

Women's Health

Did you know there is a vaccination for cancer of the cervix? Dr Rebecca Overton from CHI explains.

Human Papilloma Virus (HPV) is the virus that causes genital warts. Infection with HPV generally occurs through contact with infected skin, most commonly through sexual contact. There is a high rate of transmission of the infection (50–80 per cent risk) when there is unprotected sexual activity with someone who has an active HPV infection.

Infection with the genital wart virus is extremely common. It is thought that 80 per cent of sexually active women will develop an HPV infection during their lives. Infections are most common in young women, and are seen most commonly in women just after they become sexually active. The more sexual partners one has, the more likely they will contract the HPV virus.

Most genital wart infections are cleared by the body within 12–24 months. In less than 10 per cent of infections, the virus is not cleared by the body and persists.

When the virus infects the cervix, it can cause changes in the cells of the cervix which can be precursor changes of cervical cancer and be detected as an abnormal Pap smear.

Sometimes the changes in the cells seen with an acute HPV infection will resolve over time, in other instances, the changes may progress to more abnormal cells and cervical cancer.

Cancer of the cervix is the second most common cause of cancer in women worldwide. Pap smears endeavour to detect early changes in the cells, before they progress to become cancerous. Pap smear changes caused by HPV are highest in women less than 30 years old. In Australia, Pap smears are recommended every two years for all women between 18 and 69 years of age, starting two years after first sexual intercourse.

There are many strains of the wart virus, and it is known that several (such as HPV 16 and 18) are more likely to cause abnormal cells in the cervix and cancer of the cervix as well as cancers of the anus, penis, vulva and vagina. Other strains of the virus (such as HPV six and 11) will cause genital warts only, but do not lead to cancers of the genital tract. Approximately 10% of the population will develop genital warts in their lifetime. Genital warts are most common in the 15–24 year old age group.

Two vaccines against the common strains of HPV virus which cause genital warts and changes in the cells of the cervix have been developed: CERVARIX and GARASIL.

These vaccines are intended to prevent initial HPV infection so ideally are given before women become sexually active. In women already infected with HPV, the vaccines do not treat the infection or prevent disease caused by the strain causing the infection.

In women who have not been exposed to the HPV virus, the vaccines are very effective (90–100 per cent) at preventing infection and disease.

Antibodies to the virus from the vaccination are produced in almost 100% of people vaccinated. The duration of immunity from the vaccination is not yet known so it is not clear whether booster shots will be needed.

GARDASIL is available in Singapore and is given in three doses – today, and two and six months from today. It protects against HPV strains six, 11, 16 and 18.

The vaccination is recommended for females aged 10–13 years ie before they become sexually active. The vaccination can also be given to girls aged 14–18 years, even though some may

have commenced sexual activity, as hopefully they would not yet have been exposed to HPV virus. If given to women 18–27 years of age, it's effectiveness will depend upon past sexual history and previous exposure to HPV. Safety and efficacy has not been studied in women older than 27 years.

HPV vaccinations are generally well tolerated. Side effects may include discomfort, swelling and redness at the injection site. Much less commonly, fainting or symptoms of allergy may occur after the vaccination.

Complete Healthcare International (CHI) at *body with soul*, 45 Rochester Park. Call 6776 2288 or log on to www.chi-health.com.sg.



Above: Dr Rebecca Overton (third from right) and the team at CHI.

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