**Vaccine for Human Papillomavirus Prevents Genital Warts, Cervical Ca**

**BY HEIDI SPLETE**

Washington — A human papillomavirus vaccine developed by Merck & Co. is 100% effective in preventing genital warts in women in addition to preventing cervical cancer, according to John T. Schiller reported at the annual meeting of the Interscience Conference on Antimicrobial Agents and Chemotherapy.

The vaccine, known as Gardasil, includes HPV types 6, 11, 16, and 18. Types 16 and 18 account for about 70% of cervical cancer, and types 6 and 11 account for about 90% of genital warts, said Dr. Schiller, head of the neoplastic disease section of the National Cancer Institute, Bethesda, Md.

At 2 years of follow-up, Gardasil achieved 100% efficacy against genital warts, vulvar neoplasia, and vaginal neoplasia, in addition to the previously reported 100% efficacy against cervical intraepithelial neoplasia (CIN). The phase II/III trial included 2,717 women randomized to a vaccine group and 2,725 randomized to a placebo group. Overall, there were no cases of genital warts in the vaccine group, compared with 40 cases in the placebo group.

Dr. Schiller also shared the latest findings from the FUTURE II study, a randomized, double-blind, phase III clinical trial that included about 12,000 women aged 18-25 years. The intent-to-treat numbers in the FUTURE II study showed extremely strong protection at 2 years of follow-up—only two cases of CIN grade 2 or 3—and the vaccine was generally well tolerated. One case of CIN was associated with HPV type 16, and the other was associated with a combination of types 16 and 18.

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**WASHINGTON —** Herpes simplex virus type 2 infection in women may be associated with an increased risk of pelvic inflammatory disease, Dr. Thomas L. Cherpes reported in a poster at the annual Interscience Conference on Antimicrobial Agents and Chemotherapy.

The role of chronic genital viral infections in the pathogenesis of pelvic inflammatory disease (PID) may be more significant than currently recognized, although no etiological link has as yet been defined, noted Dr. Cherpes and his associates at the University of Pittsburgh.

A total of 725 nonpregnant women aged 15-49 years who were either diagnosed with a lower bacterial genital tract infection (purulent cervical discharge, untreated Nesseria gonorrhoeae or Chlamydia trachomatis infection, symptomatic bacterial vaginosis) or were at risk for such an infection (sexual contact with a male diagnosed with gonorrhea, chlamydial, or nongonococcal urethritis) were recruited from sexually transmitted disease clinics and gynecology clinics. Of those, 43% (309) were HSV-2 seropositive, and 9% (77) had genital herpes.

Women with and without acute herpes simplex virus type 2 (HSV-2) were compared with women with acute endometritis, 55% (47) were HSV-2 seropositive, and 9% (77) had genital herpes. Of the 86 women with acute endometritis, 55% (47) were HSV-2 seropositive, and 9% (77) had genital herpes.

Clinicians’ HPV Facts Outdated

**BY MIRIAM E. TUCKER**

Washington — When it comes to human papillomavirus, U.S. clinicians who see the most patients might not be in the know when it comes to new findings in the field.

A majority (89%) knew that “genital HPV [human papillomavirus] infection is fairly common in sexually active adults,” that infected individuals often lack signs or symptoms (95%), that an HPV infection increases the risk for cervical dysplasia and cancer (98%), and that treatment of external anogenital warts and cervical dysplasia/cancer does not always eliminate the infection (92% warts, 91% dysplasia/cancer).

But only 35% were aware of recent scientific evidence showing that most HPV infections clear without medical intervention, that anogenital warts do not increase the risk of cancer at the same site where the warts are located (38%), and that the HPV types associated with warts are not the same as the types associated with cervical dysplasia (47%).

Of all the specialists, ob/gyns. had the best overall knowledge of HPV. In the group as a whole, clinicians who use HPV testing gave more correct responses than did those who don’t use the tests, Dr. Jain said at the conference, sponsored by the American Society for Microbiology.

“However, even the highest percentages were sometimes very low,” said Dr. Jain, a medical officer at the Centers for Disease Control and Prevention, Atlanta.