

P R E S I D E N T ' S C A N C E R P A N E L

NATIONAL CANCER PROGRAM

NATIONAL CANCER INSTITUTE

NATIONAL INSTITUTES OF HEALTH

DEPARTMENT OF HEALTH AND HUMAN SERVICES

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Achieving Widespread HPV Vaccine Uptake September 13, 2012

The President's Cancer Panel held the second workshop in its 2012–2013 series, *Accelerating Progress in Cancer Prevention: The HPV Example*, on September 13, 2012, in Arlington, Virginia. During this workshop, entitled *Achieving Widespread HPV Vaccine Uptake*, invited participants discussed factors influencing uptake of the human papillomavirus (HPV) vaccine, gaps in knowledge related to vaccine use, and potential strategies to achieve widespread adoption of the vaccine. Representatives from government, academic, nonprofit, and private sectors were present, including an HPV-related cancer survivor, pediatricians, other physicians, a pharmacist, and experts in medical decision making, epidemiology, health services research, health communications, and social marketing. The group emphasized the need to generate enthusiasm for the vaccine among providers and the public in order to increase uptake. Strategies for enhancing communication and increasing access to the vaccine were discussed.

Participants presented the most recently available data on HPV vaccine uptake in the United States and the results of research on factors influencing vaccine-related decision making. Although there is variability in vaccine uptake among geographic regions and racial/ethnic populations, overall vaccination rates have plateaued among U.S. girls in recent years and adoption remains low among boys. Higher adoption rates for other adolescent vaccines (i.e., Tdap and meningococcal vaccines) suggest there is an opportunity to increase HPV vaccination rates. Participants viewed providers as key influencers of vaccine uptake and discussed the need to educate providers about HPV-associated diseases (particularly non-cervical cancers) and the effectiveness of the vaccine in preventing these diseases. Important messages to communicate to providers are that the vaccine prevents cancer and is most beneficial for younger, rather than older, adolescents. Well-designed decision aids may foster pediatrician confidence and skill in communicating with parents and patients about the vaccine. Some participants suggested that campaigns targeting the general public also may be useful for enhancing awareness of and support for the vaccine. The potential of social marketing for disseminating positive communication messages was discussed, as was the power of narratives for illustrating the burden of HPV-associated disease and the effectiveness of the vaccine in preventing suffering associated with these diseases.

Workshop participants also discussed system-level challenges to vaccine adoption. Optimally, the HPV vaccine would be promoted as part of a broader adolescent health platform that includes other adolescent vaccines and preventive care. Incentives could be established to encourage physicians to promote HPV vaccines in this context; however, participants acknowledged that adolescents often do not receive regular care from pediatricians or family physicians. Making the vaccine available at locations frequented by adolescents may help improve uptake of the vaccine, including initiation and completion of the series. School-based programs represent one potential venue for vaccination, although significant policy and logistical barriers exist in the United States. Another option is to allow other providers, such as dentists and pharmacists, to administer one or more doses of the vaccine. Robust infrastructure, including electronic health records and vaccine registries, could help link the components of the so-called medical neighborhood of vaccine providers and also facilitate reminders and implementation of other evidence-based approaches for enhancing vaccine uptake and series completion. Reminders and other system interventions have been effective in increasing uptake of other vaccines.

Throughout the day, the group discussed challenges of a three-vaccine series and some of the differences between those who initiate versus complete the series. Recommendations will reflect these differences. The Panel will summarize findings and recommendations from this meeting, along with the other meetings in the series, in its 2012–2013 Annual Report to the President of the United States.