Several health behaviors found associated with prevalent oral HPV infections

Oral human papillomavirus (HPV) is significantly related to an increasing incidence of certain head and neck cancers. Studies have shown that oral sex is associated with oral HPV.

The percentage of oropharyngeal tumors associated with HPV has increased from 16% in 1984-1989 to 71% in 2000-2004 in the United States. This dramatic increase of HPV-related oral cancers necessitates further investigation of risk factors related to oral HIV acquisition and persistence.

The few research investigations that have examined oral HPV in healthy young women report relatively low prevalence (0.2%-4.6%).

This investigation sought to identify specific patterns of oral sexual activity, including self-inoculation, that are associated with oral HPV infections among young women.

Methodology

One-thousand and ten women from a large university in the southeastern U. S. completed a questionnaire and provided oral specimens that were tested for any oral HPV. 27 women provided additional samples up to 12 months after enrollment.

The questionnaire assessed demographic traits, sexual behaviors including oral sex behaviors that could increase risk of self-inoculation (e.g., has a hand—yours or someone else’s—ever touched your genitals then the hand or fingers put into your mouth?), and alcohol beverage use.

Outcomes of the Study

19 women had prevalent oral HPV (1.9%), with 10 having a type-specific infection. 

Major findings include:

- Oral HPV was associated with greater use of alcohol, cigarettes, marijuana, and sharing of smoking devices, lipstick, or personal toothbrushes.
- Recent antibiotic use, personal or family-history of HPV-related disease, sores located in the mouth, or having braces were not significantly associated with oral HPV.

Implications for Prevention

This investigation of college women found that, overall, oral HPV risk increased according to the numbers of major behavioral risk factors, such as sexual partners, alcohol use, and smoking. These behaviors collectively suggest several possible methods of direct transfer of HPV from one person to another or from one anatomic site to another.

However, HPV was relatively uncommon in this college population and the overall risk of infection was low.

SOURCE:
**HIV knowledge may not be sufficient to decrease HIV risk**

This study examined the role of alcohol use in sexual risk taking among women in Botswana. 239 women were recruited via stratified proportional random sampling and were interviewed. Seventy percent (n=168) had high levels of HIV/AIDS knowledge. No significant protective effect of good HIV/AIDS knowledge over high-risk sexual behavior was established. Alcohol use before sex was associated with high-risk sexual behavior. However, probit analysis revealed an insignificant association between alcohol and risky sex, highlighting the potential presence of other unobserved individual factors that are associated with alcohol use and risk sex. Knowledge may not be sufficient to decrease risky sexual behavior. The relationship of alcohol use and risky sex may also be a marker of a third omitted variable, such as overall risk-taking propensity.

**SOURCE:** Zetola, N. M., et al. (2014). Examining the relationship between alcohol use and high-risk sex practices in a population of women with high HIV incidence despite high levels of HIV-related knowledge. *Sexually Transmitted Infections,* 90, 216-222.

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**Massage parlor sex workers and clients report condom use**

Little research has been reported on the joint experiences of indoor sex workers and their clients relating to sexual health. Indoor sex work is the exchange of sex for money in settings that do not occur in a street-based setting.

Data sets from 188 massage parlor-based sex workers and 166 clients in Vancouver were analyzed. Sex workers and their clients reported high rates of condom use for vaginal/anal intercourse. Both groups reported lower rates of condom use for oral sex although clients did so to a greater extent.

Condom use with noncommercial sex partners was reported to be less consistent for both groups. Testing for sexually transmitted infections was higher among sex workers than clients. Clients and sex workers who had ever been tested for STIs reported similar rates of STI in past 6 months. No participants reported testing positive for HIV.

Education and adequate health-care components, such as greater STI testing, are needed that target clients of massage parlor-based sex workers.


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**Female patients with genital warts have a psychological burden**

Singaporean patients with genital warts were assessed for quality of life (QoL). Compared to the general population, male patients had similar or better functioning and well-being. Female patients had lower levels of productivity, mental health and general health. Among male patients, those afflicted with their first episode of genital warts and currently with a partner had better QoL. For females, tertiary education, older age and being a nonsmoker were associated with better QoL.


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**Syphilis rates increased**

In 2013, the rate of primary and secondary syphilis in the United States was 5.3 cases per 100,000 population, more than double the lowest-ever rate of 2.1 in 2000. The largest increase of P&S syphilis was among men who have sex men.