Message from AMWA

AMWA Position Statement: Cervical Cancer Prevention

Gayatri Devi, M.D., 1,2 Michele Glodowski, B.S., 2 and Elizabeth Shin, B.A. 2

HE AMERICAN MEDICAL WOMEN’S ASSOCIATION (AMWA) is a community of physicians, residents, and medical students who advocate for women’s rights to health and wellness centered on evidence-based data rather than political or religious beliefs. Thus, AMWA is most interested in establishing and advocating for health standards that allow girls and women to achieve their optimal potential in all arenas of life. This stalwart support of gender-based health is evident in AMWA’s position statement in a crucial area of women’s health and sexuality: cervical cancer prevention.

Globally, cervical cancer is second only to breast cancer as the leading cause of cancer in women, and it is the third most common cause of female cancer-related mortality worldwide currently. There are approximately 510,000 women newly diagnosed with cervical cancer and 288,000 fatalities from this disease.1 Even in areas where most women have access to routine screening, such as the United States, Canada, and Europe, an estimated 30,000 women die each year from this infirmity.2 Although direct causality of cervical cancer by human papillomavirus (HPV) has not been definitively proven, the association between prior infection with HPV and subsequent development of cervical cancer has been overwhelmingly supported, with nearly 70% of cervical cancer biopsies showing viral genetic information from viral strains HPV-16 and HPV-18 incorporated into cervical cancer cells.

The establishment of HPV infection as a probable cause of cervical precancers and cancers provides a means of prevention through vaccines that immunize against HPV infection.3 It has been estimated that a vaccine containing the seven most common types of HPV could prevent 87% of cervical cancers worldwide. In order to be effective, these vaccines should be administered to girls and young women prior to initial sexual contact, as the potential benefit diminishes with the number of sexual partners. According to the American Cancer Society, routine HPV vaccination is recommended for girls aged 11–12 years (range: 9–18 years).1 In Australia, for example, all girls aged 12–18 will be vaccinated at no cost at their local schools.4

AMWA strongly promotes appropriate and early use of the HPV vaccine to prevent cervical cancer. A common pre-conception and potential barrier against routine HPV vaccination use in adolescents is that it will promote sexual promiscuity. For example, in Texas, a bill was passed that blocked state officials from requiring all sixth-grade girls to receive the HPV vaccination.5 Considering the prevalence and severity of cervical cancer, however, AMWA believes that vaccination will prevent young girls and women from being unnecessarily exposed to a potentially lethal disease.

When girls and women have access to proper treatment and preventive measures, they are better able to live healthy, productive lives and better able to care for themselves and their families. Therefore, AMWA advocates easy access to inexpensive HPV vaccines in the United States for girls and women at risk. National adoption of a middle-school vaccination program, as done in Australia, without any moralistic judgments, will help keep our young girls and women safer from cervical cancer

References


Address reprint requests to:
Gayatri Davi, M.D.
New York Memory Services
65 East 76th Street
New York, NY 10021
E-mail: gd@nymemory.org

1Departments of Neurology and Psychiatry, New York University School of Medicine, New York, New York.
2The New York Memory and Healthy Aging Services, New York, New York.