



CERVICAL SMEARS
AND
HUMAN PAPILLOMAVIRUS
INFECTION (HPV)



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If you have had a smear abnormality and/or have been referred to the colposcopy clinic you should read this pamphlet. Information in this pamphlet applies to all people with a cervix, inclusive of those who identify as men (transmen).

What is HPV?

HPV is one of the most common viral infections. It is so common many experts believe HPV infection should be considered an inevitable consequence of normal sexual activity. More than 150 types of HPV have been identified. Approximately 40 HPV types can infect the vulva, vagina, cervix, penis, anus and throat. In most people the virus is harmless and causes no symptoms.

The majority of people who get infected with HPV won't know they have it – the infection is usually short-lived, and the virus typically leaves the body within 2 years. There is no treatment to get rid of the HPV virus itself, though there is treatment available for some of the things that HPV infection can lead to.

In some people, HPV can cause genital warts. These are harmless, but may be distressing and can usually be treated successfully.

In other people, HPV causes abnormal cells which can sometimes lead to precancer or cancer, including cervical, vaginal, vulval, anal, penile, and head and neck cancers.

HPV is a very common infection in the genital tract of men and women.

How and when did I get HPV?

80% of unvaccinated adults (i.e. those who haven't had the full course of the HPV vaccine) will pick up HPV at some point in their life. HPV infection results from skin-to-skin contact and can be transmitted by lots of different types of sexual contact (including genital-genital, oral-genital, anal-genital and oral-anal).

It can occur when there has been only one lifetime sexual partner. HPV can lie dormant for many years. There is no way to know which partner it came from or how long ago. Having HPV does not mean that a person or their partner is having sex outside the current relationship.

The interval between infection with HPV and a cervical smear abnormality can vary from months to decades. Abnormal smears can occur in people who have not been sexually active for many years.

It is usually impossible to know when HPV infection occurred.

HPV infection is usually transient (not permanent) and will resolve on its own.

What does having HPV mean for me?

HPV is a common infection and often clears by natural immunity. Having HPV does not mean that a person has (or will get) cancer. Most people who have HPV do not develop abnormal cells or cancer.

Only a very small number of people with HPV infection are at risk of cervical smear abnormalities or cervical cancer.

What is the management of abnormal cervical smears?

HPV infection is usually cleared by the body's own immune system within months to a few years.

Abnormal cervical smears are called 'Cervical Intraepithelial Neoplasia' (CIN). CIN is categorised as low grade (known as CIN1), or high grade (CIN2 to 3). The majority of low grade changes, i.e. CIN1, are harmless and return to normal by themselves. People with high grade changes, i.e. CIN2 or 3, are treated to avoid the risk of progressing to cancer. High grade changes are not cancers and they take many many years to turn into cancer.

Depending on the degree of smear abnormality and sometimes HPV DNA result, your doctor or nurse may recommend that you have a colposcopy examination. HPV DNA tests are used in certain clinical situations, usually in conjunction with your smear test. The test can be helpful in deciding what follow-up you require. More information on HPV testing is available on www.timetoscreen.nz/cervical-screening/.

A colposcope is like a pair of medical binoculars on a stand and it magnifies the cells on the cervix. Colposcopy shows where the abnormal cells are. A tiny piece of tissue may be removed (a biopsy) which may cause brief discomfort. The biopsy is sent to a laboratory to confirm if an abnormality is present. These procedures are simple and require only a short visit to a hospital clinic or private specialist.

Depending on the results of this test, you may be advised to have a repeat cervical smear, a further colposcopy, or it may be recommended that the abnormal cells are removed by a simple outpatient treatment.

In some situations your specialist may request HPV Type testing to assist in further management.

Treatment is only required if there are certain abnormal cell changes of the cervix.

What does this mean for my partner?

Partners will inevitably share HPV. This is normal. In new relationships, condoms do provide some protection against HPV and offer good protection from many other sexually transmitted infections.

It is not clear if there is any health benefit to informing (future) partners about a past diagnosis of genital HPV or warts. This is because it is not known how long the virus remains and for most people, the virus is either suppressed or cleared by the immune system.

Partners usually share HPV.

What about the future?

Most cervical cancers can be prevented by HPV vaccination, having regular cervical screening and following National Cervical Screening Programme (NCSP) recommended guidelines if any abnormalities are identified. There is no evidence that HPV will affect your ability to have children.

Smoking decreases the immune system's ability to deal with the wart virus and therefore may increase your risk of developing abnormal cell changes.

HPV vaccines

Vaccines are now available which provide protection from almost all HPV infections that cause abnormal cells.

The HPV vaccine (Gardasil 9) is registered for use in New Zealand for females aged 9–45 years and males aged 9–26 years. The vaccine is free for females and males aged 9–26 years (inclusive) as part of the Ministry of Health's HPV Immunisation Programme.

Cervical cancer can be prevented by HPV vaccination and having regular smears.

Vaccination is most effective when given prior to HPV infection, i.e. before you start having sex. For people who are already sexually active, the vaccine may still be of benefit as it will prevent the acquisition of new HPV infections for the strains the vaccine covers.

For further information please ask for our vaccine information pamphlet, *Preventing HPV Cancers by Vaccination: What Everyone Should Know*, or visit www.hpv.org.nz.

Where can I get further information?

- New Zealand HPV Project Helpline
Tollfree **0508 11 12 13** or www.hpv.org.nz
- Your GP, Family Planning Clinic or Sexual Health Clinic
- Your local colposcopy clinic
- National Cervical Screening Programme
www.timetoscreen.nz/cervical-screening/
Freephone **0800 729 729**

New Zealand HPV Project

Sexually Transmitted Infections Education Foundation

Copies of this pamphlet are available from:

Email: info@stief.org.nz

www.hpv.org.nz

Helpline Tollfree **0508 11 12 13** Phone: 09 433 6526



View our consumer website with information about sexual health and all sexually transmitted infections:

www.justthefacts.co.nz

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