

CERVICAL

infection caused
by the human papilloma virus

Québec 

You've been diagnosed with a cervical infection caused by the human papilloma virus?

The human papilloma virus (HPV) is actually a family of a hundred-odd types of virus. Some of the types are associated with cancer and others aren't. Infections of the cervix can be caused by the types associated with the development of cancer.

YOU'RE NOT THE ONLY ONE!

Many, many people have infections caused by HPV. More than 50% of sexually active women have had such an infection at some time in their lives. HPV infection is probably the most common sexually transmitted infection.

HOW IS THE VIRUS TRANSMITTED?

The human papilloma virus (HPV) is transmitted through direct contact with the genitals of an infected person. In rare cases, an infected mother can transmit the virus to her child, especially when she gives birth.

Without realizing it, you may have caught HPV long ago, but it is equally likely that you caught it more recently. There is no way of knowing exactly when a person caught the virus. Most infected women and men have no symptoms and do not know that they are infected, or are unaware that they can transmit the virus.

SPEAKING OF THE VIRUS...

It is true that certain types of HPV are associated with an increased risk of developing cervical cancer, but fortunately, most are not! People can have HPV infections several times in their lives and even be infected by more than one type of HPV.

Apart from causing cervical infection, HPV can manifest itself as condylomata, or genital warts (see the pamphlet on condylomata, or genital warts).

DETECTION OF HPV INFECTION IN THE CERVIX

Cervical HPV infection is most often detected by means of a cervical cytology, or Pap test, which is used to screen for cervical cancer. Actually, cytology detects the lesions caused by HPV, not the virus itself. In certain cases, additional tests may be warranted.



infection caused by the human papilloma virus

WHAT IS THE EVOLUTION OF CERVICAL HPV INFECTION?

HPV usually develops in a person's body without being noticed.

The course taken by an HPV infection varies over time and from one person to another. Infections usually disappear within two years without treatment, but some last, and that is when they can cause the development of cervical cancer.

This explains why doctors often recommend to women who have HPV infections that they have an examination annually—or more often, in certain cases. With regular examinations, lesions that may be precancerous can be detected early and monitored.

ABOUT CERVICAL CANCER...

Bear in mind that most lesions caused by HPV do not lead to cervical cancer.

A few facts about cervical cancer should be pointed out:

- with most women, there is a long period between the appearance of lesions caused by HPV infection and the development of cancer;
- cervical cancer can be detected very early in its evolution through Pap test screening;
- cervical cancer progresses very slowly;
- cervical cancer treatments are effective if they are administered at the beginning of the disease.

When a Pap test is abnormal, the doctor generally recommends cervicospoty, which is an examination using a microscope that provides a magnified image of the cervix. Cervicospoty makes it possible to do a biopsy (taking a small specimen of cervical tissue), if warranted. The examination can pinpoint lesions that may be precancerous.

There are two categories of lesions: low-risk lesions, which are usually benign in evolution or eventually disappear without treatment, and high-risk lesions, which are more frequently associated with cancer.

The body's immune system is usually able to eliminate HPV and the lesions it causes, even high-risk ones. But if high-risk lesions persist (repeated abnormal tests), treatment (destruction of abnormal cells by laser, surgery or another local treatment) can remove them before they progress to cancer.

Your doctor will recommend the follow-up and treatment suited to your situation, taking into account the nature of the lesions detected, as well as their progression. It is important to follow your doctor's recommendations in order to prevent complications.

Unlike the situation with other STDs, there is currently no evidence that the assessment or treatment of sex partners changes anything about the course of cervical HPV infection.

CONDOMS... SOMETIMES OR ALWAYS?

It is recommended that a condom be used with any new sex partner in order to reduce the risk of transmission of STDs, including HPV. And you should ALWAYS use a condom for any sexual activity involving penetration of the penis into the vagina or anus. It is preferable as well to use a condom for oral sex involving penetration of the penis into the mouth.

HPV infections are more common among couples who are new sex partners. It is therefore a particularly good idea for them to use a condom during the first year of their relationship. However, if the lesions are not covered by the condom (if they're on the anus, for example), HPV infection can still be transmitted.

If a member of a couple has had an HPV-infected partner for **more than a year**, it is highly likely that he/she has already been exposed to the virus. Continued condom use among couples in this situation does not appear to be of any help in preventing the risk of recurrence of condylomata. The two partners can stop using a condom if they have no other sexually transmitted infections and have no other sex partners.

REMEMBER

- HPV infection is common.
- The vast majority of HPV-caused lesions do not lead to cervical cancer.
- It is impossible to know when someone caught the virus, but it may have been a long time ago.
- It is important to have a Pap test regularly.
- Condom use at all times during sexual intercourse reduces the risk of transmission of STDs, including HPV.
- If in doubt, do not hesitate to consult a doctor.

WANT TO KNOW MORE?

FOR MORE INFORMATION, CONTACT YOUR CLSC'S INFO-SANTÉ SERVICE OR YOUR DOCTOR.

*Santé
et Services sociaux*

Québec 

www.msss.gouv.qc.ca

Le présent dépliant est disponible en français.

01-340-01A

02-308-01A