

Will the Politics of Teen Sex Stop a Cancer Vaccine?

Media Brief

There's a Vaccine that Could Prevent Cervical Cancer?

After a decade of development, two drug companies—Merck and GlaxoSmithKline—are close to marketing the first ever cancer vaccines that show 100 percent efficacy in combating the most dangerous strains of the human papilloma virus (HPV), the cause of almost all cervical cancers,¹ the second most common type of cancer among women worldwide, and the leading cause of cancer death among women in the developing world.²

Since genital HPV is a sexually transmitted disease (STD), to be effective, the vaccine must be administered to young women in their early teen years—*before* they initiate sex. Research and clinical trials continue to find the vaccine safe.

The policy question? With 10,000 American women contracting cervical cancer each year and 4,000 deaths from the disease annually, will *all* women, including young women, have access to a vaccine that could save their lives? The initial reaction of some religious conservatives to the HPV vaccine is disturbing because it appears to place the promotion of abstinence-only programs above the prevention of a killer disease. Yet, research and basic common sense state this is not an “either/or” issue. It’s possible to promote abstinence, educate young people about contraception, and prevent cervical cancer without these objectives getting in the way of each other. It’s not just the smart thing to do—it’s the right thing to do.

Who Would Possibly Object?

Again, some religious conservatives object—religious conservatives who, in tandem with the Bush administration, have spent over \$1.1 billion in federal and state taxpayers’ dollars on programs that promote abstinence until marriage as the *only* acceptable behavior for Americans and the *only* way to prevent pregnancy, HIV, and other sexually transmitted diseases.

Groups that promote an abstinence-only-until-marriage approach to sex education intensely market the threat of HPV as a reason for promoting abstinence only. They claim a vaccine will promote promiscuity by lessening people’s fears regarding HPV and cervical cancer.

“Our concern is that this vaccine will be marketed to a segment of the population that should be getting a message about abstinence,” said Tony Perkins of the Family Research Council. He would not inoculate his own daughter, because she would be more inclined to have sex outside marriage. “It sends the wrong message.” *Tony Perkins, President of the Family Research Council*³

“I personally object to vaccinating children against a disease that is 100 percent preventable with proper sexual behavior.” *Leslie Unruh, Executive Director of the National Abstinence Clearinghouse*⁴

NOTE: About 67 percent of young people are sexually active by age 18⁵; roughly 90 percent of Americans are not virgins on their wedding nights⁶; and experts estimate that up to 70 percent of all sexually active adults worldwide have been exposed to HPV.⁷

Who Will Make the Decision?

The Advisory Committee on Immunization Practices (ACIP) will make the decision. Attached to the Centers for Disease Control & Prevention (CDC), ACIP sets the nation's list of recommended immunizations—setting the standard for doctors and insurers and for public funding of vaccinations. ACIP's ruling is not binding; but most states look to its recommendations to mandate which vaccines children must get before entering school.³

Will Ideology or Science Dictate the Decision?

Consider that the Bush administration has already appointed one ACIP member (Reginald Finger) from the ranks of the religious right. Until September 2005, Mr. Finger was the medical issues analyst at Focus on the Family,³ an ultra-conservative religious organization founded by James Dobson.

The precedents set by this administration for medical decisions are also troubling. The FDA, in a highly criticized move, chose to placate religious conservatives by refusing non-prescription status for emergency contraception (EC), despite the fact that the FDA's own scientific advisory committee voted overwhelmingly to make EC available without a doctor's prescription.

This political decision prompted an editorial in the *New England Journal of Medicine* which stated:

“The recent actions of the FDA leadership have made a mockery of the process of evaluating scientific evidence, disillusioned many of the participating scientists both inside and outside the agency, squandered the public trust, and tarnished the agency's image. American women and the dedicated professionals at the FDA deserve better.”⁸

The Myth that Prevention Causes Adolescent Promiscuity

Supporters of abstinence-only-until-marriage programs have long claimed that sex education which includes information about condoms and birth control encourages teens to have sex—a claim rebutted by scientific research:

“Current research indicates that encouraging abstinence and urging better use of contraception are compatible goals. Evidence shows that sexuality education that discusses contraception does not increase sexual activity, and programs that emphasize abstinence as the safest and best approach, while also teaching about contraceptives for sexually active youth, do not decrease contraceptive use.” (*American Academy of Pediatrics*)⁹

This myth was again promulgated by the FDA, which claimed that making EC available without prescription would fuel risky teen behavior, a claim that was also explicitly rejected by leading medical authorities:

“An increase in awareness and availability of emergency contraception to teens does not change reported rates of sexual activity or increase the frequency of unprotected intercourse among adolescents.” (*American Academy of Pediatrics*)¹⁰

“Data demonstrating that ready access to Plan B by adolescents as young as 15 did not lead to increased irresponsible sexual behavior were available in December 2003 and had been reviewed by the advisory committee. Moreover, the agency was conspicuously unable, then or later, to cite any data to support different safety or efficacy profiles in different age groups—a damning indictment of the basis for the disapproval.” (*New England Journal of Medicine*)⁸

Clearly, prevention does not cause risky sexual behavior. A vaccine to prevent cervical cancer will not cause promiscuity any more than an umbrella will cause rain or a seat belt will cause an accident.

Why Do Some Conservatives Seem to Need HPV?

In recent years, religious conservatives have become increasingly reliant on HPV as a tool to attack condoms. They have denigrated condom use as “Russian roulette,” relying on false claims that condoms fail to provide any protection for HPV.

Among their conservative allies in Congress, Senator Tom Coburn has in the past introduced legislation to require condom labeling, stressing the risk of HPV infection and warning that condoms offer “little or no protection” against the virus—a claim disputed by current research. Moreover, he has many conservative friends on the Hill who share his views on the efficacy, or lack thereof, of condoms:

“We need to yell it to the top of the rooftops that these condoms we’re sending down to you don’t protect you. . . . [You] have a false sense of security. So I think we’re sending the wrong message when we use taxpayer dollars to give condoms out to these kids and we don’t tell them, ‘By the way, you’ll probably be dead at age 24 by cervical cancer. But we’re giving you condoms, so go do your thing.’ To me, abstinence is the only way.” (Rep. Jo Ann Davis, R-VA)¹¹

What Will Happen?

The administration has shown significant deference to religious conservatives when it comes to issues involving sexual and reproductive health.

From stem-cell research to sex education, from a diminished emphasis on condoms to denying non-prescription status to EC, evidence-based prevention has taken a back seat to ideology and politics.

With respect to HPV and the cervical cancer vaccine, the religious conservative movement could persuade its base to avoid vaccination; it could work to prevent mass inoculation of young people by trying to block the vaccines’ acceptance by regulators; or it could attack the vaccines’ funding at federal and state levels.

Not all religious conservatives are on record opposing the HIV vaccine. Some, such as Dr. Gene Rudd of the Christian Medical Association, have hailed the vaccine as an important medical breakthrough. Yet, even Dr. Rudd argues that the vaccine should not be mandatory. Nonetheless, if Dr. Rudd and others like him can convince their constituents that this vaccine is a positive development, public health will be the beneficiary.

Does “Saving Souls” Trump Saving Lives?

Clearly, there must be public consensus that no woman in this country should be denied the opportunity to avoid cervical cancer. Vaccinating young people, before they are sexually active, affords the best opportunity to use this medical breakthrough to do just that.

Cancer is a public health challenge that needs to be conquered; it is not an appropriate venue for political or ideological debate.

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For more information, contact Bill Barker, Director of Communications, at 202.419.3420.

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- ¹¹ Representative Jo Ann Davis (R-VA), Subcommittee on Criminal Justice, Drug Policy and Human Resources of the House Government Reform Committee, *U.S. Representative Mark Souder (R-IN) Holds Hearing on Cervical Cancer and HPV*, March 11, 2004 [Committee Hearing].