

Does the HPV vaccine increase sexual promiscuity?

HPV vaccination has not been shown to increase sexual promiscuity.

Besides HPV vaccination, how else can I prevent cervical cancer?

- Go for regular cervical screening tests. All women who have had sexual intercourse should go for a high-risk HPV DNA screening test every five years or a Pap smear every three years, regardless of whether or not they have been vaccinated.
- Limit the number of sexual partners
- Use condoms during sexual intercourse
- Quit smoking

I am above 26 years old. Can I still be vaccinated?

Yes, you can be vaccinated. Women up to 45 years old have been shown to exhibit immune response to the vaccines.

Women between 27 to 45 years old do not fall within the standard of care and may have limited benefits if previously exposed to HPV infection. HPV vaccination is not therapeutic and does not treat an existing infection or pre-cancer but may offer protection to the other subtypes of HPV.

If I have had the bivalent or quadrivalent vaccine, do I need to go for the nanovalent vaccine?

The nanovalent vaccine offers additional protection against HPV strains 31, 33, 45, 52, and 58 which accounts for 20% of cervical cancer. Do discuss with your doctor about this.

Protect yourself from Cervical Cancer.
Talk to your doctor about
HPV Vaccination today!

References:

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All information contained herein is for your general information only and is not a substitute for medical advice on immunisation against HPV. If you have specific questions or require medical care, please consult your doctor.

Information is correct as of April 2019.

Useful telephone numbers

Appointments/Specialist 6294-4050
Outpatient Clinics Hotline



100 Bukit Timah Road
Singapore 229899
Tel: 6-CALL KKH (6-2255 554)
Fax: 6293-7933
Website: www.kkh.com.sg
www.facebook.com/kkh.sg



Human Papillomavirus (HPV) Vaccination



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PATIENTS. AT THE HEART OF ALL WE DO.®

The Human Papillomavirus (HPV) is a viral infection that is transmitted through intimate contact. It is a very common infection, affecting more than 80% of women and men in their lifetime.

The majority of HPV infections go away on their own. However, persistent infection with high-risk HPV may lead to cervical cancer.

Why is vaccination against HPV important?

“High risk” HPV types **16 and 18** are responsible for more than 70% of all cervical cancer cases worldwide.

After HPV types **16 and 18**, the six most common cervical cancer-causing HPV types are 31, 33, 35, 45, 52 and 58.

HPV is also responsible for a proportion of vulval, vaginal, anal, penile and oropharyngeal cancers.

“Low risk” HPV types **6 and 11** cause 90% of genital warts cases.

Most HPV infections occur without signs and symptoms. This means that the viruses are often transmitted from person to person without their knowledge.

Is the HPV vaccination necessary?

HPV vaccines are included in the National Immunisation Schedule but are not compulsory. The vaccines are recommended as prevention against cervical cancer.

What are the types of HPV vaccinations available?

| | Cervarix | Gardasil | Gardasil 9 |
|----------------------|----------------------------------|-----------------------------------------------|----------------------------------------------------------------------|
| HPV strains coverage | Bivalent 16, 18 | Quadrivalent 16, 18 6, 11 | Nanovalent 16, 18 6, 11 31, 33, 45, 52, 58 |
| Dosing (months) | 0, 1, 6 | 0, 2, 6 | 0, 2, 6 |
| Covers Cancer | ✓ | ✓ | ✓ |
| Covers Warts | ✗ | ✓ | ✓ |
| Medisave claimable | ✓ | ✓ | ✗ |

The vaccines are given as an injection in the muscle of your upper arm.

For girls 9 to 14 years old, two doses are given at 0, 5 to 13 months.

For maximum benefit, we strongly encourage you to complete the course of the vaccination in the recommended schedule.

What should I do if I miss my vaccine or become pregnant before completing the course?

If you miss your dose, do get the next one as soon as possible and complete your course as per schedule. There is no need to restart the entire vaccination series again.

Pregnancy should be avoided until one month post-vaccination. Women who get pregnant before completing the vaccination schedule should defer the next dose until after delivery. The vaccine is safe in breastfeeding and can be given after delivery.

Who should receive HPV vaccination?

The vaccines are recommended for girls who are between 9 to 26 years old.

These vaccines work best when given before the first sexual exposure. Women who are sexually active may still benefit from the vaccination, as they may not have been exposed to the HPV subtypes covered by the vaccine.

Is the vaccine safe?

Yes, the vaccine is safe! The vaccine has more than 10 years of safety data. However, there may be some side effects of pain, swelling, bruising at the site of injection and fever.

Who should not be vaccinated?

Anyone who:

- is allergic to yeast or any component of the vaccine
- has developed hypersensitivity after receiving a dose of the vaccine
- is pregnant

The vaccine can be given to individuals with impaired immune system, (eg. immunosuppressive treatment or HIV.) However, the immune response to the vaccine may be lower compared to those with a normal immune system.

The vaccine should be given with caution to individuals with low platelet counts, bleeding disorders or on blood thinning medication.

My daughter is not sexually active, does she need the vaccine?

Yes! For maximum protection, your daughter should be vaccinated before becoming sexually active.

Should I vaccinate my son?

Males can be vaccinated on request. HPV vaccination can help reduce the risk of anal cancer, genital warts and pre-cancerous lesions.