



HUMAN PAPILLOMAVIRUS (HPV) DATA BRIEF

Vaccine Preventable Disease Program

April 2026

HPV ASSOCIATED CANCERS

Human Papillomavirus, or HPV, is a common virus with more than 200 types. Some types can cause warts (papillomas), while others can lead to cancer.¹ All genders can be affected by HPV-related cancers, which include the mouth (oral cavity), throat (pharynx), and anus (including anal canal and anorectum). HPV can also cause penile, cervical, vaginal, and vulvar cancer. Fortunately, a vaccine is available that can prevent infection with the types of HPV that most commonly cause cancer.

The graphs below illustrate the distribution of HPV-associated cancer types by race and ethnicity among individuals, based on sex assigned at birth.

Key Findings

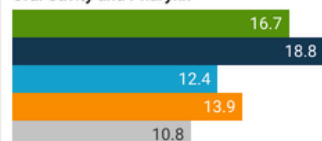
- The rate of HPV-associated oral cavity and pharynx cancers is *highest* among **White** (**18.8 per 100,000**) individuals assigned male at birth compared to all races (**16.7 per 100,000**).
- The rate of anus, anal canal, and anorectum cancer is *highest* among **Black** (**2.3 per 100,000**) individuals assigned male at birth.
- **White** individuals assigned female at birth have a *higher* incidence rate of oral cavity and pharynx, anus, anal canal, and anorectum, and vulva cancers compared to other races.
- The rate of cervical (cervix uteri) cancer was *highest* in **Hispanic** and **Black** individuals assigned female at birth.
- The rate of vaginal cancer is *highest* among **Black** individuals assigned female at birth.

Assigned Male at Birth

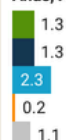
Incidence Rates for HPV-Associated Cancers in New Jersey: Assigned Male at Birth by Race and Ethnicity, 2019-2023

■ All races ■ White ■ Black ■ Asian or Pacific Islander ■ Hispanic*

Oral Cavity and Pharynx



Anus, Anal Canal and Anorectum



Penis



Age-Adjusted Rate per 100,000. Race and ethnicity categories are mutually exclusive (i.e., White non-Hispanic, Black non-Hispanic, and Asian Pacific Islander non-Hispanic, and Hispanic any race).

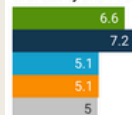
Created with Datawrapper

Assigned Female at Birth

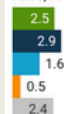
Incidence Rates for HPV-Associated Cancers in New Jersey: Assigned Female at Birth by Race and Ethnicity, 2019-2023

■ All races ■ White ■ Black ■ Asian or Pacific Islander ■ Hispanic*

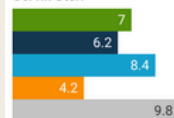
Oral Cavity and Pharynx



Anus, Anal Canal and Anorectum



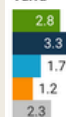
Cervix Uteri



Vagina



Vulva



Age-Adjusted Rate per 100,000. Race and ethnicity categories are mutually exclusive (i.e., White non-Hispanic, Black non-Hispanic, and Asian Pacific Islander non-Hispanic, and Hispanic any race).

Created with Datawrapper

*Persons of Hispanic ethnicity may be any race or combination of races.

HPV IMMUNIZATION COVERAGE

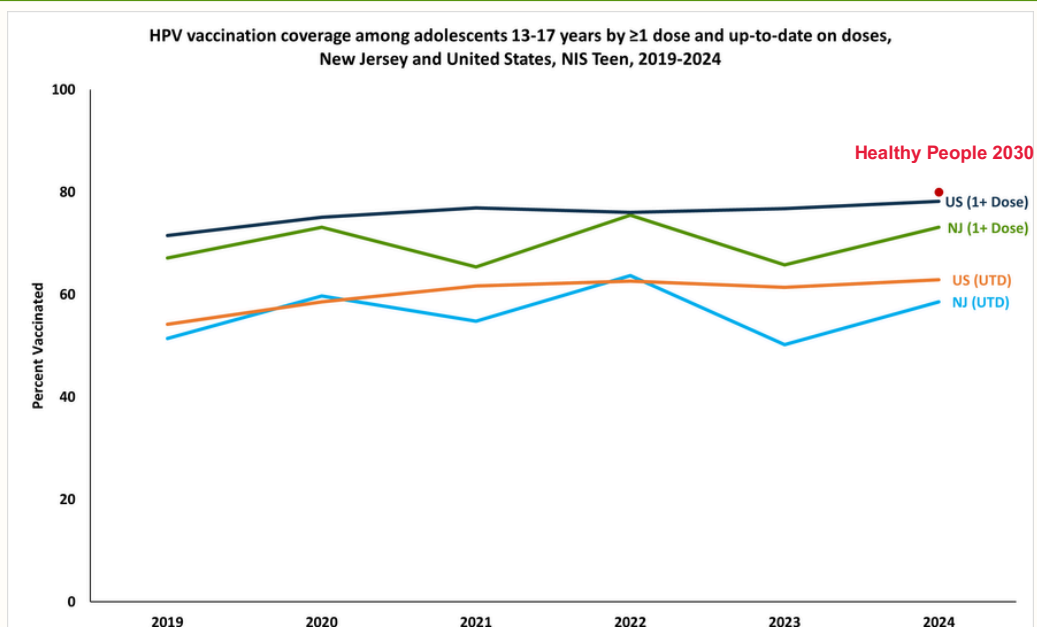
Over 90% of HPV-associated cancers are preventable through vaccination.¹ The HPV vaccine is recommended for preteens at ages 11 or 12, but can be given as early as age 9. Only two doses are needed if given before age 15; those older than 15 years or with a weakened immune system will require three doses. Catch-up vaccination is recommended through age 26. Vaccination may be administered to persons aged 27 to 45 through shared clinical decision-making (discussion of the benefits and risks of vaccination with your health care provider).

The graphs below are from the National Immunization Survey (NIS) Teen, and show trends in HPV vaccination among adolescents aged 13-17 who received at least one dose and those who are up-to-date (completed the recommended 2-3 doses) in New Jersey.

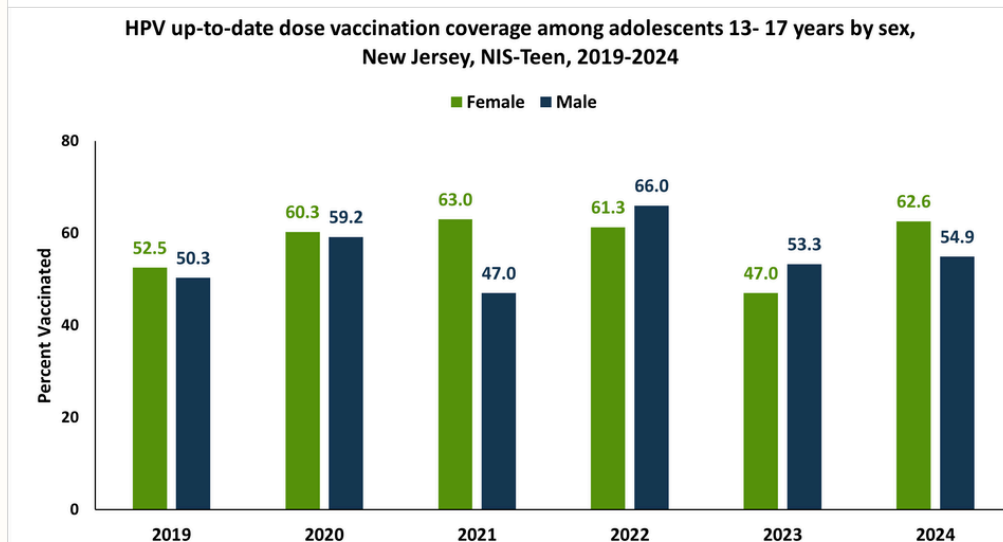
Key Findings

- HPV vaccination coverage (at least one dose and up-to-date) has steadily increased in the United States, while New Jersey rates have fluctuated over time. However, neither has reached the Healthy People 2030 target of 80% coverage among adolescents receiving the recommended doses.
- In New Jersey, HPV vaccination coverage for at least one dose has fluctuated over time but has remained around **70%**.
- Similarly, the up-to-date dose rate in New Jersey has also fluctuated over time, but has remained around **56%**.
- Over the years, there has been no consistent difference observed in up-to-date HPV vaccination coverage between females and males in New Jersey.

HPV ≥1 Dose vs. Up-to-Date (UTD)



HPV Up-to-Date Dose by Sex



REFERENCES

1. American Cancer Society. HPV. Available at: cancer.org/cancer/risk-prevention/hpv.html

DATA SOURCES

- NJ State Cancer Registry SEER* Stat Database: April 8, 2026, analytic file. Rates are per 100,000 and age-adjusted to the 2000 U.S. Std Population (age <1 and 90+ - Census P25-1130 standard).
- National Immunization Survey - Teen (NIS-Teen). Data accessed on April 08, 2026, via TeenVaxView portal at: cdc.gov/teenvaxview/index.html

RESOURCES

- NJDOH. HPV: nj.gov/health/cd/topics/hpv.shtml
- Immunize.org: immunize.org/vaccines/a-z/hpv
- American Cancer Society. HPV Vaccination Resources for Health Professionals: cancer.org/health-care-professionals/hpv-vaccination-information-for-health-professionals/hpv-vaccination-resources-for-health-professionals.html
- Protect Me With 3+: protectmewith3.com
- American Academy of Pediatrics. Human Papillomavirus Vaccines: aap.org/en/patient-care/immunizations/human-papillomavirus-vaccines
- *American Cancer Society. Prevent 6 Cancers with the HPV Vaccine: cancer.org/cancer/risk-prevention/hpv/hpv-vaccine.html

*The link to this website is intended to provide additional information pertaining to immunizations strictly for informational or educational purposes. The New Jersey Department of Health is not responsible for the content of this website and does not endorse private organizations.

To view the HPV Data Brief, visit:
nj.gov/health/cd/vpdp.shtml

