HPV Vaccines have not been Demonstrated to be Safe or Effective in the Prevention of Cervical Cancer

Abstract

HPV-16/-18 infections have been described as the main and determining cause of most cervical cancer. However, in 2006/7 when HPV vaccination programs were implemented the scientific community knew that most women do not develop cervical cancer or warts after any type of HPV infection. HPV infections are found in high frequency among women with normal cervices and disease is a rare outcome from these infections. This demonstrates that HPV infection of any sub-type (including HPV-16 and -18) is not predictive of cancer; particularly as ninety percent of HPV infections have no clinical consequences at all. It has been known for decades that environmental and lifestyle co-factors are necessary for HPV infections to progress to carcinoma. This is why 83% of cervical cancer occurs in the *developing* countries. This paper demonstrates that HPV-16/-18 infections are not the determining cause of cervical cancer because the global distribution of these sub-types does not correlate with the global risk from cervical cancer. If HPV-16 /-18 infections are not predictive of cancer then it follows that HPV vaccination programs will not be effective in addressing the global burden of cervical cancer. This paper also provides evidence of the deaths and serious adverse events that are associated with HPV vaccination programs. It concludes that HPV vaccines have not been demonstrated to be safe or effective in the prevention of cervical cancer. In addition, they are not cost-effective. This is because they have not been demonstrated to be safer or more effective than Pap screening and surgery and these interventions will still be required by vaccinated women. A management strategy to address the global burden of cervical cancer will only be successful if it addresses *all* the necessary factors for cervical cancer pathogenesis; this includes the environmental and lifestyle co-factors that are necessary to progress HPV infections and high-grade pre-cursor lesions to cervical cancer.