*Disclaimer: this article includes conversations of sexually transmitted diseases, sex, and cancer.*

In honor of Cervical Cancer Awareness Month, we will be taking a closer look into HPV, or Human Papillomavirus, which is a vaccine-preventable disease. The current HPV vaccine is one of the only vaccines available that has a “shot” at preventing cervical cancer in women and oral cancer in both men and women.

**What Is It?**

Human Papillomavirus, or HPV, is the most common sexually transmitted infection. However, there are many types of infection that can cause various types of health problems, including genital warts, oral cancer, and cervical cancer. HPV can be spread through vaginal, anal, or oral sex with someone who already has the virus, even if they are not showing symptoms. However, it is more common for it to be spread via skin-to-skin contact during vaginal or anal sex.

According to the CDC, about 9 out of 10 cases of HPV resolve on their own without symptoms, however, infected individuals can experience genital warts, which appear as a small, group of bumps that can be raised or flat – mostly like cauliflower- on the genitals. While the warts are from a different type of HPV, cancer can still occur, and may happen many years after HPV is in the body and can affect both men and women.

Currently, there is no “test” for HPV. However, regular cervical cancer screenings and doctors visits can increase the likelihood of better treatment and early detection of HPV-related cancers and warts.

**History of Disease and Treatment**

Because of the sexual nature of HPV, not much research has been done into finding the epidemiological history of the disease, however, it is believed that HPV is very common, with up to 80% of women getting some form of HPV before their 50th birthday and the CDC also estimates about half of the sexually active population will get a strain of HPV.

A link between cervical cancer and HPV wasn’t discovered until 1986, when scientist Harald zur Hausen characterized genotypes of HPV. According to Hausen’s characterizations, it was learned that subtypes 16 and 18 of HPV, are responsible for 70% of the cervical cancer cases attributed to HPV infections. By 2008, the first vaccination against HPV became available in the United States.

**Vaccination**

There are three vaccines available to prevent HPV including the Gardasil (HPV4), approved in 2006, the Cervarix (HPV2) in 2009, and the nine-valent Gardasil (HPV9) in 2014. All three contain shell-viruses of the most common HPV strains that can cause cancer. The CDC recommends all individuals, including men, 9 to 26 years of age, to get the HPV vaccine. The vaccine has been proven to be more effective at younger ages, such as 11, 12, and 13, rather than over 26 years of age. And, at this time, the HPV vaccine is not recommended for anyone older than 26.

**The Stigma of HPV Vaccination**

As of 2023, HPV vaccination remains low, and prevalence of the disease continue to remain high among young women and men in the United States. According to journal article published by the American Medical Association in 2015, there are several factors for the HPV vaccine low pick-up rate, which include overall STI stigma, lack of well visits for sexually active women, and lack of requirements for HPV vaccination and lackluster recommendations by physicians.

However, great strides have been made in the public relations world of HPV vaccines, however, it up to public health and medical professionals to continue the educational work surrounding HPV vaccinations. Kansas, specifically, has a higher coverage rate than the national average (64.3%). However, it can still be improved.

**Resources and Source Material**

<https://www.immunizekansascoalition.org/datadash.asp>

<https://journalofethics.ama-assn.org/article/hpv-vaccine-overcoming-barriers-acceptance-medical-triumph/2015-09>

<https://historyofvaccines.org/diseases/human-papillomavirus-hpv-infection>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1581465/>

<https://www.cdc.gov/std/hpv/stdfact-hpv.htm>