The American Osteopathic Association created this fact sheet for you to give to patients. Use the information that follows as a means of discussing human papillomavirus (HPV) with your patients. In addition, encourage your patients to consult a few of the Web sites listed at the end of this handout for resources and news about HPV.

What should I know about HPV?
If you are at least 26 years old and sexually active, you have a 20% to 27% chance of becoming infected with human papillomavirus (HPV)—the most common of all sexually transmitted diseases (STDs). Throughout the course of your life, the odds increase to at least 50% if you stay sexually active.

HPV is a term that applies to a specific group of more than 100 viruses that readily spread from person to person. Among these HPV types, more than 30 are transmitted through sexual contact.

HPV mainly attacks the external sex organs, typically targeting the skin and the moist inner mucus-secreting lining in the mouth and anus, which are called mucous membranes.

HPV infections range from relatively benign to life-threatening. They are labeled either low risk or high risk, depending on whether they might cause cancer. Some low-risk HPV types can cause genital warts; many cause no symptoms at all. High-risk types can cause serious cervical lesions, cervical and other genital cancers and oral cancers.

You may think you are safe from getting an STD such as HPV if you only have oral sex, or what young people today call “outercourse.”

Outercourse means engaging in a form of genital-to-genital contact that does not include penetration or intercourse but that includes petting, mutual masturbation and kissing. If you engage in this form of activity, you are not off the hook if your partner has been infected. HPV infection can spread through any kind of oral or genital contact, whether it is with a man or another woman.

You may also think, “My partner does not have an STD. I would know it if he or she did.” Sorry but you may be mistaken. Your partner could have an STD and not know it. Your partner could have gotten it before you two connected. Most people do not have any symptoms at all when they are first infected with HPV. It may be many years before an HPV-infected person starts having symptoms.

Are there any warning signs?
You can’t see HPV, which is smaller than any bug or bacteria. In addition, HPV infections rarely cause obvious signs or symptoms that might warn the infected person. This is the reason why physicians recommend that all women be tested regularly with Pap tests, also known as Pap smears.

The Pap test can detect any abnormal changes in the cervix long before they turn cancerous. The cervix is the lower part of a woman’s major reproductive organ—the uterus. Located above the vagina, the cervix joins the uterus to the vagina.

The high-risk, cancer-causing strains of HPV do not generally produce any symptoms. In contrast, some low-risk strains can cause cauliflower-like genital warts on the vagina, anus or urethra in women and the anus or penis in men.

These outbreaks can go away on their own, stay about the same, or get worse. In some cases, however, people infected with low-risk types of HPV do not get any visible genital warts at all, or the eruptions could appear years after having contracted the virus. For this reason, you cannot rely on the visual presence of genital warts to determine whether you or your sexual partner is infected.

Pregnancy considerations
If you are pregnant or plan to have children in the future, it is essential that you stay up to date with your Pap testing. If you have been getting Pap tests, your physician will know if there have been any past abnormalities and will be better able to evaluate any abnormalities you might develop during pregnancy.

Once a woman becomes pregnant, most physicians will do a Pap test during the first prenatal visit, and if it shows abnormalities, will order more tests. Women should inform their physicians of any history of HPV or genital warts; tissue changes in the cervix, such as an abnormal Pap test; or any other medical problems.

The good news is that no link has been found between HPV and miscarriage, premature delivery, or other pregnancy complications. And if women are infected, the risk of transmitting the virus to their babies is very low. Even if babies do get the HPV virus, their bodies usually clear the virus on their own.
Learn to say ‘no’
The only sure way to prevent getting sexually transmitted infections is to say ‘no’ to sex until you are ready to enter a serious, committed relationship.

Use alcohol sparingly or not at all and say ‘no’ to drugs
Drinking or taking drugs can loosen your inhibitions and lead to bad decision-making, such as having sex without a condom or with an HIV-infected partner.

Use condoms
If you are sexually active and not ready to become pregnant, using condoms consistently and correctly can lower your risk of getting some infections that are transmitted through semen, such as HIV, chlamydia and gonorrhea.

Unfortunately, condoms are not 100% protective against HPV as they are against other sexually transmitted infections.

The HPV virus infects genital and other areas that condoms do not cover, particularly the male scrotal sac.

Lower your risk by having a single partner
You can lower your risk of getting infected with HPV if you are in a mutually faithful relationship with someone whom you can be fairly certain has had no other sex partners while you have been together. The more partners you have, the greater is your risk of acquiring HPV.

Get screened regularly for cervical cancer
Physicians recommend that all women get a Pap test regularly. To perform the Pap test, physicians insert an instrument to examine the vagina and cervix and then collect a few cells and mucus to send to a laboratory. The laboratory tests the cells for changes.

If the Pap test uncovers severe changes your treatment might consist of surgically removing the abnormal tissue. The good news is that most abnormal results from Pap tests are caused by an HPV infection that will go away on its own or by an inflammation that can be easily treated.

There is no general test to determine a woman’s or man’s overall HPV status. However, in most HPV cases, the body’s immune system clears the infection naturally within two years. Nevertheless, you still need to take precautions because you could be one of the women whose infection turns into disease.

Even if you have been vaccinated against HPV, you should still be screened regularly for cervical cancer because the vaccine does not protect against all causes of cervical cancer.

Talk to your physician
Don’t be ashamed to ask your gynecologist, family physician or any other physician about issues related to sex. Asking questions can save your life. Your physician has heard it all before and is not going to judge you. Ask about safer sex, about sexually transmitted diseases, and any other concerns you might have.

Preventing STDs and treating patients for them early are important measures not just for your health but also for the health of your partner.

Ask about HPV vaccine.
Vaccines are available that can protect women against developing any of the four types of HPV that cause most cases of cervical cancer and genital warts.

Ask you physician to see if you might be a good candidate for an HPV vaccine. Ask your physician for current information regarding HPV vaccine availability.

Can HPV be treated?
There is no treatment for the virus itself, but there are treatments for the diseases caused by HPV. For example:

Genital warts
There are medications that you can obtain over the counter to remove visible genital warts. However, you should consult with your physician about which treatment is best for you. Some people prefer to wait to see whether the warts disappear on their own. Remember though that whether or not the warts are visible, HPV is still present in the body. If the warts are not treated, they have the potential to go away on their own or to become cancerous.
ent, you can still infect your partner, and HPV may remain in your system for life, although often in a dormant stage.

**Cervical dysplasia**

Physicians use the Pap smear to diagnose abnormal cells before they become cancerous. The medical term for this is *cervical intraepithelial neoplasia (CIN)*, also known as *cervical dysplasia*. Patients are usually treated for this condition with an outpatient surgical procedure.

**Cervical cancer**

Invasive cervical cancer is most treatable when it is diagnosed early and patients are treated with new forms of surgery, radiation therapy, or chemotherapy, or a combination of two or more of these.

**What's for real:**

**Some common myths**

**Myth:** I can’t become infected with HPV if my partner isn’t having an outbreak.

**Reality:** Not true. HPV can spread even when symptoms are not visible.

**Myth:** You can’t get HPV or other sexually transmitted infections from oral sex.

**Reality:** You can get infected from giving or receiving oral sex with a man or woman.

**Myth:** Using two condoms, one on top of the other, gives you extra protection against sexually transmitted infections.

**Reality:** Using two condoms at once can cause friction that will tear or break both condoms, increasing your risk of exposure to HPV and other sexually transmitted diseases.

**Myth:** Only people who have casual sex get HPV or other sexually transmitted infections.

**Reality:** It is true that having multiple sexual partners puts you at higher risk of getting HPV or another sexually transmitted infection. But, you can get HPV even if you are in a mutually committed relationship.

The fact that you may become infected with HPV doesn’t mean that your partner has cheated. Genital HPV can go into a latent state and remain in the body for weeks, years or even a lifetime without existing signs that it is present.

**Myth:** If I have genital warts or abnormal cells on a Pap test (cervical dysplasia), it means that I will have recurrences for the rest of my life.

**Reality:** In some but not all cases, warts and dysplasia do recur. If they do recur, it might be for only one more time or for several times. For many people, however, their bodies gain some mastery over the HPV infection over time, and recurrences become less frequent. They can even go away entirely within about two years.

You should discuss with your physician how you can help keep your immune system healthy so that it fights against recurrences. In general, adequate nutrition, exercise, and a relatively healthy lifestyle strengthen your immune system.

**Myth:** Once warts are removed, they are no longer contagious.

**Reality:** Medical opinion is not settled on this point yet. The best advice right now is, “Don’t be too sure.” Removing the warts cannot guarantee that the risk of transmission is eliminated. Therefore, abstinence and safe sex remain the best protections against spreading the virus.

**Myth:** If you have sex in a swimming pool, you won’t get pregnant or infected by HPV because chlorine kills sperm and viruses.

**Reality:** You can become pregnant and you can contract HPV while having sex in a pool.

**Myth:** You can use bleach after having unprotected sex to prevent infection.

**Reality:** Washing the genitals or douching with bleach is dangerous, and it doesn’t prevent infection after having unprotected sex.

**Check it out**

Following are some key resources for patients.

- American Social Health Association’s HPV Resource Center—Learn About HPC. Myths and Misconceptions. Available at www.ashastd.org/hpv/hpv_learn_myths.cfm.