

## U-M study: HPV vaccination should be comprehensive

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**"Comprehensive vaccination is the only way to ensure that everybody who can benefit from the vaccine will actually be able to receive it."**

**- Lead researcher Amanda F. Dempsey**

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By **JO COLLINS MATHIS**

*The Ann Arbor News*

Health officials should not use risk factors like a female's sexual history to decide whether she receives the human papillomavirus vaccination, a new study from the [University of Michigan C.S. Mott Children and Women's Hospital](#) found.

"HPV is so ubiquitous in our society, it's virtually impossible to identify people who do or don't have it," said lead researcher Amanda F. Dempsey, a member of the Child Health Evaluation and Research unit team in the division of general pediatrics at Mott. "As many as 80 percent of U.S. adults will have been exposed to HPV by the time they're 50.

"So any kind of targeted strategy would be very difficult given the high prevalence of this infection in our society even without symptoms. Comprehensive vaccination is the only way to ensure that everybody who can benefit from the vaccine will actually be able to receive it."

The [Gardasil](#) vaccine, marketed by drugmaker [Merck & Co.](#), was approved by the [FDA](#) in 2006. It protects against infection by certain strains of HPV, which is a common sexually transmitted disease that can cause lesions leading to cervical cancer.

The vaccine is given as three injections over six to 12 months and is FDA-approved for females age 9 to 26.

Efforts to mandate the vaccine for girls have been met with opposition from those who say it hasn't been proven safe and effective. Some also have argued that sexual abstinence until marriage could prevent exposure to HPV.

Also, as more vaccines become recommended for routine use, the question of how to pay for them has

arisen, Dempsey said. The HPV vaccine is the most expensive routinely recommended vaccine.

"So we were interested in exploring the possibility of using alternative strategies for giving the HPV vaccine as opposed to giving it to everyone," said Dempsey, a pediatrician.

But the study found that using certain risk factors to determine whether a young woman should get the HPV vaccination would deprive more than 80 percent of eligible women from getting it. In turn, using that criteria would mean vaccinating a large number of women already infected with at least one of the four HPV strains the vaccination provides protection against, the study said.

"Selectively vaccinating women based on risk factors alone would mean that more than 2 million women, ages 18 to 26, who had the potential to derive the most benefit from HPV vaccination because they weren't already infected, would miss out on getting the vaccine," Dempsey said in a press release announcing the results of the study.

Much of the confusion over whether to vaccinate stems from conflicting recommendations.

The [American Cancer Society](#) advocates vaccinating all females younger than 18, and selectively vaccinating women ages 19 to 26 based on an informed discussion between the woman and her doctor about her sexual history.

But the [Centers for Disease Control](#) and the Prevention's Advisory Committee on Immunizations Practices recommends universal vaccination for all women ages 11 to 26, regardless of sexual experience. Dempsey said her study agrees with that recommendation.

Among the study's 3,276 female participants, who ranged in age from 18 to 26, more than 9 percent had at least one of the four HPV strains the vaccine protects against. When evaluated for all 27 HPV types, the prevalence of infection grew to more than 26 percent among the study group.

Women with certain risk factors - an older sexual partner, more than three lifetime sex partners, a new sexual partner within the past year and use of illegal drugs within the past year - also were more likely to have an HPV vaccine-type infection, the study found.

The study was supported in part by the 2007 [Ambulatory Pediatric Association](#) Young Investigator Grant program.

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