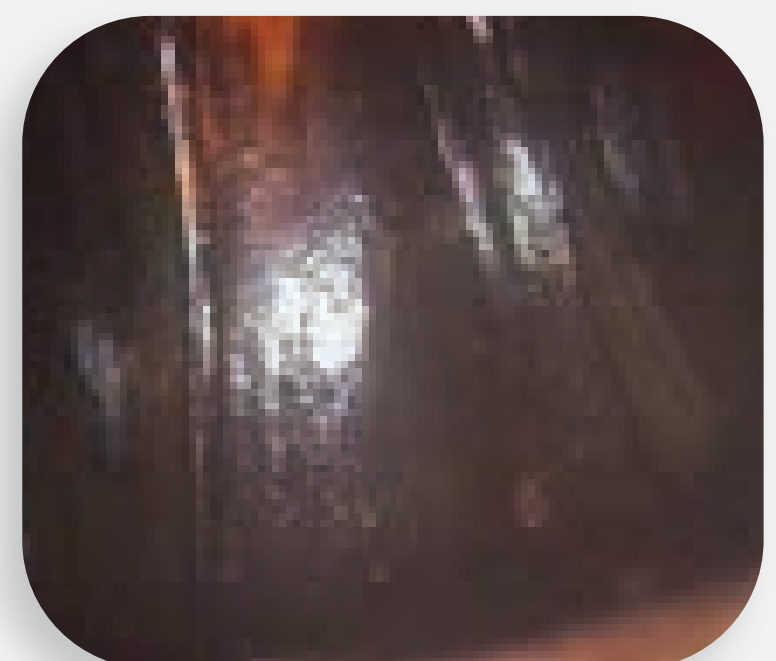


Fig. 2. Vaginoscopy in January 2014. Erased posterior cul-de-sac, major changes in left hand side posterior cul-de-sac, coincident lugol's negative result. Previous cervical cytology: ASCUS. Positive HPV test (Cervista™). Vaginal biopsy vaginal with diagnose of HSIL/VaIN (A). Vaginoscopy in January 2015 without evidence of lugol's negative lesions (B).



CONCLUSIONS:

This clinical case shows that a conservative non-invasive treatment with a *Coriolus versicolor*-based vaginal gel can be a valuable therapeutic option to achieve the normalization of cytological alterations and HR-HPV clearance in a patient with a long history (12 years) of HPV persistency after several excisional and destructive treatments.