

# What Every Woman Should Know About HPV

## Protect Yourself Against Cervical Cancer



### What is HPV?

- HPV is a very common virus like chicken pox. In fact, it's estimated that **8 out of every 10 women get HPV by the age of 50.**<sup>1</sup>
- For most women, HPV is not a problem. They are able to fight off the infection before it causes any problems. For some, however, the infection persists.
- Men also can get HPV. However, it is rare for HPV to cause serious problems in men.

### How is HPV linked to cervical cancer?

- Certain "high-risk" types of HPV are the cause of cervical cancer.
- When a woman is not able to fight off an infection with a high-risk type of HPV, abnormal cells may form on the cervix.
- **If they are not detected and treated early, these abnormal cells can develop into cervical cancer.**<sup>2</sup>

### How do you get HPV?

- HPV is spread through intimate (genital) skin-to-skin contact, usually during sexual intercourse.
- Your likelihood of getting HPV increases if you have more than one sexual partner, but you can get the virus from just one person.
- Once you have the virus, it may not cause any problems. It may simply go away later. However, it also can "hide" in your cervical cells undetected for months or years before it becomes active and causes abnormal cells to form.

### How do you know if you have HPV?

- High-risk HPV does not produce any symptoms. You can have HPV and not know it.
- The U.S. Food and Drug Administration (FDA) has approved a high-risk HPV test for women that can be done along with a Pap.
- The Digene® HPV Test determines whether you have one or more of 13 types of potentially cancer-causing types of the virus. Knowing your HPV status allows your health care provider to monitor you more closely.
- There currently is no FDA-approved HPV test for men.

### How can getting the right tests prevent cervical cancer?

There are two tests that can protect you from cervical cancer: a Pap and an HPV test. For both tests, a doctor or nurse collects a sample of your cervical cells during your gynecologic exam.

### The Pap test...

- The sample of cervical cells is sent to a lab, where it is examined under a microscope for signs of abnormal changes caused by HPV.
- The Pap test is not foolproof.
- **In fact, research shows that a Pap fails to find abnormal cells that need treatment 15 to 35 percent of the time.**<sup>3</sup>
- In addition, cells may appear abnormal when they are not.

### The HPV test...

- The HPV test also is done in the lab on a sample of cervical cells. In fact, the HPV test can usually be done on the same sample collected for the Pap.
- The HPV test uses advanced molecular technology to detect high-risk types of HPV.
- The Digene HPV Test is the only HPV test approved by the FDA.
- One of the advantages of a molecular test is that the result does not depend on the skill of the person examining the cells.
- Knowing whether you have HPV shows if you are at risk for cervical cancer and may need additional exams — or not.

For more information, visit  
[www.theHPVtest.com](http://www.theHPVtest.com)

1.866.895.1HPV  
[www.theHPVtest.com](http://www.theHPVtest.com)

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Take the test. Not the risk.

## How do you know which test you should get, and when?

### Women younger than 30...

- All women should begin getting a Pap test three years after first sexual intercourse or at the age of 21 – whichever comes first.
- Routine HPV testing isn't necessary yet, because infections in younger women usually don't stay active for very long.
- However, medical experts recommend that women of any age have an HPV test when their Pap results are unclear.

### Women 30 and over...

- This is the age group in which cervical cancer most often develops, because HPV infections in these women are more likely to be long-lasting.

- **HPV infections can persist for many months or even years before they cause problems.**<sup>4</sup>
- That's why medical organizations now suggest that every woman age 30 or older get the HPV test along with her Pap.
- **If your Pap is normal but you have high-risk HPV, medical experts recommend retesting in twelve months.**<sup>5</sup>
- When the Pap and HPV tests are done together on a regular basis, cervical cancer can nearly always be prevented.

### Can the new HPV vaccine prevent infection?

- The first HPV vaccine was approved by the FDA in June 2006 for girls and young women age 9-26.
- The vaccine protects against the two most common types of HPV that cause 70 percent of cervical cancers. However, the vaccine does not protect against all high-risk types of HPV.

- The vaccine is most effective for females who have **not yet** been exposed to the targeted types of HPV through sexual contact.
- The vaccine is **not a cure** for existing infections.
- Women should be screened regularly with the Pap and (if 30 or older) the HPV test, whether or not they are vaccinated.

### Will insurance pay for the HPV test?

- Nearly all insurance plans pay for the HPV test — both for follow-up evaluation when your Pap result is unclear and (for women 30 and over) for routine screening.
- Digene offers a hotline that can help you determine if your health plan covers the HPV test.
- **Call 1-866-895-1HPV (1-866-895-1478).**
- Please have your insurance company's name and group number available when calling.

## What do my results mean?

	You are under 30 years old	You are 30 years old or over and your HPV Test is negative	You are 30 years old or over and your HPV Test is positive
<b>You have a normal Pap test</b>	Repeat Pap test in 1-2 years, depending on your doctor's recommendation.	Repeat the HPV Test in 3 years. You should still see your doctor each year for other important exams.	Repeat the Pap and HPV Test in 12 months. <sup>6</sup>
<b>You have an inconclusive (ASC-US) Pap test</b>	Your doctor will likely suggest HPV testing. Other options include: repeat the Pap test at 6 and 12 months or immediate colposcopy*.	Repeat the Pap and HPV tests in 12 months.	A colposcopy* is recommended.
<b>You have an abnormal Pap test</b>	It is important to understand why your cells look abnormal. Your doctor will perform a colposcopy*. Also your doctor may order additional tests.	It is important to understand why your cells look abnormal. Your doctor will perform a colposcopy*.	Your doctor will perform a colposcopy*.

Based on American College of Obstetricians and Gynecologists Practice Bulletins, April and September 2005.

\*Colposcopy is a procedure to look at your cervix more closely. Usually a sample of tissue (called a biopsy) is taken during the colposcopy.

## Digene supports your annual well-woman visit

Your annual well-woman visit is important to your overall health. Your annual visit may include any of the following, based on your personal history and needs:

- Mammogram
- Cholesterol
- Blood pressure
- Colorectal cancer screening
- Depression
- Osteoporosis
- Bladder health
- Thyroid Disease
- Diabetes
- Hormone therapy
- Immunizations
- Weight management
- Domestic violence
- STDs

## What does Pap(-)/HPV(+) mean?\*

- A Pap(-)/HPV(+) result indicates closer monitoring by your physician.
- A woman is still at low risk for developing cervical disease.
- A majority of women will clear the infection in a year or two.
- However, it is important to be re-tested as recommended by your health care provider to ensure the infection has cleared.

1 [www.cdc.gov/std/HPV/STDFact-HPV.htm#common](http://www.cdc.gov/std/HPV/STDFact-HPV.htm#common)

2 Wright TC, Schiffman M, Solomon D, et al. Interim guidance for the use of human papillomavirus DNA testing as an adjunct to cervical cytology for screening. *Obstet Gynecol.* 2004 Feb;103(2):304-9.

3 American College of Obstetricians and Gynecologists (ACOG) Practice Bulletin. Clinical Management Guidelines for Obstetrician-Gynecologists. Number 61, April 2005: Human papillomavirus.

4 See note 2 above.

5 Wright TC, Massad LS, Dunton CJ, et al.; for the 2006 American Society for Colposcopy and Cervical Pathology-sponsored Consensus Conference. 2006 consensus guidelines for the management of women with abnormal cervical cancer screening tests. *Am J Obstet Gynecol.* 2007 Oct;197(4):346-55.

6 See footnote 5 above.

7 Wright TC. Cervical disease. *OBG Management.* 2007 Mar;19(3).

[www.obgmanagement.com/article\\_pages.asp?AID=4841&UID=#1903OBGM\\_Article4](http://www.obgmanagement.com/article_pages.asp?AID=4841&UID=#1903OBGM_Article4)