

## LETTER TO THE EDITOR HPV VACCINATION IN THE MIDDLE EAST

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The Human Papillomavirus (HPV) is the most common sexually transmitted infection (STI) in the world. The World Health Organization (WHO) has estimated a global prevalence between 9 and 13% and has projected that over 90% of cervical cancers contain some trace of HPV-related DNA<sup>1</sup>. Therefore, an increased focus on HPV related research in the Middle East is necessary, justified, and should be included more often in contemporary medical literature.

Though there is a protuberant belief that STI incidence and prevalence is low in conservative societies, traditional practices may not condone uncensored discussions of sexual health. Cultural stigmas may thus manifest themselves through underreporting of cases. However, due to the trend in many of these societies towards globalization, a variety of different dogmas and cultural observances may exist within any locale. This may in essence help control for a potentially causative agent in underreporting of STIs. It is also generally accepted that high-risk sexual behaviours increase in direct proportion to the concentration of youth in a community. This highlights the need for open sexual health discussions and preventative public interventions for the control of STIs in the Middle East, which has an increasingly youthful population.

In areas burdened by poverty or financial constraints, it may be more feasible to push HPV vaccination rather than invest primarily in cervical cancer screening and treatment, given the success of the vaccine in preventing cervical cancer worldwide. Additionally, increasing vaccination rates for men should also be a priority, as men also may develop HPV-related cancers yet do not benefit from preventative screening measures as women do. Men also become infected with STIs nearly as often as women do and thus play an essential role in the transmission of STIs and the subsequent

development of deleterious health conditions, like cancer<sup>2</sup>.

Given the cultural sensitivity of discussing sexual health, patients may feel uncomfortable bringing this topic up themselves with their providers and may thus inherit improper notions about HPV vaccination and sexual health<sup>3</sup>. The physician must take responsibility for educating their patients directly, establishing a precedent for forthright discussions of health, while also making disease reporting a priority. In Middle Eastern regions, there are very limited data on other commonly transmitted STIs, including syphilis and gonorrhea. Medical literature should call for more research submissions regarding the status of STIs in the Middle East.

### REFERENCES

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