

Awareness and Knowledge of Emirati Men Concerning HPV

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Abstract

Cervical Cancer (CC) is one of the most common tumours that affect men worldwide, killing hundreds or perhaps thousands of women each year, mainly in developing countries. The research focuses on the human papillomavirus (HPV), which has a role in the development of Cervical Cancer (CC). There appears to be no public education or immunisation efforts in the majority of Arab countries. Methodological rigour is used in research to find solutions to both theoretical and practical problems. The goal of this study is to analyse Emirati men's knowledge and awareness of HPV vaccination. According to the findings, Emirati guys have a poor grasp of HPV and its vaccine. Emirati males, according to the findings of this study, lack a basic awareness of HPV, necessitating the creation of national HPV education campaigns. We've discovered many key knowledge gaps in the area of HPV infection and vaccination that can be filled in the future. The Human Papillomavirus (HPV) is common in the United States, with the majority of sexually active people contracting the virus at some point in their lives. In both men and women who have had persistent oncogenic infections, chronic oropharyngeal cancer has been linked to genital and anogenital cancers, including oropharyngeal cancer.

Keywords: • Interpretivism • HPV • Vaccination • Immunization Emirati

Introduction

According to current estimates, HPV is responsible for 90% of anal and penile cancers, as well as 70% of vulvar and 60% of penile malignancies. By 2020, oropharyngeal carcinoma is anticipated to overtake cervical cancer in terms of incidence, making it one of the top ten most common cancers worldwide. Three HPV vaccines have been approved and certified by the US Food and Drug Administration for use as prophylactic measures. Males are the most undervaccinated category, according to current recommendations; however, a two-dose regimen is currently recommended; yet, vaccine coverage across all eligible groups is still low, with males comprising the most undervaccinated segment of the population. In 2014, 39.7% of females and 21.6% of males aged 13 to 17 received all doses within the series. Female vaccination rates have been reported to range from 60.5% to 91.5% in a variety of countries. Adoption and uptake of the vaccine are based on public awareness and comprehension of HPV, according to public health research. Only 68% of participants in a representative sample of UAE residents were aware of HPV and the HPV vaccine, according to a recent study [1].

Contrary to popular opinion, the majority of current HPV knowledge and perception study is limited to cervical cancer in men and women. According to studies looking at people's comprehension of noncervical HPV-related health repercussions, the majority of people are unaware of the link between HPV and noncervical malignancies. Most relevant to the target audience. Additional data is required to support system-level initiatives aimed at removing structural barriers to immunisation, screening, and treatment based on outcomes.

HPV vaccination is currently recommended for 11-12-year-olds as a prophylactic step, with the opportunity of catch-up immunizations until the age of 26. Until recently, this was the recommended upper age limit for HPV vaccination. Because of the vaccine's safety and effectiveness, the FDA approved HPV vaccination for those aged 27 to 45 in 2018. According to a June 2019 advisory committee, HPV vaccination can be provided to anyone aged 27 to 45. This recommendation is based on vaccine effectiveness and cost-efficiency, not merely on safety and effectiveness. The Nationwide Cancer Institute (NCI) sponsors the Health Information Nationwide Trends Survey (HINTS), which collects data on how the public consumes cancer-related information on a national level. In the past, this data source was used to poll an adult sample in the United States to measure their knowledge and awareness of HPV. HINTS have been used by researchers to look into disparities in HPV knowledge and information between racial and gender groupings, as well as between men and women and across the country. Males and non-Hispanic black or Hispanic persons were similarly likely to know about HPV and the HPV vaccination, according to earlier studies based on this dataset, however women were substantially more likely. In this study's sample, a 54-year-old lady was found to have little understanding of HPV. In two further studies, men were found to be less educated about HPV and the HPV vaccine, as well as the fact that HPV increases penile, oral, and anal cancers. Even though these studies included adults, they did not specifically target those between the ages of 27 and 45, nor did they include variables such as how often people accessed cancer-related health information or if they had insurance. Although additional HPV-related characteristics were not investigated in this study, males aged 27-45 were found to have lower HPV knowledge than females. A wide range of sociodemographic, healthcare, and cancer-related factors must be investigated to better understand how persons in this age range perceive and learn about HPV and HPV vaccines as a result of the new HPV vaccination guidelines [2].

From Morocco to Saudi Arabia, Middle Eastern civilizations and religious conservatism may be found all over the region. As a result, this shows that sexual behaviours in this civilisation are more limited than those in other civilizations. Because of this cultural background, it has been stated that the frequency of sexually transmitted illnesses in this area is lower than in the rest of the world. As a result of the rapid changes in lifestyle brought about by globalisation, sexual habits are becoming more permissive, particularly among younger generations. Even in this locale, these changes may have a considerable impact on sexually transmitted disease rates. Despite the lack of cancer registries, this region's cervical cancer rates are estimated to be lower than the rest of the world. Breast cancer was diagnosed as the most common disease in women in Algeria and Morocco, as well as the third most common cancer in Tunisia, Qatar, and the United Arab Emirates, despite erroneous incidence estimates. The introduction of a safe and effective anti-HPV vaccine in the Arab MENA region and around the world is a tremendous opportunity to eradicate cervical cancer and many other HPV-related illnesses in the region and around the world. The Food and Drug Administration approved HPV vaccination for primary prevention of the disease in June 2006. Cervarix, a bivalent HPV vaccine, and Gardasil, a quadrivalent HPV vaccine, are now available in the United States. Both immunizations have a high efficacy profile in terms of preventing HPV infection. Vaccination against HPV is growing increasingly common around the world, with more than 150 countries approving it. As a result, HPV vaccination programmes in Arab countries are extremely uncommon, with just one country having successfully adopted the vaccine through a national programme and few others aiming to do so in the near future. Budgetary constraints, a lack of infrastructure for delivering vaccinations to adolescents, and competition from other high-priority vaccines have all hampered anti-HPV immunisation in the region. A lack of political will, which is sometimes justified by cultural or religious concerns, is a key impediment to broad use of the anti-HPV vaccine. This could limit the reach and efficiency of such immunisation initiatives a wide range of activities in order to find answers to both theoretical and practical challenges, researchers employ methodological rigour. Depending on the study's purpose and setting, a variety of methodologies are possible, including the following: The goal of descriptive analysis is to collect evidence that proves the existence of phenomena. In product design, design engineering, and policy formulation, for example, applied analysis aims to answer practical questions while also assisting decision-making; in theoretical research, on the other hand, research is conducted to pique scientific curiosity rather than to immediately apply findings in real-world applications. A cross-sectional quantitative survey was conducted. We conducted quantitative analysis of the main data all around the UAE, and we were only able to approach guys in this study with great difficulty. A total of 389 survey respondents were polled, resulting in a sample size of 390 people. Questionnaire surveys were used to acquire information [3-6].

The general public's understanding of HPV varies greatly. When looking at sociodemographic characteristics, gender, age, education, marital status, wealth, and race were all shown to be connected with previous authors' estimations of general HPV knowledge. It's worth noting that there are still gaps in HPV understanding and awareness, especially given the persistent inequalities in vaccine uptake, overall undervaccination of susceptible groups among UAE males, and higher observed prevalence of various HPV-related cancers among men. All of the participants were aware of HPV's connection to cervical cancer, but they were unaware of the link between HPV and other cancers. To this moment, the link between noncervical malignancies and HPV has not been thoroughly investigated or reported in the study literature. The findings of the few studies that have been published have been found to be consistent.

Previous research has repeatedly found that women have a better degree of vaccination knowledge and understanding than men. The findings on vaccine knowledge and information, as well as gender, contradict this. Given the importance of vaccine effectiveness, the fact that the majority of respondents did not believe the vaccination prevented cervical cancer was surprising. Despite the fact that there were no significant differences in the %ages of men and women who reported talking to someone like a doctor about vaccination, women were considerably more likely than men to obtain a doctor's recommendation to vaccinate. According to earlier studies, female patients and parents of female children are more likely to receive vaccination recommendations. The current results could be explained by a mix of sexism and the fact that the vaccine has only been licenced for males since 2011. The findings of this study, which are given here, may be useful to health education researchers and practitioners. First and foremost, despite repeated attempts, there was a lack of understanding and awareness of many aspects of HPV. Many intervention studies have demonstrated that getting information has a positive impact on people's willingness and ability to become vaccinated. According to a more comprehensive review of the research, informational interventions alone may not be sufficient for long-term increases in vaccine uptake rates. More HPV education efforts are needed, according to our findings. The efficacy of educational initiatives, both on their own and in combination with other approaches, should be evaluated first [7].

People's overall awareness of HPV, knowledge of HPV-related malignancy, and knowledge of the HPV vaccine are all affected by a number of factors.

Conclusion

More has to be done to promote HPV vaccination uptake, particularly among the communities identified as having low HPV knowledge in this study. Increasing vaccination rates in the future may require a better understanding of HPV. To be certain, the association between sociodemographic factors, HPV knowledge, and vaccination uptake must be investigated further through research.

Studies that study knowledge of noncervical HPV-associated cancers should be prioritised, given the importance of personal relevance in vaccination decision-making. If health educators continue to analyse and report the effectiveness of their intervention strategies, they will be better able to influence uptake. Connections are important for vaccine acceptability and should be explored and implemented in public health. Because of their vital role in increasing cervical cancer awareness and screening among the general public, these existing and future doctors would prioritise cervical cancer education.

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