**HPV-HIV Key Points**

1. The Centers for Disease Control and Prevention estimates that 80 percent of all people who are sexually active will be infected with human papillomavirus (HPV) at least once in their lifetime. HPV can lead to cervical, vaginal, vulvar, penile, and anal cancers, and cancer of the back of the throat. Certain types of HPV cause genital warts.

2. HPV Statistics: Currently 79 million people are infected with HPV in the U.S. About 14 million people are newly infected with HPV each year. Each year about 24,391 women and 18,280 men are affected by cancers caused by HPV.

3. Advisory Committee on Immunization Practices (ACIP) recommends routine HPV vaccination for females and males aged 11 to 12 years, but HPV vaccine may be given as young as 9 years of age. Catch-up vaccination is recommended for males through age 21 and for females through age 26, if they did not complete the 3-dose series. HPV vaccine is not recommended for pregnant women or girls. Women and girls who are breastfeeding may get the vaccine.

4. HPV vaccine is recommended for gay and bisexual men (or any man who has sex with men) through age 26. Men and women with weak immune systems and those who are HIV-positive should get HPV vaccine through age 26, if they were not fully vaccinated when they were younger.

5. HPV vaccine is given in two shots at 0 and 6-12 months for adolescents initiating vaccination at age 9 through 14 years. HPV vaccine produces a more robust immune response in preteens than in older teens or adults. If vaccination is initiated at age 15 through 26 years, the 3-dose series must be given at 0, 1-2, and 6 months. A 3-dose schedule should be given to those who are immunocompromised or HIV-positive.

6. The available HPV vaccines provide strong protection against new HPV infections, but they are not effective at treating established HPV infections or disease caused by HPV. With all vaccines, we vaccinate BEFORE exposure occurs. HPV vaccination has not been associated with initiation of sexual activity or an increase in sexual risk behaviors.

7. There is no way to know which people who have HPV will develop cancer or other health problems. People with weak immune systems and people who are HPV-positive may be less able to fight off HPV, and are more likely to develop health problems from it. Individuals with HIV are at least 25 times more likely to be diagnosed with anal cancer.

8. Having an STI, like HPV, can increase a person’s chances of getting HIV, and vice versa. Having HIV can make a person more likely to develop health problems from infection with HPV.

9. When compared with HIV-negative women, women with HIV are more likely to have persistent HPV infection and develop cervical cancer (5 times more likely) or develop another cancer.

10. Among HIV-positive women who test positive for one type of HPV, getting the HPV vaccine may prevent infection with other types, especially high-risk types that cause cancer.

11. HIV Statistics: An estimated 1.2 million people are living with HIV in the U.S. Most people who get HIV are aged 25-45 (59 percent) and over age 45 (25 percent). Overall, an American has a 1 in 99 chance of being diagnosed with HIV at some point in his or her life. In WA, lifetime risk of HIV diagnosis is 1 in 185.

12. Settings that provide STI or STD services should either administer the HPV vaccine to eligible patients who have not started or completed the vaccine series or refer these persons to another facility equipped to provide the vaccine. Clinicians providing services to children, adolescents, and young adults should be knowledgeable about HPV and HPV vaccine (https://www.cdc.gov/hpv/hcp/index.html).

For people with disabilities, this document is available on request in other formats. To submit a request, please call 1-800-525-0127 (TDD/TTY call 711).