



Human Papillomavirus Vaccination

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Message from the Guest Editors

Infection with high-risk human papillomavirus (HPV) is involved in almost all cervical cancers and to some extent also in other anogenital as well as in some head-and-neck cancers. Vaccination against the high-risk types 16 and 18 has been available for 12 years and many countries have introduced organized HPV-vaccination programs. In later years, the nine-valent HPV-vaccine has been marketed. Randomized controlled trials have shown HPV-vaccination to be highly protective against precancerous lesions caused by vaccine-HPV types in HPV-naïve individuals. Several aspects of HPV-vaccination are important from a public health point of view, namely the effectiveness/impact on various outcomes or groups of individuals, and organization/adherence to HPV-vaccination programs. Some countries vaccinate girls only, while others have introduced gender-neutral vaccination. It is discussed whether vaccination of women already exposed to HPV is effective, and whether HPV-vaccination after conization should be recommended.





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