ADVICE

HPV detected: what a positive result means and what to do next

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Does a positive HPV test mean cancer? How types 16, 18 and others differ, when you need a colposcopy , whether HPV is treated and whether to test your partner.

positive test for human papillomavirus is frightening, because the words “cervical cancer” are so often writ ten next to HPV. In fact HPV is the most common sexually transmitted infection: most people meet it at le ast once in their lives, and most often the body clears it with no consequences at all. A positive result is not a diagnosis but a reason to keep a closer eye on the cervix.

What HPV is and how the types differ

More than 200 types of the virus are known, about forty of which affect the genitals. They fall into two gr oups:

- low-risk — chiefly 6 and 11: they cause genital warts, but not cancer
- high-risk — 16, 18, 31, 33, 45, 52, 58 and others: if the infection persists for years, they can cause prec ancerous changes of the cervix

es 16 and 18 account for about 70% of cervical cancers. But it usually takes 10–20 years to get from i nfection to cancer, and most infections never make that journey: about 9 in 10 clear on their own within two years. Only a persistent high-risk infection is dangerous.

What the test shows

he test is a PCR of a swab from the cervix. Some tests simply answer “detected” or “not detected” for th e high-risk group; others identify the exact types and the amount of virus. The result is read together wit h a Pap test — cytology, which shows whether the cervical cells themselves have changed.

ositive HPV: what happens next

What comes next depends on the virus type, the Pap result and your age. Broadly:

- HPV 16 or 18 — usually a colposcopy, even if the Pap test is normal
- another high-risk type with a normal Pap test — a repeat test in a year; most often the virus has go ne by then
- changes on the Pap test — a colposcopy and, if needed, a biopsy

In women under 25–30, HPV is found very often and almost always clears on its own. Screening at that age therefore usually starts with a Pap test rather than a test for the virus.

Colposcopy is an examination of the cervix under magnification; it is painless and takes about 15 minu tes. If high-grade precancerous changes (CIN 2–3) are found, they are removed — for example by co ne biopsy — and this prevents cancer.

Is HPV treated

here are no medicines that kill the virus, and antivirals or “immunomodulators” do not do so either. It is the c onsequences that are treated: warts are removed, and so are precancerous changes of the cervix. The body clears the virus itself with its own immunity. Stopping smoking can help: in smokers the infection more often persists.

artners, pregnancy and vaccination

Should your partner be tested

here is no routine HPV test for men, and without warts none is needed. Partners usually already share the virus, so nobody needs treating “just in case”. Finding HPV does not mean infidelity: the virus can stay unnoticed for years, and there is no way to tell when the infection happened. Condoms lower th e risk but do not protect completely.

HPV and pregnancy

V does not stop you getting pregnant and usually does not affect the pregnancy. It is best to have the cerv x checked while preparing for pregnancy, and a colposcopy can be done in pregnancy too if needed.

cination

he vaccine protects against the main high-risk types and against warts. It works best before sexual activ ity begins, but it can help adult women too — even after one type has been found, it protects against th e others. Your gynaecologist can advise whether it is worth it for you.

ow often to be checked

The WHO advises women from 30 to have an HPV screening test every 5–10 years, or every 3 years whe re screening relies on Pap tests alone. Your gynaecologist will set the interval for you, taking earlier resul ts into account.

he test can be done at the clinic — HPV test: prices and preparation. A gynaecologist will explain the result s, and you can book online.

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his article is for information and does not replace a consultation with a doctor. Testing and treatment are decided by a gynaecologist.