



Human Papillomavirus (HPV)

Approximately 20 million people are infected with HPV in the United States, and there are 6 million new infections each year. Almost half of these infections occur in adolescents and young adults between the ages of 15 and 24. HPV is so common that most sexually active adults become infected at some point in their lives.

Of the more than 40 types of HPV that infect humans, most have no symptoms. However, certain types can persist and cause cervical cancer, as well as other less common cancers such as cancers of the anus, penis, vulva, vagina, and the back of the throat. Other types of HPV can cause genital warts, and, in rare cases, respiratory tract warts in children (a condition known as juvenile-onset recurrent respiratory papillomatosis).

Each year, about 12,000 women are diagnosed with cervical cancer, and about 4,000 women die from the disease annually in the United States. At any given time, about 1% of men and women have genital warts.

Two HPV vaccines are licensed by the Food and Drug Administration (FDA). One vaccine, Cervarix, prevents against HPV types 16 and 18, which account for 70% of cervical cancer cases. The second vaccine, Gardasil, prevents four HPV types: types 16 and 18, as well as types 6 and 11, which cause 90% of all cases of genital warts. Gardasil has also been shown to protect against cancers of the anus, vulva, and vagina, and is the only type licensed for use in males.

Both vaccines are administered in a 3-dose series. They are routinely recommended for 11- and 12-year old girls and boys, but can be started as early as age 9. For individuals who did not get fully vaccinated when they were younger, the HPV vaccine is recommended for females between the ages of 13 and 26 and males between the ages of 13 and 21. The HPV vaccine is also recommended for men who have sex with men and persons with compromised immune systems (such as HIV).

It is important that individuals receive all three doses of the HPV vaccine to get the full benefits. Vaccinated females will still need regular cervical cancer screenings, since the vaccines prevent against most, but not all, types of HPV that cause cervical cancer. Further, all vaccinated patients should continue to practice protective sexual behaviors since the vaccine will not protect against other sexually transmitted infections.

Resources:

Free CFHC Webinar -- *The HPV Vaccination Series: Improving Access, Addressing Barriers*: <http://www.cfhc.org/learning-exchange/hpv-vaccination-series-improving-access-addressing-barriers>

CDC HPV Fact Sheet (English): <http://www.cdc.gov/std/HPV/HPV-Factsheet-March-2013.pdf>

CDC HPV Fact Sheet (Spanish): <http://www.cdc.gov/std/spanish/HPV-factsheet-sp-May-2013.pdf>

For teens: <http://www.teensource.org/std/hpv>

For parents: <http://www.talkwithyourkids.org/pages/parents/HPVVaccine.html>

California STD Control Branch: <http://www.cdph.ca.gov/programs/std/Pages/AboutSTDCB.aspx>

California Immunization Branch: <http://www.cdph.ca.gov/programs/immunize/Pages/default.aspx>

CDC Vaccines for Children Program: <http://www.cdc.gov/vaccines/programs/vfc/index.html>

Merck Vaccine Assistance Program: <http://www.gardasil.com/how-to-get-gardasil/assistance-programs/>

Minor Consent for STD Prevention Services in California (AB499):

http://www.cdph.ca.gov/programs/std/Documents/Minor_Consent_for_STD_Services.pdf

Standing Orders for Administering HPV Vaccine to Children and Teens: <http://www.immunize.org/catg.d/p3090.pdf>

