Increasing Access to Human Papilloma Virus (HPV) Vaccination Materials: Environmental Scan of Online Resources

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Program Rationale and Implementation

- As part of a larger program promoting HPV vaccine through partnerships, NFID conducted an environmental scan on existing HPV vaccination materials
  - Scan conducted January-April 2014
  - Online searches conducted on websites of professional and consumer organizations that promote HPV vaccination
  - Material inclusion criteria
    - Reflect latest Centers for Disease Control and Prevention (CDC) recommendations for HPV vaccination
- Program supports national public health goal established by the President’s Cancer Panel and CDC
President’s Cancer Panel Call to Action: Achieve Greater HPV Vaccine Uptake

1. Reduce missed clinical opportunities to recommend and administer
2. Increase parent, caregiver, and adolescent acceptance of vaccine
3. Maximize access to HPV vaccination services

Increasing HPV Vaccination: 1 of 5 Pressing CDC Health Priorities

Five pressing health priorities in 2014
By Brady Dennis, Published: December 28 E-mail the writer

As head of the Centers for Disease Control and Prevention, Thomas Frieden oversees an agency with the sprawling mission of reining in diseases in the United States and across the globe. From fighting food-borne illness outbreaks and influenza epidemics to educating people about the risks of obesity and smoking, the CDC’s work touches every corner of public health.

Given that broad range of responsibilities, we asked Frieden about what he considers the top public health priorities for 2014. Below are five areas he said deserve special attention, and why each is important. His comments have been edited for length:

1. Increasing human papilloma virus (HPV) vaccinations.

http://www.washingtonpost.com/national/health-science/2013/12/25/4c9e2a16-69c2-11e3-a0b9-249b3bb34602c_story.html
Goal: Enhance Access to Materials That Will Help Healthcare Professionals (HCPs) Improve Vaccination Rates

- Materials grouped according to vaccination barrier(s)
- NFID and its program partners discussed barriers and materials during May 2014 virtual roundtable
- NFID to include available HPV vaccine tools and resources on a new online HPV Resource Center at adolescentvaccination.org/hpv-resource-center
Assessment of Available HPV Resources

Reviewed resources from websites of 20 organizations

Assessment included:

• HPV vaccination information for HCP and patient/parent audiences

• General HPV and up-to-date HPV vaccination information

• Only free, publicly available information included (no login required)

• Resources that focused only on HPV/cervical cancer screening were not included
### Material Assessed and Grouped by Barriers Defined by PCP and CDC

<table>
<thead>
<tr>
<th>Barrier</th>
<th>Key Elements that tools should include</th>
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| (A) Parents need more information | (A1) General disease information  
| | (A2) Positioning of vaccine as cancer prevention |
| (B) Not sexually active/children don’t need vaccine so young | (B3) Emphasis of age 11-12 recommendation  
| | (B4) Explanation of importance of vaccination before sexual debut |
| (C) Safety/efficacy concerns | (C5) Discussion of safety/efficacy |
| (D) Poor completion rates/3-shot series | (D6) Reminder of 3-shot series  
| | (D7) Addressing of system-level barriers (e.g., cost) |
| (E) Lack of perceived benefit for males | (E8) Emphasis of male vaccination/benefit for men |

PCP=President’s Cancer Panel, CDC=Centers for Disease Control and Prevention

54 Resources for Communicating with Parents/Patients Assessed

Of these 54 resources:

• 23 “single topic,” addressing one specific barrier

• 31 “comprehensive,” appear to provide information on overcoming all barriers, but--

  17 of these 31 resources include 6 or fewer of the key elements
Observations on Parent/Patient Resources: Cancer Prevention Message

Most resources refer to the vaccines’ ability to prevent cancer, typically in the discussion of the vaccine indication.

“When given before exposure, both vaccines are very effective in preventing cervical cancers and precancers. Gardasil® is also effective in preventing genital warts as well as anal cancer and precancers.”

*Managing HPV: A new era in patient care*
Association of Reproductive Health Professionals.
www.arhp.org/uploadDocs/HPVToolKitFAQs.pdf
Observations on Parent/Patient Resources: 11-12 Age Recommendation

Importance of vaccination before sexual debut isn’t always explained; however, some resources are very thorough:

**Why vaccinate against HPV at 11 or 12 years of age?**

- The vaccine produces better immunity to fight infection when given at younger ages compared with older ages.
- Vaccination for HPV is much more effective at preventing disease and cancer if all three doses are administered before someone’s first sexual contact.
- Most American men and women who become sexually active will contract at least one type of HPV virus in their lifetime. Vaccination can reduce their risk of HPV infection.
- Most people who become infected with HPV do not even know it.
- HPV is easily spread by skin-to-skin contact during sexual activity. Even if someone does not have sexual intercourse, they can still get HPV.
- People who choose to have only one lifetime sex partner can still get HPV if their partner has had previous partners who were infected.
- Both vaccines have been tested in thousands of people around the world and have been proven to have no serious side effects.
- Both vaccines are highly effective against HPV types that cause most cervical cancers; one of the vaccines, Gardasil, also protects against 90 percent of HPV-associated genital warts.

Observations on Parent/Patient Resources: Safety Messages

Some material simply states that the “vaccines are safe,” but this message includes details that will help parents and teens understand how extensive the safety data are:

“HPV vaccine has a very good safety record. More than 57 million doses have been distributed in the US. In the seven years since the vaccine was recommended, safety studies continue to show that HPV vaccines are safe.”

http://www.arhp.org/Publications-and-Resources/Patient-Resources/Fact-Sheets/Understanding-HPV-Vaccine

Put “HPV Cancer Prevention” on Your Back-to-School Check List
Centers for Disease Control and Prevention
www.cdc.gov/features/hpvvaccine
Observations on Parent/Patient Resources: 3-Dose Series

The reason why a 3-dose series is necessary is sometimes, but not always, included in material.

Why Your Doctor Says You Should Get All 3 HPV* Vaccine Shots
American Academy of Pediatrics
www2.aap.org/immunization/families/APAHPVHandout.pdf


None of the available resources reviewed included specific information about the dosing schedule, which would help parents and teens know when they need to come back for 2nd and 3rd doses.
Observations on Parent/Patient Resources: System-Level Barriers

For the parent/patient audience, cost is the most often discussed system-level barrier, but cost should not be an issue due to the Affordable Care Act. It is important to let families know how to get the vaccines covered.

“The HPV vaccine is listed as a covered service under the Affordable Care Act. If you are underinsured or don’t have insurance and you have a low income, you or your child may qualify to get the HPV vaccine at no costs through the Vaccines for Children program.”


Human Papillomavirus (HPV)
American Academy of Family Physicians
Observations on Parent/Patient Resources: Vaccination of Males

Male vaccination is included in nearly all materials and includes discussion of the opportunity to protect males from certain cancers and genital warts

"Prevents most cases of anal cancer and should protect against head and neck cancer caused by HPV in males. Prevents genital warts from strains included in the vaccine in females and males."

Health Issues: human papillomavirus (HPV)
American Academy of Pediatrics
www.healthychildren.org/English/health-issues/vaccine-preventable-diseases/Pages/Human-Papillomavirus-%28HPV%29.aspx

Additional Tools to Help HCPs Improve HPV Vaccine Uptake

Additional resources specifically designed for HCP use were assessed

- Scripts and Q&As for how to talk with patients/parents, sample standing orders, vaccine scheduling and administration information, integrating immunizations into practice documents, and coding and reimbursement tip sheets

These tools, included in the HPV Resource Center, stress important messaging, such as:

- HCP recommendation is an essential predictor of vaccination
- The message that “HPV vaccine prevents cancer” must be prominent in talks with parents/teens
- Safety and efficacy must be discussed fully and simply
- Vaccination at age 11-12 is important; it is not OK to defer to parents who want to delay vaccination
- HPV vaccine is not optional; it is as important as all other vaccines for adolescents
Conclusions: The State of Current HPV Vaccination Materials

• There are many relevant, useful materials freely available to help HCPs improve HPV vaccination rates
  • Includes material they can use to educate teens and their parents, as well as material for their own knowledge and that of their medical colleagues

• It is important to carefully vet material as some resources that appear to be comprehensive do not include key elements
  • Groups should make every effort to update the vaccination material to address all vaccination barriers
NFID Online HPV Resource Center

• Comprehensive, up-to-date, free HPV and vaccination materials for healthcare professionals

• www.adolescentvaccination.org/hpv-resource-center