HPV (Human Papilloma Virus) is the virus that causes wart infection. There are many types of HPV that affect different parts of the body and some of them can infect the genital area. Genital HPV is usually a sexually transmitted infection (STI).

Anyone who has ever had sex can have HPV – it’s so common that four out of five people will have had HPV at some time in their lives.

What is HPV?

How do I know if I have warts/HPV?
Most people will not know they have HPV because it can stay inactive inside the body or it can produce an infection that is invisible.

Warts are a visible HPV infection, which appear as solid lumps and may be itchy.

Invisible infection in the cervix may show up on a Pap smear test.

It can take some time for HPV to become active. In most cases the HPV infection is cleared by the body’s immune system in around one to two years, but for some people it may remain active longer.

How do I get HPV?
HPV is spread through genital skin contact. The virus passes through tiny breaks in the skin.

The virus may be present without visible warts for years. A new episode of warts may represent reactivation of the virus rather than recent exposure.

Using condoms with a new sexual partner helps to protect against STIs and may help to decrease the risk of getting HPV. They do not provide total protection because they do not cover all of the genital skin and the HPV infection is often invisible. If a person has visible warts then wart-to-skin contact should be avoided to decrease the risk of spreading the infection.

What are the treatment options for warts?
In many people the warts will disappear by themselves within one to two years. However, some people prefer to have them treated. There is a variety of methods available. If the method you are using is not working it’s important to discuss this with a health professional. Treatments include:

- **Wart paint** (Podophyllotoxin – e.g. Condyline, Wartec): This can be applied by the person with the warts or by a health professional. It can be bought over-the-counter at pharmacies. If warts remain after 4–5 weeks of treatment, see your doctor. Do not use during pregnancy/breastfeeding.

- **Wart cream** (Imiquimod – e.g. Aldara): This cream is available on prescription. It is expensive, but there is a low chance of the warts reappearing after use. Treatment can take 8–12 weeks. Do not use during pregnancy/breastfeeding.

- **Freezing** (Cryotherapy): This uses frozen gas applied by a health worker. It may cause some discomfort. You may need several treatments. It is quite effective and available at SHINE SA clinics.

- **Laser therapy** or **electrosurgery**: These treatments require referral and admission to hospital for anaesthesia and surgery.
HPV and cancer

In a small number of people, a type of HPV can stay in the cells of the cervix. If the infection is not cleared, the virus can cause cell changes that may lead to cervical cancer. This will usually take a long time – often more than 10 years. Most people who have HPV clear the virus naturally and DO NOT develop cervical cancer.

Only a few of the many genital HPV types increase someone’s chance of having cancer. The HPV types causing visible genital warts are not associated with cervical cancer.

A Pap smear test every two years can detect any abnormal cell changes caused by HPV. These changes can be monitored and/or treated to prevent cancer.

The types of HPV that can cause cervical cancer can also cause cancers of the mouth, throat, vulva, penis and anus.

Anal cancer is more common in people who participate in receptive anal sex (is the receiving partner).

Smoking is a major risk factor in developing cancer with HPV exposure.

Can HPV infection be prevented?

Two vaccines are currently available that can prevent infection from certain types of HPV. The vaccines are given as 3 injections within a 6-month period.

- **Gardasil** prevents 2 types of HPV that are linked to the majority (90%) of cervical cancers and a further 2 types that are linked to visible external genital warts.
- **Cervarix** prevents the same 2 types of HPV that are linked to cervical cancer.

Who should be vaccinated?

HPV can be transmitted through any form of sexual contact including vaginal, oral and anal sex.

The best time to have the vaccination is before a person is exposed to HPV, which means before their first experience of sexual intercourse (suggested age 10–15 years).

People who have already had sex can still have the vaccine, and if they have not yet been exposed to the types of HPV covered by the vaccine then the vaccine will be fully effective. The vaccine does not help clear or cure pre-existing HPV infection.

People living with HIV are at increased risk of developing cancer with HPV exposure and should consider vaccination.

How can I be vaccinated against HPV?

Currently, Gardasil vaccine is provided free through school-based programs.

Outside of the school vaccination program, Gardasil and Cervarix are available on private prescription but at a significant cost.

Do I need Pap smear tests if I’ve had the HPV vaccination?

Yes. Although vaccinations will protect against the HPV infection that causes 90% of cervical cancers, you are still at risk of infection from other HPV types.

Regular Pap smears are still the most important protection against developing cervical cancer.

More information

Clinic 275
Tel: 8222 5075
Country callers: 1800 806 490
Address: 275 North Terrace, Adelaide
Website: www.sahealth.sa.gov.au/clinic275

SA Dept of Health: Immunisation Section
Tel: 1300 232 272

SA Cervix Screening Program
Tel: 13 15 56
Website: www.sahealth.sa.gov.au/papsmear

Clinic & Counselling Appointments and General Enquiries
Tel 1300 794 584
Clinics are located throughout the metropolitan area.

Sexual Healthline
Tel 1300 883 793
Country callers (toll free) 1800 188 171
Email sexualhealthline@shinesa.org.au

Talk to a sexual health nurse about any sexual health issue.
Available 9am – 12.30pm, Monday – Friday

National Relay Service
www.relayservice.gov.au
133 677 (TTY/Voice)
1300 555 727 (Speak & Listen)
0423 677 767 (SMS Relay)