You are the Key to HPV Cancer Prevention

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Objectives

• Describe why HPV vaccination is important for cancer prevention.
• Identify appropriate vaccination recommendations.
• Develop self-efficacy in delivering effective HPV vaccination recommendations and how to work through parent hesitancy.
• Provide information on where to find HPV related resources for use in practice.
Mission: HPV Cancer Free

1. Strengthen Provider Recommendations
   Facilitate provider education and training opportunities.

2. Activate Partners and Stakeholders
   Engage critical stakeholders and partners to drive HPV vaccination rate improvement.

3. Know Your Data, and Track Your Progress
   Influence stakeholders to use relevant data to drive planning and track impact.

4. Implement Evidence-based Interventions and Systems Changes
   Lead and support targeted HPV vaccination health systems change efforts.

5. Increase Parental Knowledge
   Mobilize our ACS volunteer network and ACS CAN volunteers to activate champions to normalize the vaccine.

Campaign Video
UNDERSTANDING THE BURDEN
HPV Types Differ in their Disease Associations

~40 Types

Mucosal sites of infection
- High risk (oncogenic)
  - HPV 16, 18 most common

Cutaneous sites of infection
- Low risk (non-oncogenic)
  - HPV 6, 11 most common

~ 80 Types

Cervical Cancer
- Anogenital Cancers
- Oropharyngeal Cancer
- Cancer Precursors
- Low Grade Cervical Disease

Genital Warts
- Laryngeal Papillomas
- Low Grade Cervical Disease

“Common” Hand and Foot Warts
HPV Infection

- Most females and males will be infected with at least one type of mucosal HPV at some point in their lives.
  - Estimated 79 million Americans currently infected.
  - 14 million new infections/year in the US
  - HPV infection is most common in people in their teens and early 20s.
  - 5% of all cancers are HPV related

- Most people will never know that they have been infected.
### Cancers Caused by HPV per Year, U.S., 2009-2013

<table>
<thead>
<tr>
<th>Cancer site</th>
<th>Percentage probably caused by any HPV type</th>
<th>Number probably caused by any HPV type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Female</td>
</tr>
<tr>
<td>Cervix</td>
<td>91%</td>
<td>10,600</td>
</tr>
<tr>
<td>Vagina</td>
<td>75%</td>
<td>600</td>
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<tr>
<td>Vulva</td>
<td>69%</td>
<td>2,500</td>
</tr>
<tr>
<td>Penis</td>
<td>63%</td>
<td>0</td>
</tr>
<tr>
<td>Anus</td>
<td>91%</td>
<td>3,200</td>
</tr>
<tr>
<td>Rectum</td>
<td>91%</td>
<td>500</td>
</tr>
<tr>
<td>Oropharynx</td>
<td>70%</td>
<td>2,000</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td>19,400</td>
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</tbody>
</table>
HPV vaccine is cancer prevention.

Talk to the doctor about vaccinating your 11–12 year old sons and daughters against HPV.

#UCanStopHPV
HPV Prophylactic Vaccines

- Recombinant L1 capsid proteins that form “virus-like” particles (VLP)
- Non-infectious and non-oncogenic
- Produce higher levels of neutralizing antibody than natural infection
HPV Vaccine Comparison

HPV Types Included in Vaccine

<table>
<thead>
<tr>
<th>HPV Vaccine</th>
<th>6</th>
<th>11</th>
<th>16</th>
<th>18</th>
<th>31</th>
<th>33</th>
<th>45</th>
<th>52</th>
<th>58</th>
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</thead>
<tbody>
<tr>
<td>Bivalent</td>
<td></td>
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<tr>
<td>Quadrivalent</td>
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<td>9-valent</td>
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</tbody>
</table>

Genital warts: 63% of cancers in body parts where HPV DNA is often found

10% of cancers in body parts where HPV DNA is often found

Adapted from Petrosky et al. MMWR. 2015.
CDC recommends routine vaccination at age 11 or 12 years to prevent HPV cancers

• The vaccination series can be started at age 9 years
• Two doses of vaccine are recommended
• The second dose of the vaccine should be administered 6 to 12 months after the first dose.
Vaccination for females through age 26 years and for males through age 21 years who were not previously adequately vaccinated. Males aged 22 through 26 years may be vaccinated.

Vaccination is also recommended through age 26 for gay, bisexual, and other men who have sex with men (MSM), transgender people, and people with certain immunocompromising conditions (including HIV infection).

Meites et al. MMWR. 2016.
**Dosing Schedules**

**Starting the vaccine series before the 15th birthday**

Recommended schedule is **2 doses** of HPV vaccine
- Second dose should be administered 6–12 months after the first dose (0, 6–12 month schedule)
- Minimum interval between dose one and dose two in a 2-dose schedule is 5 months

**Starting the vaccine series on or after the 15th birthday**

Recommended schedule is **3 doses** of HPV vaccine
- Second dose should be administered 1–2 months after the first dose, and the third dose should be administered 6 months after the first dose (0, 1–2, 6 month schedule)
- Minimum interval between dose one and dose three in a 3-dose schedule is 5 months

*and immunocompromised persons 9-26 years

Meites et al. MMWR. 2016.
HPV Vaccination is Recommended at Age 11 or 12 Years

Girls & Boys can start HPV vaccination at age 9

Preteens should finish the HPV vaccine series before their 13\textsuperscript{th} birthday

Plus girls 13-26 years old who haven’t started or finished HPV vaccine series

Plus boys 13-21 years old who haven’t started or finished HPV vaccine series

Meites et al. MMWR. 2016.
HPV Vaccination Is Safe, Effective, and Provides Lasting Protection

**HPV Vaccine is SAFE**
- Benefits far outweigh any potential risks
- Safety studies findings for HPV vaccination are reassuring and similar to Meng. and Tdap vaccine safety reviews

**HPV Vaccine WORKS**
- Population impact against early and mid outcomes have been reported in multiple countries

**HPV Vaccine Protection LASTS**
- Studies suggest that vaccine protection is long-lasting
- No evidence of waning protection
Framing the conversation
Adolescent Vaccination Coverage United States, 2006-2016

* APD = Adequate provider data
Reagan-Steiner et al. MMWR 2016.
Impact of Eliminating Missed Opportunities by Age 13 Years in Girls Born in 2000

Stokley et al. MMWR. 2014.
Reasons parents won’t initiate HPV vaccination for children

- Not sexually active
- Not recommended
- Safety concern/Side effects
- Not needed or necessary
- Lack of knowledge

Percent

Stokley et al. MMWR. 2014.
Providers Underestimate the Value Parents Place on HPV Vaccine

Adapted from Healy et al. Vaccine. 2014;32:579-584
What is an EFFECTIVE recommendation for HPV vaccination?
Now that Sophia is 11, she is due for three vaccines today. These will help protect her from the infections that can cause meningitis, HPV cancers, and pertussis. We’ll give those shots at the end of the visit.
Strong Provider Recommendation: *What if I’m not a provider?*

- Recommend all vaccines the patient is due for, encouraging all shots on the same day if applicable
- Consult the clinical staff for additional information
- Avoid assuming the parent will decline vaccines
- Place equal importance on recommended *AND* required (ex. school) vaccines
- You can have these types of conversations with friends and family as well!
Some Parents Need Reassurance

• Many parents simply accept this bundled recommendation.

• Some parents may be interested in vaccinating, yet still have questions. Interpret a question as they need additional reassurance from YOU, the clinician they trust with their child’s health care.

• Ask parents about their main concern (be sure you are addressing their real concern).

Unpublished CDC data, 2013.
Is my child really at risk for HPV?
HPV is a very common and widespread virus that infects both females and males. We can help protect your child from the cancers and diseases caused by the virus by starting HPV vaccination today.
Why at 11 or 12 years old?
When should the bike helmet go on?

A. Before they get on their bike
B. When they are riding their bike in the street
C. When they see the car heading directly at them
D. After the car hits them
As with all vaccine-preventable diseases, we want to protect your child early. If we start now, it’s one less thing for you to worry about.

Also, your child will only need two shots of HPV vaccine at this age. If you wait until 15, your child will need three shots.

We’ll give the first shot today and then you’ll need to bring your child back in 6 to 12 months from now for the second shot.
I’m just worried that my child will perceive this as a green light to have S-E-X.
Numerous research studies have shown that getting the HPV vaccine does not make kids more likely to be sexually active or start having sex at a younger age. Starting the HPV vaccine series today will give your child the best protection possible for the future.
“How long can we wait and still give just two doses?”
The two-dose schedule is recommended if the series is started before the 15th birthday. However, I don’t recommend waiting to give this cancer-preventing vaccine. As children get older and have busier schedules, it becomes more difficult to get them back in. I’d feel best if we started the series today to get your child protected as soon as possible.
I have some concerns about the safety of the vaccine—I keep reading things online that says HPV vaccination isn’t safe.

Do you really know if it’s safe?
It sounds like you are generally in support of vaccines, but you have concerns about the safety of HPV. Is that right?

So if you had information that convinced you the HPV vaccine was safe you might consider letting your daughter get it?

I’d like to share with you what I know about the safety of HPV vaccine…
I know there are stories in the media and online about vaccines, and I can see how that could concern you. However, I want you to know that HPV vaccine has been carefully studied for many years by medical and scientific experts. Based on all of the data, I believe HPV vaccine is very safe.
Vaccines, like any medication, can cause side effects. With HPV vaccination this could include pain, swelling, and/or redness where the shot is given, or possibly headache. Sometimes kids faint when they get shots and they could be injured if they fall from fainting. We’ll protect your child by having them stay seated after the shot.
Could HPV vaccine cause my child to have problems with...?
More than a decade of HPV vaccine safety studies have been very reassuring. To date, we have not observed any signal that shows that HPV vaccination causes death/ neurologic conditions/ autoimmune conditions/ venous thromboembolism/ postural orthostatic tachycardia syndrome/ complex regional pain syndrome.
How do you know if the vaccine works?
Ongoing studies continue to show that HPV vaccination works very well. HPV infections, genital warts, and cervical precancers in young people have all decreased in the years since the vaccine has been available. Starting the vaccine series today will help ensure your child gets the best protection possible.
Why do boys need HPV vaccine?
HPV infection can cause cancers of the penis, anus, and throat in men. HPV infection can also cause genital warts.

Getting HPV vaccine today for your son can help prevent the infection that can lead to these diseases.
We only want the vaccines needed for school.
All three vaccines are strongly and equally recommended by the CDC. All three are also recommended by Pediatric, Adolescent, and Family Medicine doctors and groups. School-entry requirements don’t always reflect the current recommendations for your child’s health.
Would you get HPV vaccine for your kids?
Yes, I have given HPV vaccine to my child. I believe strongly in the importance of this cancer-preventing vaccine. The American Academy of Pediatrics, the American Academy of Family Physicians, NIH cancer centers, and the CDC, also agree that getting the HPV vaccine is very important for your child.
When do we need to come back?
Since your child is younger than 15, she will need a second shot in 6 months to a year. When you check out, please make sure to make an appointment for the second shot and put that appointment on your calendar before you leave today!
Since your child is already 15, she will need a second shot in 1-2 months. The third shot is due 6 months from today.

When you check out, please make sure to make an appointment for about 1-2 months from now and 6 months from now, and put those appointments on your calendar before you leave today!
My child is less than 15 years old, so why does she need a third shot?
The recommended schedule is 2 shots given 6 to 12 months apart.

The minimum amount of time between those shots is five months.

Because your child received two shots less than five months apart, we’ll need to give your child a third shot.
• A strong recommendation works for the parent who is ready to have his/her child vaccinated or who expects the doctor to tell him/her what to do.

  • We recommend you begin with strong provider recommendation for every family

• For parents who are unsure/resistant, a closed question following a recommendation can lead to less productive conversations.
Where to find Resources
Available Resources

• National HPV Roundtable
  • https://hpvroundtable.org/
• American Cancer Society
• Centers for Disease Control
• Wyoming Department of Health
Meet Jon
REMEMBER YOU ARE THE KEY!
Questions?
Thank you.
References

- Temte JL. Comment: Timing of HPV Vaccine. Available at: http://vaxnorthwest.org/approach