

Reducing the Burden of HPV-related Cancers

Building Momentum in Primary Care

Expert Commentary



Are there any data regarding HPV transmission between MSM (men who have sex with men)?

Among MSM who engage in anal sex, the rate of transmission of HPV between partners is high. HPV infection among MSM results in a higher risk for anal cancer compared to heterosexual men. The risk for anal cancer is highest among HIV-infected MSM.

Is it true that New Zealand has just about eradicated HPV in their population because of the vaccine?

Yes, both New Zealand and Australia are poised to nearly eradicate HPV-related cancer in the coming decade due to large-scale vaccination efforts.

It is important to note that changes in relationships (i.e., new partners) in women ≥ 27 years of age can also have implications for Pap smear testing in addition to HPV vaccination. Regarding ENT cancer screening, if a woman has a positive Pap test, or if genital warts are present, is ENT endoscopy of the larynx recommended? Some dentists do posterior oral exams for "HPV" disease.

For many adults, relationships can and do change at any age. There is no recommendation for a screening vocal cord (larynx) endoscopy. HPV-related head and neck cancer involves the oropharynx, not the larynx.

The oropharynx is more difficult to examine compared to the oral cavity. The oropharynx is the area of throat behind the mouth (base of the tongue, the soft palate, the tonsils, and the side and back walls of the throat). Many dentists will visualize the soft palate and tonsils during a dental exam to see if there is visual evidence of an abnormality. In addition, many dentists include palpation of the neck to feel for lymph nodes as part of their dental exam. Enlarged lymph anterior cervical nodes, without symptoms of infection, is a common presenting symptom of oropharyngeal cancer.

Can you address the changes in Pap testing and HPV testing for women, especially older women?

Current recommendation for cervical cancer screening is to start at age 21yo.

- Women aged 21–29 years should have a Pap test alone every 3 years. HPV testing is not recommended.
- Women aged 30–65 years should have a Pap test and an HPV test (co-testing) every 5 years (preferred). It also is acceptable to have a Pap test alone every 3 years.

Cervical cancer screening can stop after age 65 years if:

- No history of moderate or severe abnormal cervical cells or cervical cancer, and
- Either three negative Pap test results in a row or two negative co-test results in a row within the past 10 years, with the most recent test performed within the past 5 years.

Additional information:

<https://www.acog.org/clinical/clinical-guidance/practice-advisory/articles/2018/08/cervical-cancer-screening-update>

In regard to vaccine hesitancy, please address current progress in use of Needle Free vaccine patch, microneedle patches, or Nanopatches™ which have been used with HPV vaccines particularly.

Exciting vaccine technology is on the horizon! Early research studying a needle-free influenza vaccine has shown promise. I believe the Nanopatch HPV vaccine studies are all in pre-clinical (animal) phase. More to come in the next few years.

Are there data showing that the HPV vaccine lowers the rate of oropharyngeal cancers in males? One of your slides shows the incidence RISING in males.

HPV vaccination and oropharyngeal cancer has not been explicitly studied. Oropharyngeal cancer was not included in any manufacturer pre-licensure trials because there is no pre-cancerous marker (nothing that is equivalent to a Pap test for the oropharynx).

“The oropharyngeal and head and neck cancer indication is approved under accelerated approval based on effectiveness in preventing HPV-related anogenital disease. Continued approval for this indication may be contingent upon verification and description of clinical benefit in a confirmatory trial.”

http://www.merck.com/product/usa/pi_circulars/g/gardasil_9/gardasil_9_pi.pdf

What about previously unvaccinated persons over 45 years whose spouse dies and they go back “on the market”?

The Gardasil9 vaccine is FDA approved through age 45 years. For those over age 45 years, the vaccine would be used off-label and the patient would need to incur the cost (would not be covered by insurance). In my experience, some patients are willing to pay for this vaccine for the protection.

What should we do about women testing positive for HPV in her 60s during Pap smear? How often should they be tested with a Pap test and/or HPV testing?

All women 30 years of age and older should undergo HPV co-testing with all Pap tests if available. Below are links for a more comprehensive review of screening and following abnormal results.

Cervical Cancer Screening Recommendations:

<https://www.acog.org/clinical/clinical-guidance/practice-advisory/articles/2018/08/cervical-cancer-screening-update>

Managing Abnormal Cervical Cytology:

https://journals.lww.com/greenjournal/Fulltext/2013/12000/Practice_Bulletin_No__140___Management_of_Abnormal.40.aspx

