

# Diagnosis and Treatment of Oropharyngeal Human Papilloma Virus (HPV) Infection

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## Description

HPV is a virus spread through sexual contact. HPV has about 150 different subtypes that can infect the vaginal area and throat (oropharyngeal HPV). HPV DNA is found in almost two-thirds of oropharyngeal malignancies. HPV-16 is the most common subtype of oral HPV. HPV-16 is classified as a high-risk strain. Oropharyngeal carcinoma is quite uncommon. HPV-16 affects about 1% of the population. Each year, fewer than 15,000 patients are diagnosed with HPV-positive oropharyngeal cancer. Oropharyngeal HPV is most likely transmitted through sexual contact, according to evidence. Although numerous sexual practises appear to be associated with HPV prevalence, an increase in oral sex is suspected as the source of the increase in the incidence of oropharyngeal HPV infection. HPV infection in the tonsils can lead to oropharyngeal cancer. Oropharyngeal cancer incidence has increased in lockstep with the prevalence of tonsillar HPV infection. However, because the subtypes of HPV with which they are infected are not connected to cancer development, the vast majority of people with tonsillar HPV infections do not develop cancer. Although millions of Americans carry tonsillar HPV, only about 15,000 people per year get HPV-positive oropharyngeal cancer. Some oropharyngeal malignancies are linked to cigarette and alcohol usage rather than HPV infection. People with HPV-positive oropharyngeal malignancies are younger and more likely to smoke or drink alcohol.

## Symptoms and Risk Factors

Long-term sore throats, earaches, hoarseness, swollen lymph nodes, swallowing pain, and unexplained weight loss are all symptoms of oropharyngeal cancer. Some people have no signs and symptoms. If there are any concerns about your symptoms, consult your doctor straight away. HPV is assumed to be transmitted primarily through oral intercourse, having more than one sexual partner, smoking, alcohol consumption, and deep kissing. During sexual activity the virus spreads from one person to another. Men are more likely than women to get an oral HPV diagnosis. Oropharyngeal carcinoma is linked to advanced age. Because it takes years to develop, it is more common among older people. Certain forms of HPV have been linked to throat and laryngeal cancer. Oropharyngeal cancer is the term for this. Almost all oral malignancies have been linked to HPV-16.

## Diagnosis

No test exists to detect early indications of HPV infection in the throat. Some malignant or precancerous oropharyngeal HPV lesions can be spotted during a dentist or doctor's screening or examination, but the majority are discovered through testing in those who have already developed signs and symptoms.

Doctors may use small mirrors to evaluate hard-to-see parts of the throat, larynx (voice box), and base of the tongue. Flexible laryngoscopes and pharyngoscopes can penetrate farther down the throat to allow the doctor to see features that are difficult to see with mirrors. A biopsy of regions that appear to be cancerous may be recommended by the doctor. A biopsy is a small sample of cells extracted with forceps or a thin hollow needle. The cells are then examined under a microscope for cancer symptoms. HPV DNA can be detected in biopsy samples taken from throat malignancies. The presence of HPV DNA indicates a malignancy that is more treatment-responsive.

## Prevention and Treatment

Prevent STIs by practising safe sex such as using condoms at all times. Limit the number of sexual partners you have. Discuss sex with your sexual partners, and inquire about the most recent time they were tested for STIs. If you have sexual activity, you should get tested for STIs on a regular basis. If you're with someone you don't know, avoid oral sex. To avoid oral STIs, wear dental dams or condoms when having oral intercourse. Ask your dentist to explore your mouth for anything strange during your six-month exams, especially if you have oral sex frequently vaccinate yourself against HPV. The majority of oral HPV types disappear before they create any health problems. If you get oral warts from HPV, your doctor will probably remove them. Because warts can be difficult to reach, treating them with topical therapies can be tough. Surgical removal, cryotherapy (freezing the wart), and interferon alfa-2B (Intron A, Roferon-A) injections are all options for treating warts. Oral HPV screening is not recommended by most medical and dental organisations. Some of the simplest strategies to help prevent HPV are lifestyle changes.

## HPV Vaccine

The HPV vaccine was created to prevent cervical and other reproductive system malignancies. Because the vaccine protects against the forms of HPV that can cause oropharyngeal malignancies, it may also help prevent them. The CDC recommends HPV immunisation for children aged 11 to 12. If you haven't already been vaccinated, the CDC recommends getting vaccinated against HPV. Vaccination is not advised for anyone under the age of 26. Some adults aged 27 to 45 who have not yet received the HPV vaccine may opt to do so after discussing with their doctor for the risk of new HPV infections and the potential advantages of vaccination. The HPV vaccine is less effective in this age group because more people have already been exposed to HPV. Vaccination against HPV prevents new infections, but it does not treat existing infections or illnesses. This is why the HPV vaccine is most effective when administered prior to any HPV exposure.