

YOUR SPIT COULD SAVE YOUR LIFE



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BY DR. SUSAN MAPLES

Most of us have heard of Human Papilloma Virus (HPV). It's family (of 200+ strains) is responsible for all the warts on our fingers and feet, and cervical cancer in women. But...do you know about the new HPV-caused epidemic—the massively unfolding death march of oral pharyngeal cancer (OPC), that has already outgrown cervical cancer? This infection/cancer affects men far more than women. The American Society of Clinical Oncologists warns that by 2020 the US will have more middle age, non-smoking men with HPV-OPC than all women with HPV cervical cancer.

HPV oral infection is increasing 30% a year, but as a Total Health Dental Practice this was one particular oral disease my team was not good at discussing. We responsibly completed our 9-point “oral cancer screening examination”, knowing it was completely ineffective in screening for early detection of HPV-

OPC. Why? This cancer is out of sight, hiding behind the curtains of the tonsil folds, in the throat or base of the tongue.

It was uncomfortable talking about a viral infection that is, let's face it, our #1 most rampant STD—transmitted primarily through oral sex. While we fumbled with what words to say and the warnings to issue, we watched the HPV-OPC epidemic proliferate before our eyes.

De-escalating this trend will take time we don't have, if we don't want to lose a multitude of middle aged men and women. We need a successful vaccination strategy, whereby an entire generation of youngsters receive HPV vaccination. Herein lies the problem. In 2017, HPV vaccination rates rose to 46% in girls, but only 26% of boys. One of the major reasons for this is the lack of primary provider recommendation. Our role as dental professionals includes advocating for children, especially since 50% of all new HPV infection occurs between 15-24 years old and the average age of first exposure to oral sex is 10-13 years old.

Out of the 51 identified HPV strains that can live in the mouth, 25 types have been associated with OPC. Historically, the Gardasil vaccine covered only four of the most threatening HPV types, but the latest (2017), Gardasil 9 helps protect from nine of the most dangerous strains.

Our team took on a worthy challenge in 2017—an HPV Awareness Campaign. Our goal was to bring awareness to 100% of our adult patients, with hopes they would pass it on to their children and grandchildren.

Our message resounded simple meters of repeatable advice:

- Spread the word...oral sex is not safe sex!
- If you haven't been vaccinated, don't wait!
- Consider a saliva test for HPV. It's easy, safe and affordable!

Oral HPV is detectable in a single drop of saliva, and about 25% of those we tested were positive for at least one HPV strain. HPV infection doesn't mean cancer. It's the *persistent* infection that poses a risk, so positive HPV tests should be repeated in 12-18 months. Unlike some viruses (like Herpes and HIV), human beings are able to “clear” an HPV infection, provided they work toward optimal “host immune response” or peak overall health—including reducing high-risk sexual exposure.

I can envision a time when the media HPV campaigns will highlight oral and pharyngeal cancer. I can also picture salivary testing becoming the standard of care in all dental offices—and perhaps even the administration of HPV vaccination series.

Meanwhile the clock is ticking! I urge you to talk to your loved ones about the cause. Push for vaccination. And, encourage them to get a test. It's as easy as spitting in a cup. This is just one more way saliva saves lives! ■



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