



# Human Papillomavirus (HPV): Improving Vaccination Rates for Health Care Professionals

June 26, 2023

# Housekeeping Notes

- All attendee lines are muted
- Please submit your questions to our panelists via the Q&A feature
- Questions will be addressed at the end of the session, as time permits



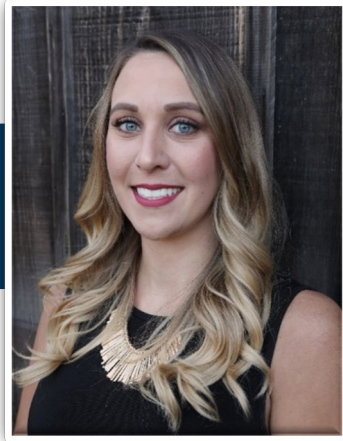
# Disclosures



- In order to obtain contact hours you must:
  - Watch the 60-minute webinar
  - Complete evaluation & pass the post-knowledge checks (80%)
- Continuing Education
  - In support of improving patient care, this activity has been planned and implemented by Quality Insights and CAMC Institute for Academic Medicine. CAMC Institute for Academic Medicine is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.
    - Physicians: The CAMC Institute for Academic Medicine designates this live activity for a maximum of **1 hour for AMA PRA Category I Credit(s)<sup>™</sup>**. Physicians should only claim credit commensurate with the extent of their participation in the activity.
    - Nurses: The CAMC Institute for Academic Medicine is an approved provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. This offering has been approved for **1 contact hour**.
- Speaker and other planners for this educational activity have **NO** relevant financial relationships with ineligible companies to disclose.
- Material reviewed May 2023. Expiration for this enduring material is 05/31/2024.



# Welcome: Presenter Panel



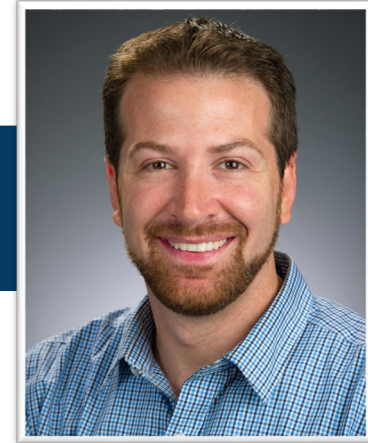
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# Quality Insights Overview

- Non-profit organization focused on improving health care quality in the pursuit of better care, smarter spending, and healthier people
- Strive to be a change agent, partner, and integrator of local organizations collaborating to improve care

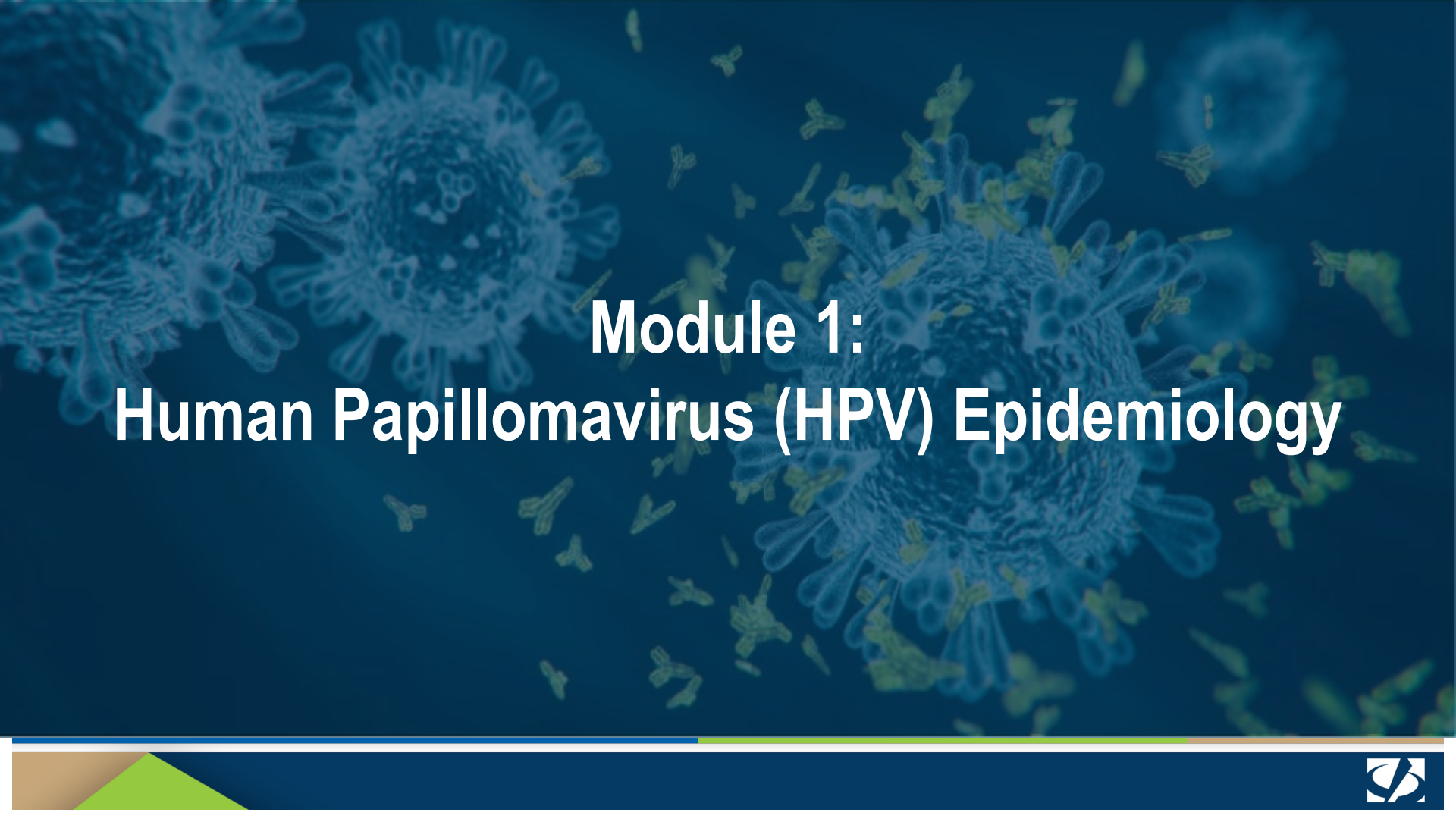


# Learning Objectives

## **After this course, the learner will be able to:**

- Describe how Human papillomavirus (HPV) infections are associated with various types of cancers
- Explain the recommended HPV dosing schedules related to patient's age and timing of previous HPV vaccinations
- Identify at least two HPV vaccination barriers and two evidence-based strategies to improve HPV vaccination rates



The background of the slide features a microscopic view of Human Papillomavirus (HPV) particles. The particles are spherical with a distinct outer shell and a core, and are covered in numerous small, hair-like projections (spikes) that give them a textured, almost crystalline appearance. The color palette is primarily blue and green, with the particles appearing in shades of light blue and green against a darker blue background. The text is overlaid in white, providing a high-contrast, legible title.

# Module 1: Human Papillomavirus (HPV) Epidemiology



# Survivor Story

“My message is this: I had the chance to prevent my cancer. Please don’t miss your chance. Vaccinate yourself and your children.”

- *Kristina N.H.*

*Cervical cancer survivor*

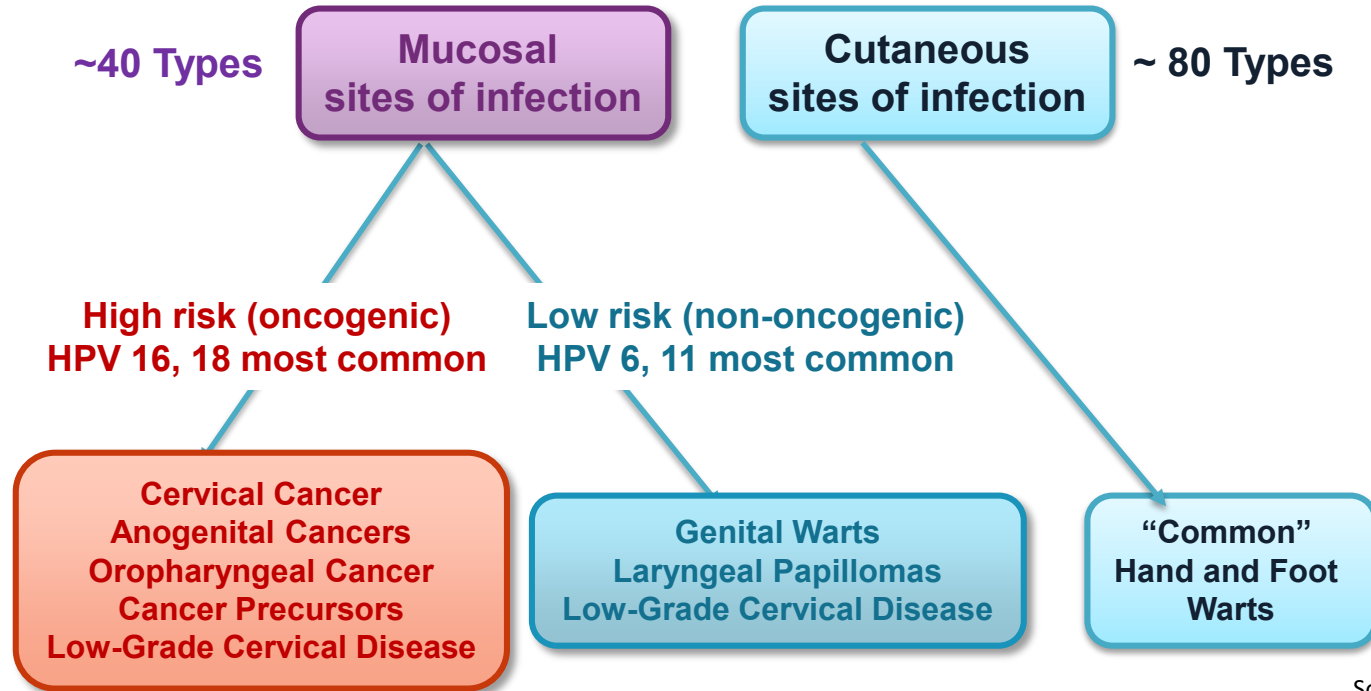
*Age at diagnosis: 34*

Source: [CDC](#), 2021





# HPV Infections



Source: [CDC](https://www.cdc.gov), 2022



# In addition to cervical cancers, in the U.S. HPV is responsible for:

more than

90%

of Anal Cancers



more than

60%

of Penile Cancers



75%

of Vaginal Cancers



70%

of Vulvar Cancers

Source: [Gargano, 1996](#)



# Oropharyngeal Cancers

**Oropharyngeal cancers are the most prevalent HPV-related cancer in the United States.**

## Risk Factors

- Males
- Individuals of 40 years of age
- Tobacco and alcohol use
- Individuals exposed to HPV

Source: [Oral Cancer Foundation](#)

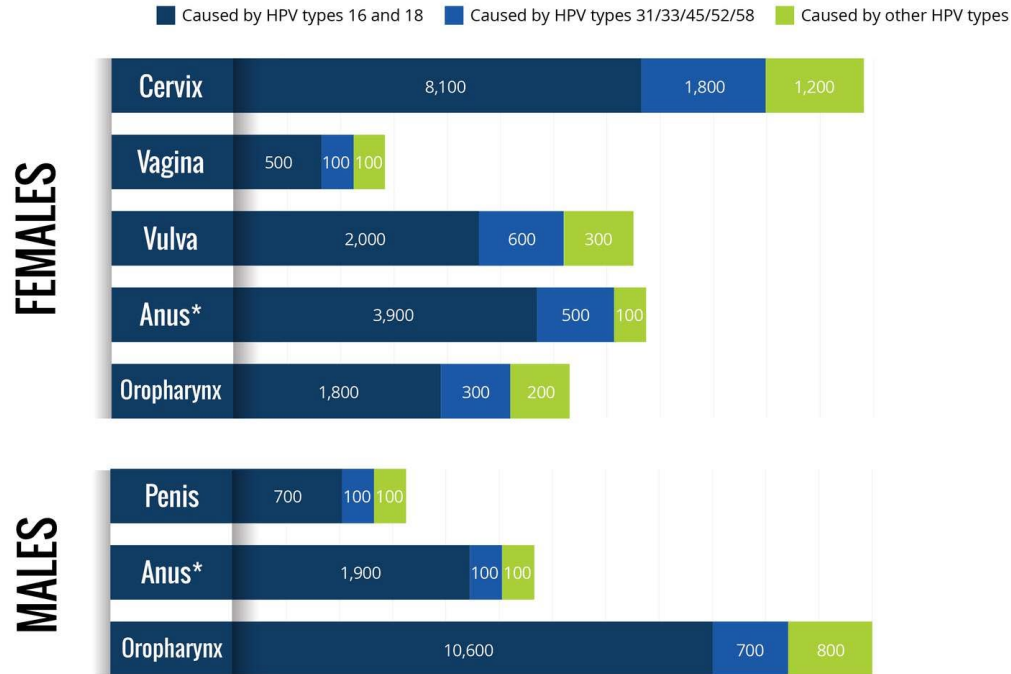




# Module 2: The Impact of HPV Cancers



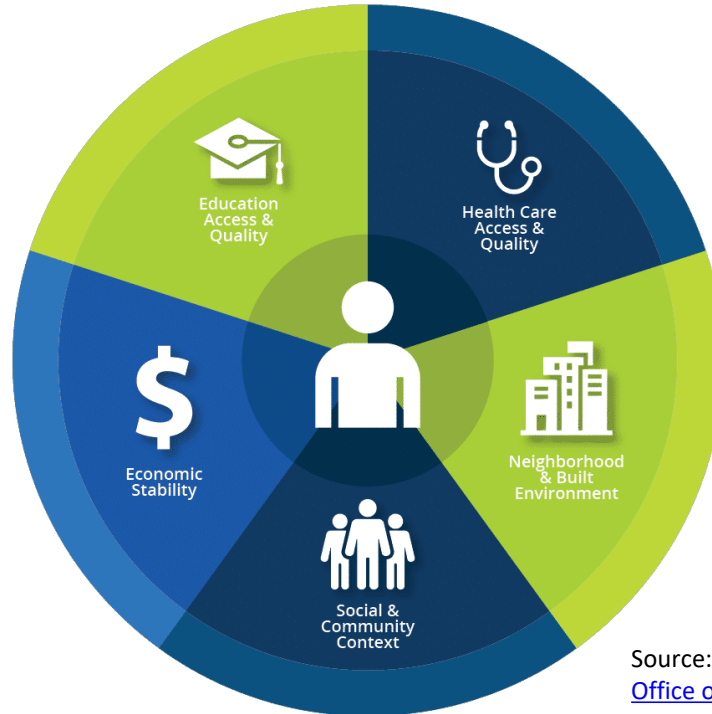
# Estimated Annual Number of Cancer Cases Attributable to HPV by Sex, Cancer Type, and HPV Type



Source: [CDC](https://www.cdc.gov), 2021



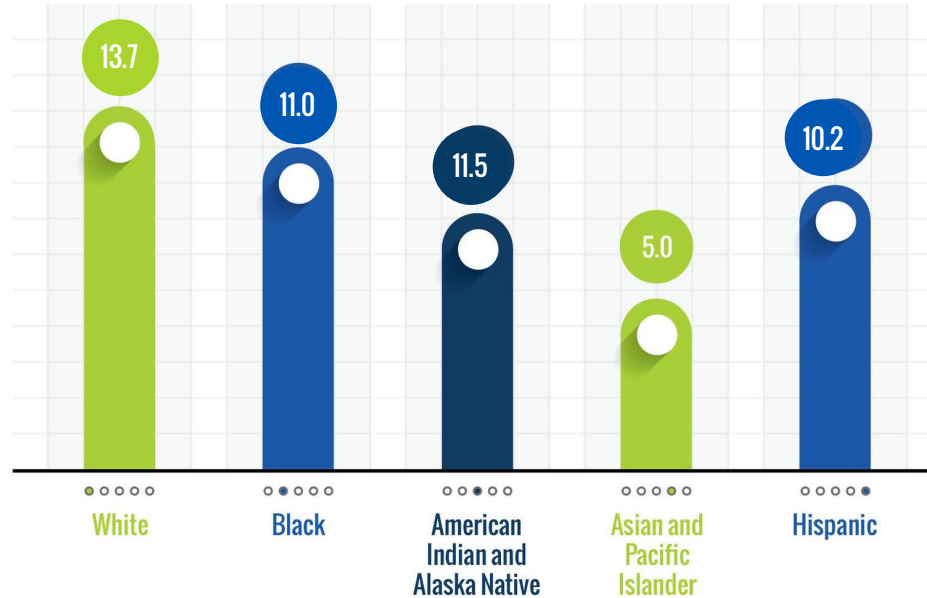
# Social Determinants of Health



Source: [U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion](#), 2020



# Rate of New HPV-associated Cancers by Race and Ethnicity, Male and Female, 2019



Rate per 100,000 people

Source: U.S. Cancer Statistics Working Group. U.S. Cancer Statistics Data Visualizations Tool, based on 2020 submission data (1999-2018); U.S. Department of Health and Human Services, Centers for Disease Control and Prevention and National Cancer Institute; <https://www.cdc.gov/cancer/dataviz>, released in June 2021.

Source: [CDC & National Cancer Institute](#), 2021



# Health Equity: Why it's Important and What You Can Do

- Addressing SDOH increases health equity
- Disparities exist when health outcomes differ among populations
- Contributing factors: race, ethnicity, sex, sexual identity, age, disability, socioeconomic status, and geographic location

## What can you do?

Collect and document race and ethnicity data

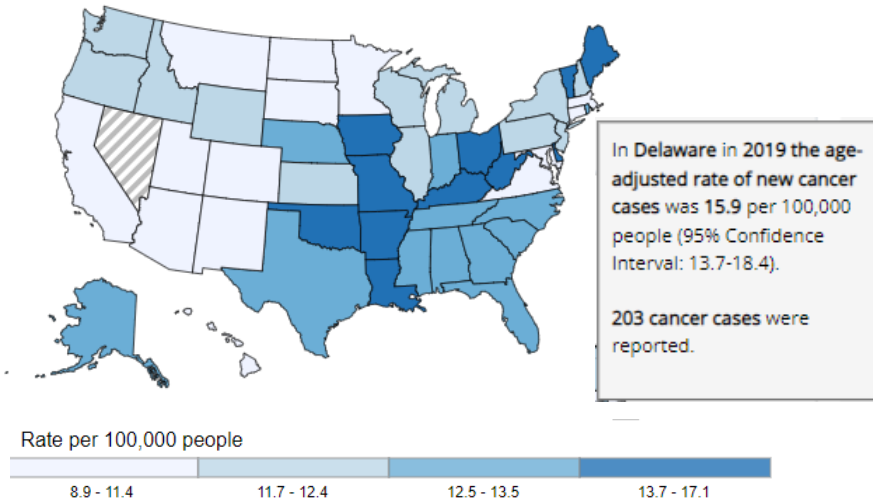




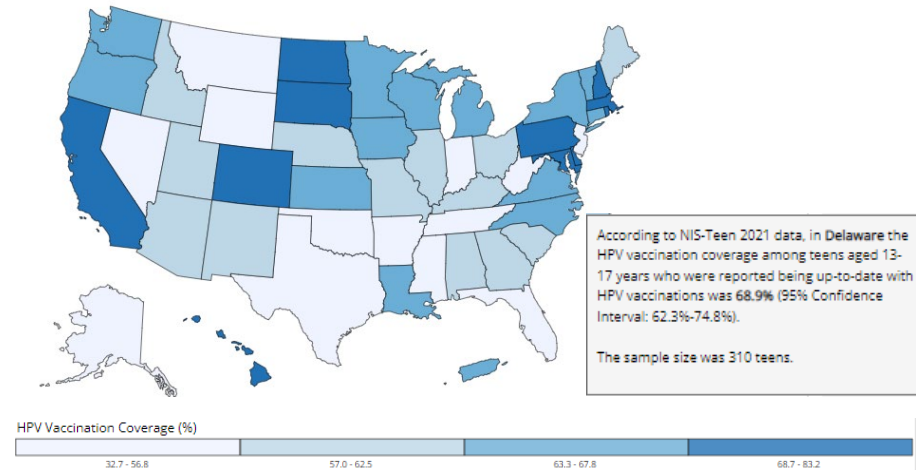
# Delaware Statistics

HPV vaccination coverage among adolescents 13-17 years by State, HHS Region, and the United States, National Immunization Survey-Teen (NIS-Teen), 2019/2020

## HPV-Associated Cancer Rates by State



## HPV Vaccination Rate by State



Source: [CDC-NIS Teen data](#), 2020



# Maternal Risk

- Preterm delivery
- Preterm premature rupture of membranes
- Infant risk for developing respiratory papillomatosis



# World Health Organization's Call to Action

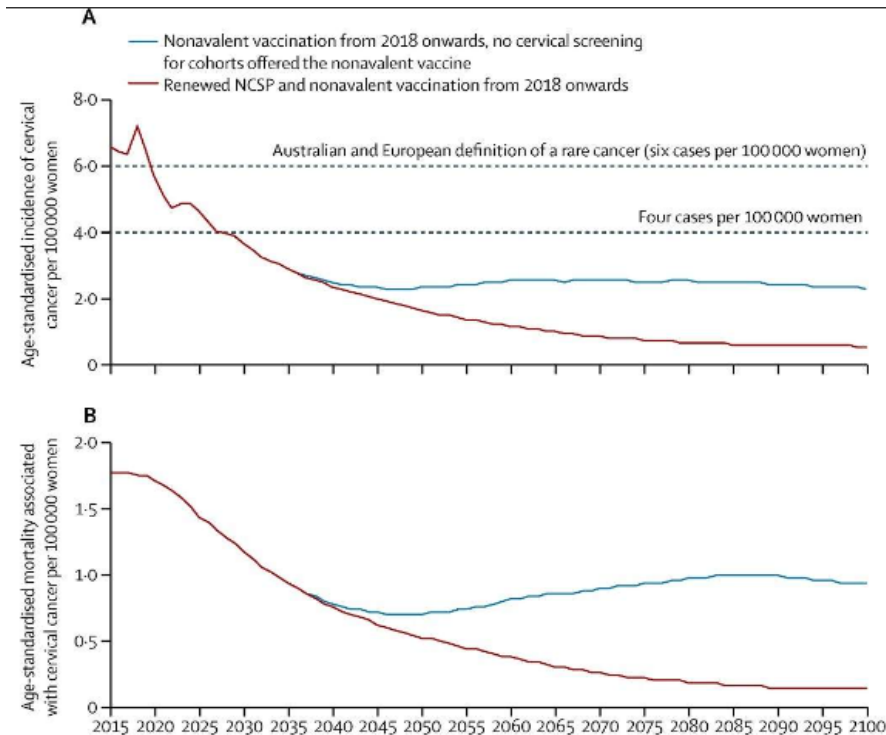
## Goals:

1. 90% of girls fully vaccinated with the HPV vaccine by the age of 15.
2. 70% of women screened using a high-performance test by the age of 35, and again by the age of 45
3. 90% of women with pre-cancer treated and 90% of women with invasive cancer managed.

Source: [World Health Organization](#), 2020



# Australia's Success Story



Source: [Hall](#), 2019





# Knowledge Check #1

Delaware's HPV vaccination series completion rate is \_\_\_\_\_ the Health People 2030 goal of 80% for patients aged 13-17.

- A. Above
- B. Below

# Module 3: HPV Vaccination IS Cancer Prevention



**On-time HPV vaccination has the ability to prevent over 90%, or about 31,200 cases, of cancers caused by HPV in the United States each year.** Source: [CDC](https://www.cdc.gov), 2021



# On Time Vaccination is Key



## 2 Dose Schedule

- Second dose should be administered 6–12 months after the first dose (0, 6–12 month schedule).
- Minimum interval between dose 1 and dose 2 in a 2-dose schedule is 5 months.

## 3 Dose Schedule

- Second dose should be given 1–2 months after the first dose, and the third dose should be given 6 months after the first dose (0, 1–2, 6 month schedule).
- Minimum intervals are 4 weeks between the first and second dose, 12 weeks between the second and third doses, and 5 months between the first and third doses.

Source: [CDC](#), 2021



# Clinical Scenario

- Lucia
- 14 year old female
- Establishing care and full physical
- No previous HPV vaccination







## Knowledge Check #2

How many doses of the HPV vaccine will Lucia need to complete her HPV vaccine series?

- A. 1
- B. 2
- C. 3
- D. 4





## Knowledge Check #3

How long after today's visit should Lucia return for her second dose?

- A. 1-3 months
- B. 3-5 months
- C. 6-12 months
- D. 1 year



# Vaccine Side Effects and Considerations

<b>Side Effects</b>	<b>Contraindications</b>
<ul style="list-style-type: none"><li>• Pain and swelling at the injection site</li><li>• Potential fever and headache</li><li>• Syncope</li></ul>	<ul style="list-style-type: none"><li>• Pregnancy</li><li>• Hypersensitivity to yeast</li><li>• Acute moderate or severe illness</li></ul>

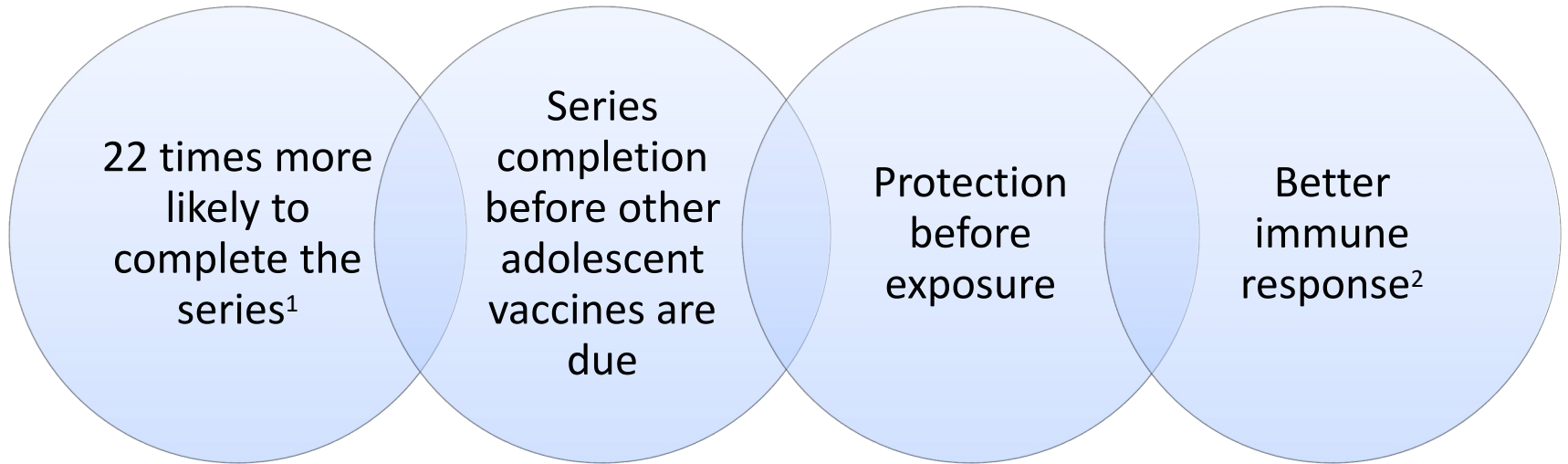


# Coverage for Bivalent and Quadrivalent Vaccines

- No additional coverage for patients who've completed bivalent or quadrivalent series
- Nine-valent vaccine can be used to complete series if bivalent or quadrivalent series incomplete



# Benefits of Early Vaccination



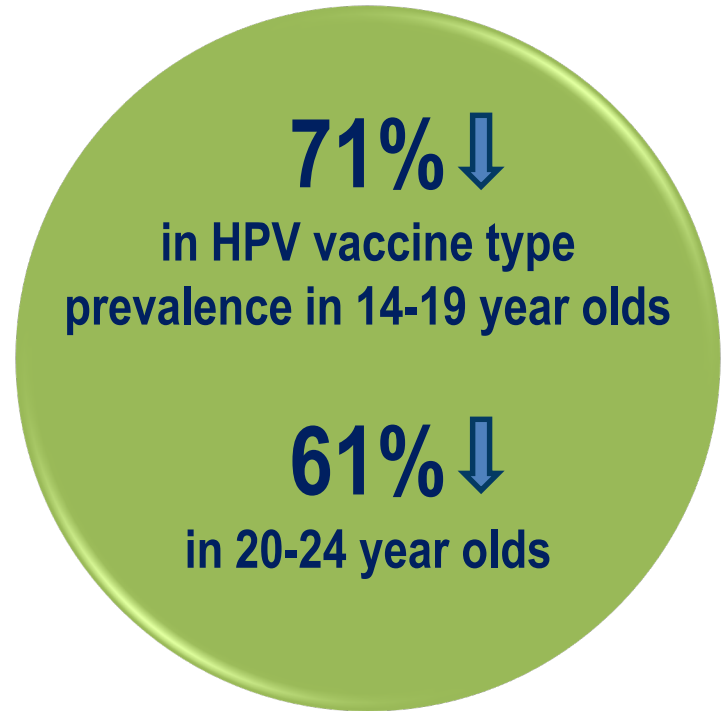
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2. De Vincenzo, R., Conte, C., Ricci, C., Scambia, G., & Capelli, G. (2014). Long-term efficacy and safety of human papillomavirus vaccination. *International journal of women's health*, 6, 999–1010. <https://doi.org/10.2147/IJWH.S50365>



# HPV Vaccine is SAFE and EFFECTIVE

- 2.5 million vaccinated individuals demonstrating an acceptable safety profile
- Continuous monitoring of safety by the FDA and CDC
- HPV vaccination provides long-lasting immune response and improved outcomes



Source: [American Cancer Society](#), 2020



# Vaccination Barriers and Combatting Misinformation

- Listen to and understand parents' concerns
- Provide evidence-based answers
- Reassure that the vaccine is effective, safe, and long-lasting
- Offer fact sheets
- Share personal stories
- Use chart reminders for follow-up discussion

**Talking to Parents about HPV Vaccine**  **HPV VACCINE IS CANCER PREVENTION**

Recommended HPV vaccination in the same way and on the same day as all adolescent vaccines. You can say, "Now that your son is 11, he is due for vaccinations today to help protect him from meningitis, HPV cancers, and whooping cough. Do you have any questions?" Taking the time to listen and understand parents' concerns can help you respond to their concerns more effectively.

**Why does my child need HPV vaccine?**  
HPV vaccine is important because it prevents infections that can cause cancer. That's why we need to start the shot series today.

**Some HPV infections can cause cancer—like cancer of the cervix or in the back of the throat—but we can protect your child from these cancers in the future by getting the first HPV shot today.**

**How do you know the vaccine works?**  
Studies continue to prove HPV vaccination works extremely well, decreasing the number of infections and HPV precancers in young people since it has been available.

**HPV is a very common infection in women and men that can cause cancer. Starting the vaccine series today will help protect your child from the cancers and diseases caused by HPV.**

**Why do they need HPV vaccine at such a young age?**  
Vaccines protect your child before they are exposed to a disease. That's why we give the HPV vaccine earlier rather than later, to protect them long before they are ever exposed. Also, if your child gets the shot now, they will only need two doses. If you wait until your child is older, they may end up needing three shots.

**Studies tell us that getting HPV vaccine doesn't make kids more likely to start having sex. I made sure my child (or grandchild) did get HPV vaccine, and I recommend we give your child her first HPV shot today.**

**Why do boys need the HPV vaccine?**  
HPV vaccination can help prevent future infections that can lead to cancers of the penis, anus, and back of the throat in men.

**Yes, HPV vaccination is very safe. Like any medication, vaccines can cause side effects, including pain, swelling, or redness where the shot was given. That's normal for HPV vaccine too and should go away in a day or two. Sometimes kids faint after they get shots and they could be injured if they fall from fainting. We'll have your child stay seated after the shot to help protect her too.**

**Are all of these vaccines actually required?**  
I strongly recommend each of these vaccines and so do experts at the CDC and major medical organizations. School entry requirements are developed for public health and safety, but don't always reflect the most current medical recommendations for your child's health.

**There is no evidence available to suggest that getting HPV vaccine will have an effect on future fertility. However, women who develop an HPV precancer or cancer could require treatment that would limit their ability to have children.**

**What diseases are caused by HPV?**  
Some HPV infections can cause cancer—like cancer of the cervix or in the back of the throat—but we can protect your child from these cancers in the future by getting the first HPV shot today.

**Is my child really at risk for HPV?**  
HPV is a very common infection in women and men that can cause cancer. Starting the vaccine series today will help protect your child from the cancers and diseases caused by HPV.

**I'm worried my child will think that getting this vaccine makes it OK to have sex.**  
Studies tell us that getting HPV vaccine doesn't make kids more likely to start having sex. I made sure my child (or grandchild) did get HPV vaccine, and I recommend we give your child her first HPV shot today.

**I'm worried about the safety of HPV vaccine. Do you think it's safe?**  
Yes, HPV vaccination is very safe. Like any medication, vaccines can cause side effects, including pain, swelling, or redness where the shot was given. That's normal for HPV vaccine too and should go away in a day or two. Sometimes kids faint after they get shots and they could be injured if they fall from fainting. We'll have your child stay seated after the shot to help protect her too.

**Can HPV vaccine cause infertility in my child?**  
There is no evidence available to suggest that getting HPV vaccine will have an effect on future fertility. However, women who develop an HPV precancer or cancer could require treatment that would limit their ability to have children.

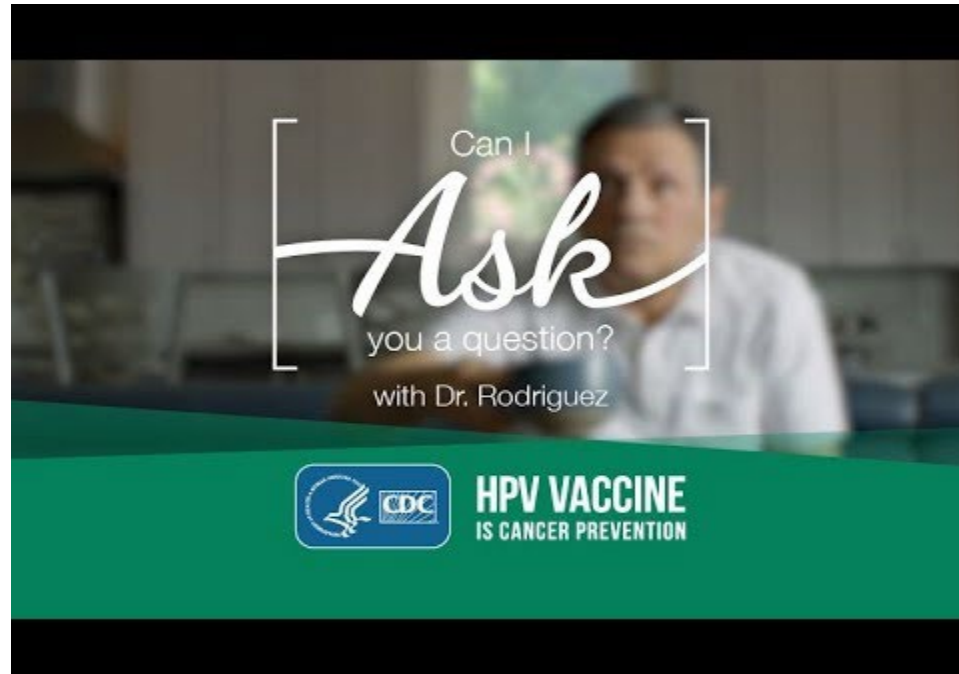
For more information, visit [cdc.gov/vaccines/conversations](http://cdc.gov/vaccines/conversations)

REVISION: 03/2016  
DATE UPDATED: JULY 2016

[CDC Tip Sheet](#)



# Clinical Scenario



Video: <https://youtu.be/nGSrYpOktJQ>





# Knowledge Check #4

Which of the following responses would be the best way for you to respond to Roger's concerns?

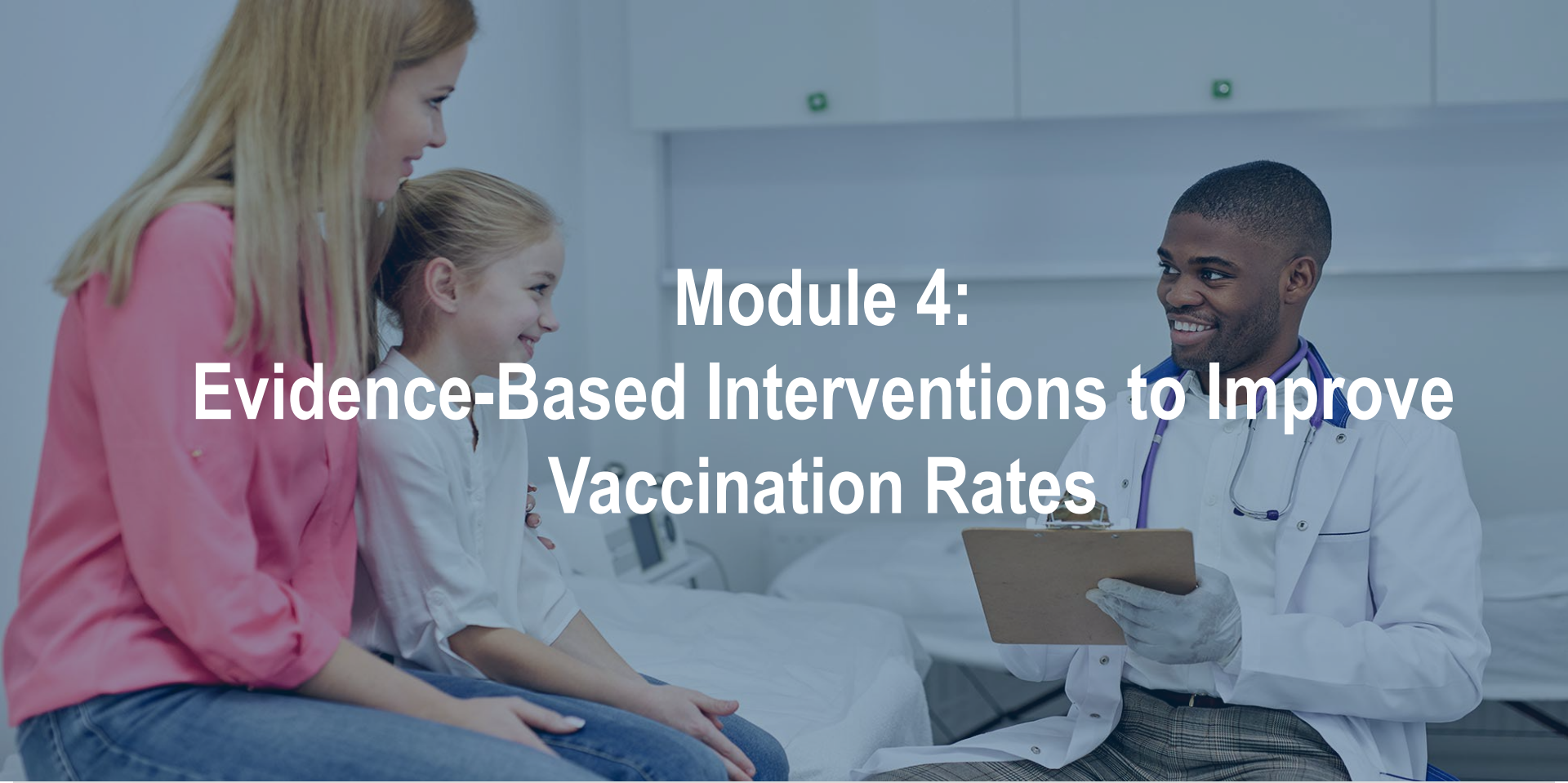
- A. Ah yes, I did see that on the community social media page, there's a lot of misinformation online but Jake should be okay to receive the vaccine since he is overall healthy.
- B. Mild side effects can occur, such as pain & redness at the injection site and fainting right after the injection, but after 10+ yrs of monitoring & research the HPV vaccine has been proven to be safe.
- C. Yes, there are side effects that can occur after receiving the HPV vaccine. I understand if you're not ready to administer it to Jake at this time.
- D. Let me take a look into what your wife saw online and I'll get back to you once I've gathered more information. I want to make sure that no harm comes to Jake if you choose to vaccinate him against HPV.



# Resources: Barriers and Communication

- [A Community Toolkit for Addressing Health Misinformation](#) (Office of the U.S. Surgeon General)
- [Countering Vaccine Hesitancy](#) article (American Academy of Pediatrics)
- [Talking to Parents about HPV Vaccine handout](#) (CDC)
- [More HPV videos](#) (CDC)
- [HPV Vaccine: Cancer Prevention](#) (Quality Insights' Powtoon)
- [The Vaccine Scene: Learn more about the HPV Vaccine](#) (Quality Insights' Powtoon)



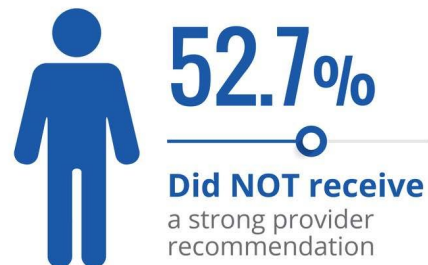


# Module 4: Evidence-Based Interventions to Improve Vaccination Rates



# Presumptive Recommendation

Delaware HPV coverage among adolescents:



(CDC, 2021)

There is a  
difference of **25.8%**

Source: [CDC](#), 2021



# Pro-Immunization Culture

## HPV Champion

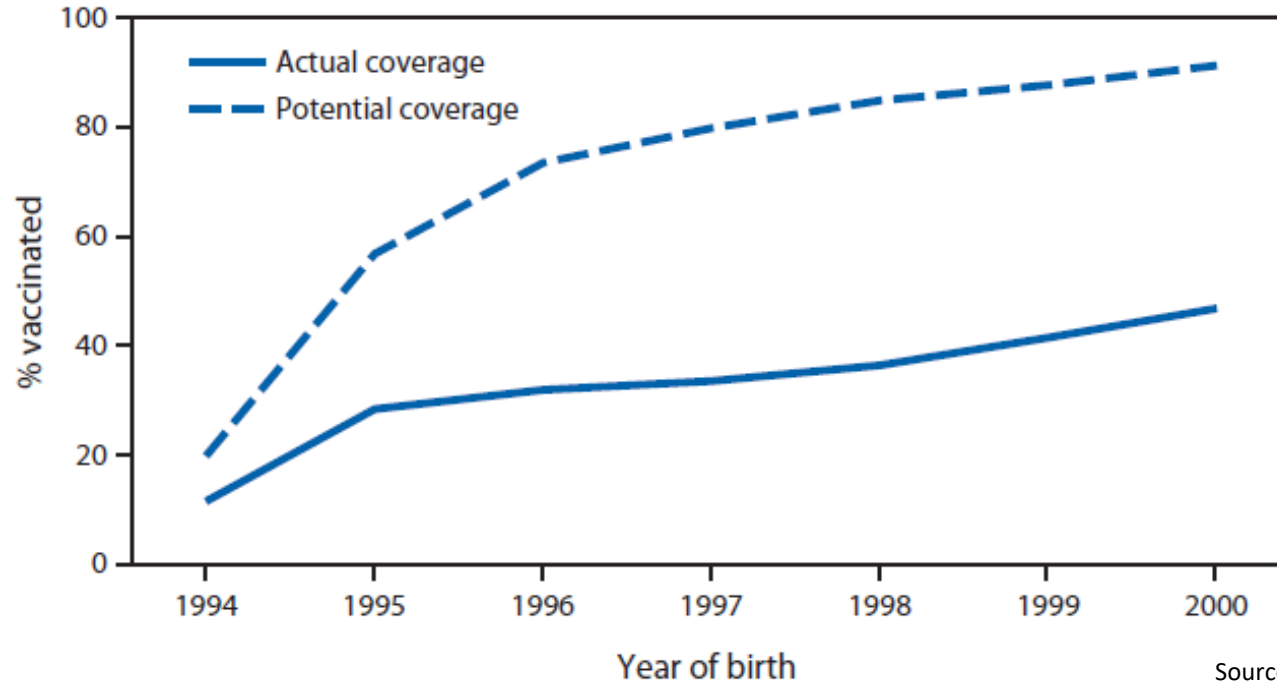
- Promote immunization activities
- Deliver or coordinate immunization education
- Ensure documentation is completed
- Establish consistent messaging to parents
- Evaluate immunization workflow
- Demonstrate leadership, collaboration, and advocacy



Source: [CDC](#), 2020



# Reducing Missed Opportunities



Source: [Stokley](#), 2014



# Reminder-Recall Systems

## Patient Reminders:

- Mailed letters or postcards
- Appointment magnets
- Appointment cards
- Telephone calls or text messages
- Patient portal messages

**HPV Vaccine Reminder**  
Protect yourself! Get both doses.\*

**1st** \_\_\_\_\_ Date of 1<sup>st</sup> dose

**2nd** \_\_\_\_\_ 6 to 12 months after 1<sup>st</sup>

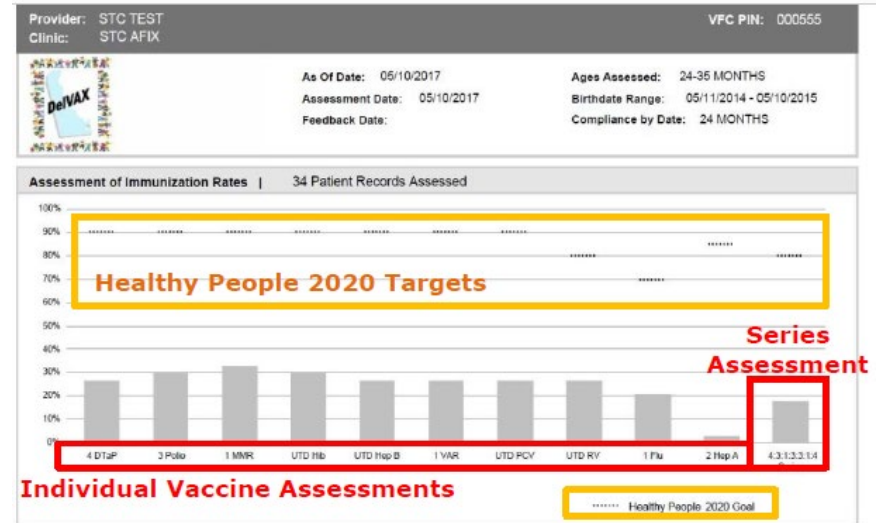
\_\_\_\_\_  
Name Physician Name

\*This schedule is for 9 to 14 years olds who receive the 2nd dose at least 5 months after the first.



# Immunization Information Systems - DelVAX

- Perform roster clean-up and patient inactivation quarterly
- Ensure appropriate staff receive DelVAX training
- Routinely monitor immunization status of patients utilizing DelVAX reports



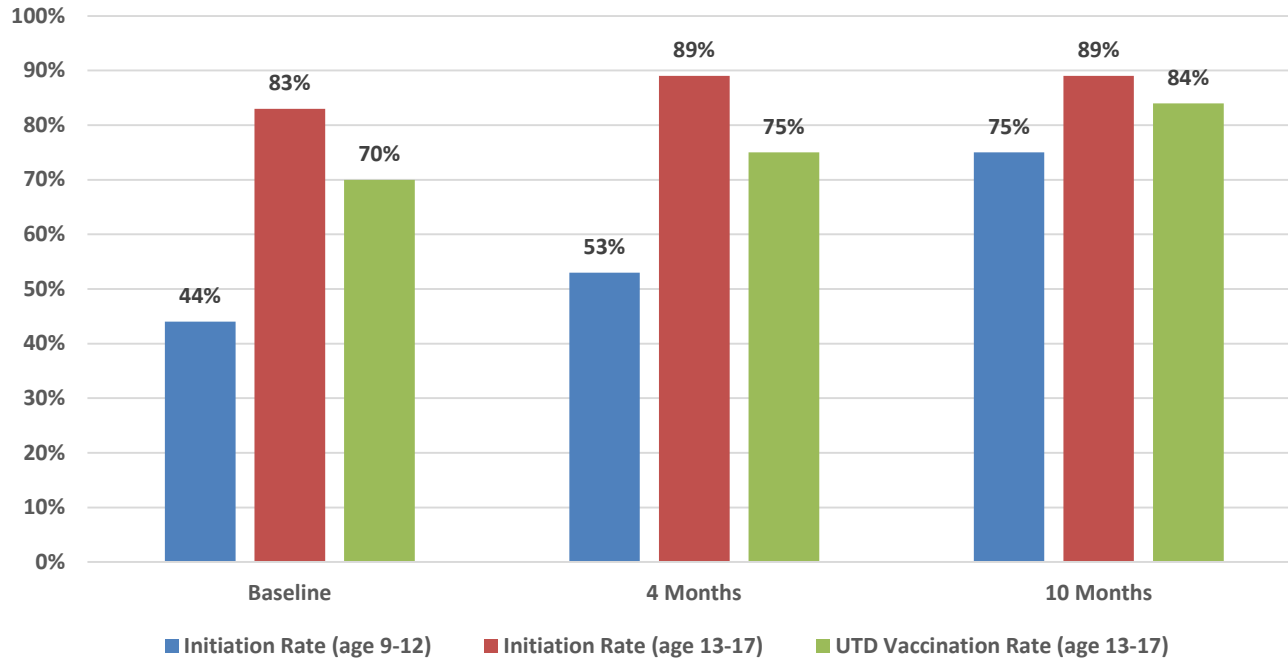
Source: [DelVAX](#)





# Case Study

## Practice A's HPV Vaccination Rates



# Knowledge Check #5

Which type of recommendation is best for ensuring patients choose to vaccinate against HPV?

- A. Forced
- B. Suggestive
- C. Conversational
- D. Presumptive



# Summary

- Nearly everyone who is sexually active will get an HPV infection at some point in their life.
- **HPV vaccination can prevent 90% of HPV-related cancers.**
- HPV vaccination is recommended for all adolescents at ages 11 and 12, and can be initiated beginning at age 9.
- Provider recommendation is the #1 reason parents choose to vaccinate against HPV.
- Evidence-based interventions can be implemented within the practice to ensure HPV vaccination administration and to improve vaccination rates.



# Questions?



# Evaluation and Post-Test

- HPV: Improving Vaccination Rates for Healthcare Professionals
  - Evaluation:  
<https://www.surveymonkey.com/r/HPVeval23>
  - Once you complete the evaluation you will be auto-directed to the Post-Test



## QR Code

Activate the camera on your smart phone and scan this QR code to link to the **evaluation.**



# Quality Insights on the Web

- Danielle Collins, RN, BSN
  - Email: [dcollins@qualityinsights.org](mailto:dcollins@qualityinsights.org)
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company/1259377](http://www.linkedin.com/company/1259377)



# THANK YOU!



This project is in collaboration with the Division of Public Health (DPH) – Comprehensive Cancer Control Program, Immunization and Vaccines for Children, and the Centers for Disease Control and Prevention (CDC). Publication number DEDPH-HPV-052323

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