## Spotlight

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## **HPV and Cervical Adenocarcinoma**

Dahlström *et al*. 10.1002/ijc.25408 (Resolve a DOI—http://dx.doi.org)

Cervical cancer is still one of the most common cancers affecting women worldwide. Although in many developed countries the incidence of squamous cell carcinoma of the cervix has been falling for some time, the incidence of cervical adenocarcinoma has been increasing in recent years, even in countries with widespread screening programs, and now makes up 10 to 20 % of all cervical cancer.

Evidence of human papilloma virus (HPV) infection is found in nearly all cervical cancers and is a well-established cause of cervical squamous cell carcinoma. Previous case-control studies, which determined HPV status at the time of diagnosis, suggested that HPV may also cause cervical adenocarcinoma but prospective evidence demonstrating that exposure predicts risk for future disease had been lacking. To clarify the temporal relationship between HPV infection and cervical adenocarcinoma, Dahlström *et al.* followed a population-based cohort of 994,120 women who participated at least once in a cytological screening in Sweden between 1969 and 2002.

They found that infection with HPV16 detected in cytologically normal smears up to at least 14 years before diagnosis increased risk for the subsequent development of invasive adenocarcinoma (AC) and its precursor adenocarcinoma *in situ* (AIS) by 16% and 11%, respectively. Similarly, an HPV18-positive smear was associated with increased risk for AC (28%) and AIS (26%). Double positivity in two subsequent smears conferred an infinite risk for both AC and AIS. These findings not only suggest that the association of HPV16/18 with cervical carcinoma is strong and causal but will also have direct implications for prevention and control.