

Second HPV-related primary cancers common in survivors

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years at risk (PYR) for women and 53.5 per 10,000 PYR for men. Regardless of gender, those who had index oropharyngeal cancers had the highest HPV-SPC risk. The lowest HPV-SPC risk and EAR was seen among women who had index cervical cancers and men who had index anal cancers. Over the last four decades, after index cervical, vaginal, and vulvar cancers, the risk of developing most types of HPV-SPCs increased.

"These findings have the potential to inform surveillance recommendations for survivors of HPV-associated cancers," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract/Full Text](#)

(HealthDay)—The risk of human papillomavirus-associated second primary cancers (HPV-SPCs) among survivors of HPV-associated cancers is significant, according to a study published online Sept. 7 in *JAMA Network Open*.

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Ryan Suk, from the University of Texas Health Science Center in Houston, and colleagues used data from nine [cancer](#) registries of the Surveillance, Epidemiology, and End Results database to identify 113,272 patients (73,085 female and 40,187 male) patients with HPV-associated cancers (cervical, vaginal, vulvar, oropharyngeal, anal, and penile) diagnosed from 1973 through 2014. The authors sought to assess the risk of HPV-SPCs among survivors of HPV-associated index cancers.

The researchers found that 1,397 [women](#) and 1,098 men developed HPV-SPCs. The standard incidence ratios (SIRs) for HPV-SPCs were 6.2 among women and 15.8 among men. The excess absolute risks (EARs) were 18.2 per 10,000 person-

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