

EFFECT OF A MULTI-INGREDIENT CORIOLUS VERSICOLOR-BASED VAGINAL GEL IN A HPV18+ PREGNANT WOMAN WITH CIN II/III LESIONS

Authors:

Antonio Carballo García, MD¹, Ana Cristina Fernández Rísquez, MD¹, Jesús Joaquín Hijona Elósegui, MD¹, Yann Gaslain² ¹Obstetrics and Gynecology Service. Complejo Hospitalario de Jaén, Jaén, Spain, ²Procare Health, Barcelona, Spain

INTRODUCTION:

Human papillomavirus (HPV) infection is one of the most frequent sexually transmitted infections. Although most of the infections are short-lived, several factors such as pregnancy, increase the risk of persistent HPV infection, which is higher in pregnant women compared to aged-matched counterparts¹. HPV persistence increases the risk of cervical cancer. The current accepted approach during pregnancy consists in preventing the evolution to cervical cancer with the minimal intervention level, as surgical procedures are not recommended because they increase the risk of preterm birth and perinatal death². In this context, new conservative approaches to treat HPV lesions in the pregnant subpopulation are needed.

Fig.1. Initial colposcopy. Acetic acid staining shows acetowhite areas with thick-mosaic vasculature and partial iodine staining, suggesting grade II (A). Initial colposcopy with green filter (B)

METHODS:

A clinical case of a 30 year old pregnant woman, smoker, diagnosed HPV with genotype 18, colposcopy and acetowhite staining revealed HSIL lesions, biopsy confirmed extensive CIN II/III lesions (figure 1) and intense positivity for Ki67 and p16. Given the patients' profile, a non-invasive treatment with a Coriolus versicolor-based vaginal gel was decided (1 cannula/day for 1 month + 1 cannula/alternate days for 5 months) and a watchful waiting approach with periodic colposcopy control.

RESULTS:

After 11 weeks of treatment with the Coriolus versicolor-based vaginal gel, colposcopy images showed a clear regression of the affected area with a type 1 transformation zone (figure 2), which was confirmed by biopsy (CIN I). The patient continued to be positive to HPV 18.

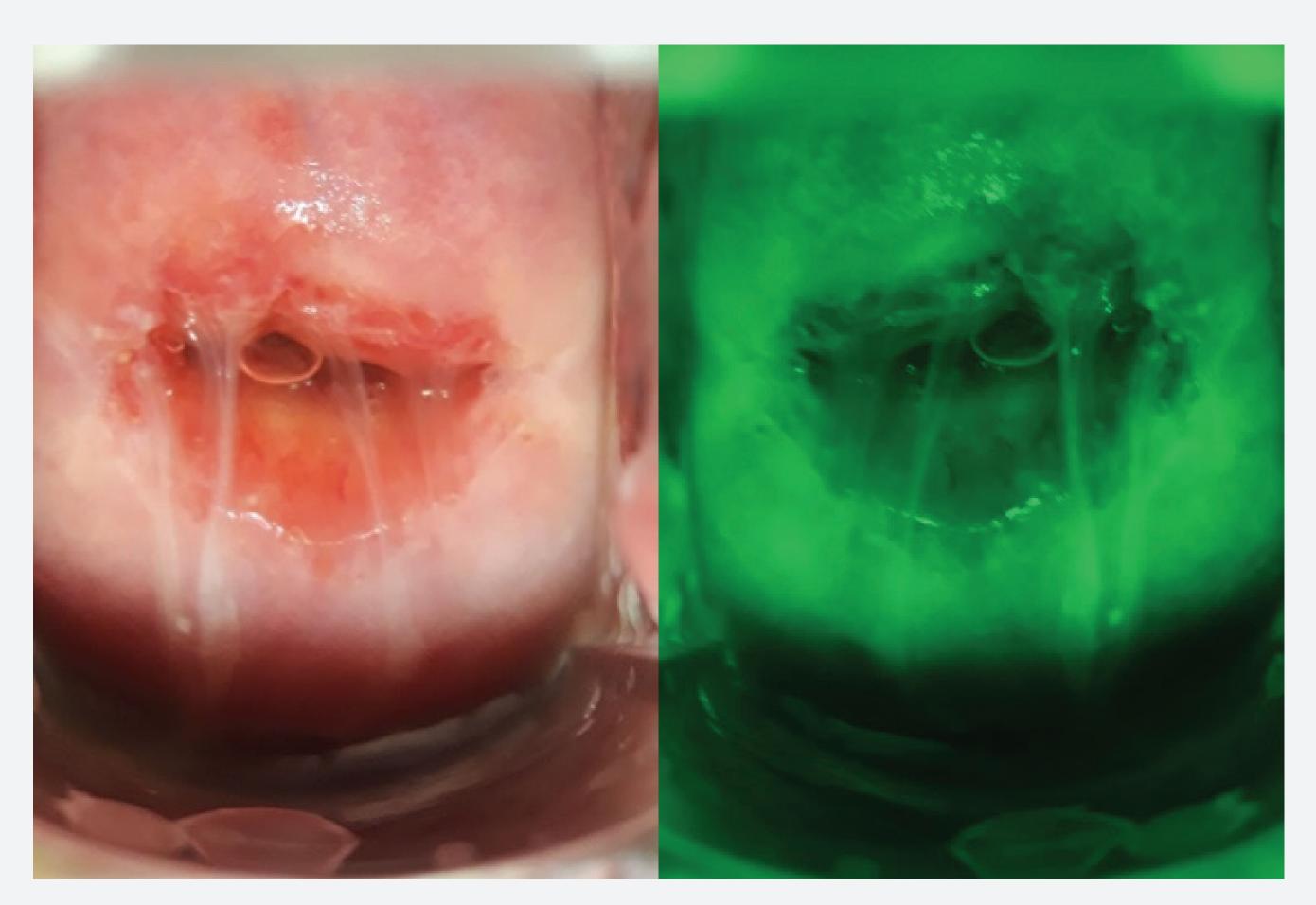


Fig. 2. Colposcopy after 11 weeks (A) Acetic acid staining shows clear regression. Colposcopy after 11 weeks with green filter (B)

CONCLUSIONS:

A conservative non-invasive treatment with the Coriolus versicolor-based vaginal gel for 11 weeks has shown to be effective for HR-HPV cervical lesion regression in a pregnant 30 year old woman and no adverse effects were observed in this clinical case.