**Increase In Cervix Cancer Incidence Among Women Below 50 Years-Of-Age In Sweden. Does HPV vaccination play a role?**

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Specific comments:

*Figure 1. Increase in incidence of cervix cancer in younger women (<50 years-of-age) as compared with women ≥50 year-of-age. The number of cases/100 000 women from 2006 to 2015 is shown.*This figure, dramatic though it is, does not have sufficiently well labelled axis. The approximate rates of incidence per 100,000 population of women should be marked against the Y axis and the years indicating the points against the X axis.

The author has reported “Thus, vaccination of cases with HPV 16/18 oncogenes showed a worse outcome than did placebo although the FDA statisticians thought it was difficult to draw any firm conclusions.”

This could very well be due to the small number of cases that were available for analysis. It is extremely important to provide the raw numbers, the standardization process and the computations for the graphs to validate. This is not to say that the results are erroneous or that the analytical conclusions are unsound. But they need substantiation.

If the vaccination was for only those aged 45 or younger in Sweden, it is important to mention how long this has been in place. Are there persons in the transitional ages groups were some have got vaccination and some hav’nt? If so, it is important to look at results after eliminating these so as to have sharp results that are not fluctuating as in the case of age group 55-59 and 60 -64 in figure 2. Else, an explanation must be pro-offered for this wayward trend other than mere vagaries of small numbers.

Recommendation:  
  
The author needs to do the following:  
1. Provide the raw numbers used in the analysis to substantiate.

2. Offer an explanation for the fluctuations in age group 50-54 and 60-64 – using policy documents etc.