

Editorial

HPV Vaccination in Women: Need of Hour, Yet Unmet

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In India HPV vaccination is not yet included in national program but efforts are underway to roll it out nationally. India has a well-defined paediatric immunisation programme but adult vaccination has always been neglected. There is no proper women immunization program except for the TT vaccinations to expectant mothers. HPV vaccination in women is need of hour in India. As I am observing in my practice, it seems to be a steep rise in promiscuous sexual behaviour in young girls in our country currently, hence it is imperative to vaccinate our young girls. Till it is not started with national program, it is our duty as doctor to inform parents and get girls vaccinated with at least one dose.

Age of vaccination: All girls should be vaccinated from 9-15 yr of age. Catchup vaccination can be given upto 26 years and In high risk woman it can be offered even upto 46 years. Ideally it should be given before sexual activity, hence awareness in girls, about HPV infection leading to cervical cancer and role of vaccination in its prevention, is prudent so they can take HPV vaccination before indulging in sexual activity.

Types of vaccines: HPV viruses are two types high risk causing cervical and vulval cancer and low risk strains lead to benign warts. Among high risk 16 & 18 strains cause 70% of cervical cancers, first bivalent vaccine (HPV 16, 18) like cervirax came for prevention then quadrivalent like gardasil came withinclusion of low risk viruses {6,11} so contained (16, 18, 6, 11), Recently Nonavalent, Gardasil 9, is

available including five more high risk virus (31,33, 45, 52, 58) which are cause of 20% of cervical cancers. Certain strains like, 35, 39, 51, 59, 68 have no vaccine yet against them, they are leading rest 10% of cancers. If affordability or availability is not an issue, nonavalent HPV vaccine can be better option as it covers wide spectrum of strains, although currently data is more robust from bivalent and quadrivalent types as they are older vaccines.

Doses of vaccination: In young girls <15yrs, 2doses are given at 0 & 6 months and >15yrs 3 doses at 0, 1, 6 months are required. WHO currently advocating even one dose in <15 yrs and two doses in >15 yrs may be sufficient.

Preexisting infection: IN HPV positive or abnormal pap's smear: HPV Vaccine does not clear previous infection nor gives any harms, nevertheless it can be given as it may help in prevention of subsequent infection from other strains.

Received one dose: but not aware or unavailability of previous vaccine given, Second dose may be given by available different vaccine, it will not harm in any ways.

HPV vaccines are for prevention not cure. They are most effective when administered before exposure to virus. Natural infection does not provide long term immunity hence vaccination is important. Vaccine does not cover all infections but effective for majority of high risk strains. Remember and tell patients that vaccination is not substitute for cervical cancer screening hence routine screening has to be continued.

