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Archived Webinar: AAP 2017 HPV Vaccination Update
The American Academy of Pediatrics has uploaded this webinar to its website, in policy/aap
select Scroll down to the Help Box for Healthcare Providers

Key Messages from a HPV Workshop
HPV Vaccination = Cancer Prevention
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HPV Vaccine: Vaccinate Early to Prevent Cancer Later

Human Papillomavirus (HPV) Vaccine: Vaccinate Early to Prevent Cancer Later

Human Papillomaviruses are linked to several types of cancers in both males and females, including cancers of the cervix, vagina, vulva, penis, anus, rectum, and the oropharynx, which includes the base of the tongue and tonsils. HPV infections are very common. Oftentimes the infection resolves on its own, but sometimes it lingers, eventually causing changes in the body that develop into cancer. This could occur years after the onset of the initial HPV infection.

More than 120 types of HPV have been identified. Oncogenic, high-risk types include types 16 and 18, which together account for approximately 70% of cervical cancers. Bivalent, quadrivalent and nonavalent HPV vaccines all include types 16 and 18. HPV is also linked with 90% of anal cancers, 71% of vulvar, vaginal or penile cancers and 72% of oropharyngeal cancers.

It is best to administer HPv vaccine before potential exposure to the virus. Persons who haven’t been infected with any HPV vaccine types will receive the most benefit from vaccination. Vaccinating your adolescent patients before they are exposed to HPV is a proactive step in preventing cancer in their later years. It may be helpful to “bundle” the recommendation for HPV vaccine with other preteen vaccines, such as Tdap and meningococcal, in your discussions with parents and in your office’s standing orders.

For additional information, please visit:

- https://www.cdc.gov/vaccines/pubs/pinkbook/hpv.html
- https://www.cdc.gov/vaccines/vpd/hpv/hcp/index.html
- https://www.cdc.gov/vaccines/pubs/pinkbook/hpv.html
- https://www.cdc.gov/vaccines/pubs/pinkbook/hpv.html

Have You HIR’D?
HPV Vaccination: Are My Patients Up to Date?

Have you wondered which of your patients have received HPV vaccinations? The Hawaii Immunization Registry (HIR) has a function that can help you obtain the information. Here are the steps:

1). Under Reports, click ‘ad hoc list report’ (see HIR menu bar at left).
2). Customize your report by selecting appropriate fields, e.g., First Name, Last Name, Birth date, Vaccine, Vaccination date.
3). Filter data as shown below to create a list of patients who received HPV 9 vaccination (you can also filter by other HPV vaccines). Be sure to click on the “Add/Save Edit” button.

4). Click “Generate” to produce your customized list.

5). Click “Refresh” on the Ad Hoc Report Status screen to produce a list.
6). Click “List” to view a list which will be available in different display modes.
On February 9, 2017, healthcare providers statewide participated in a half-day workshop that focused on evidence-based communication strategies to increase HPV vaccination uptake in clinical practice. Speakers included physicians specializing in pediatrics, family practice, obstetrics and gynecology, and radiation oncology. Additional presentations were provided by Hawaii cancer survivors, pharmacists, and our own VFC AFIX Coordinator, Alicia Diem.

Key messages from the workshop included:

1. The increasing prevalence of HPV-related oropharyngeal cancers in Hawaii, highlighting the importance of vaccinating boys and young men against HPV.
2. The importance of a healthcare provider’s strong recommendation for HPV vaccination by recommending all age-appropriate vaccines together. “Your child needs three vaccines today to help prevent meningitis, HPV cancers, and pertussis.”
3. The availability of resources to assist providers in increasing HPV vaccination rates in their practices, including AFIX assessments and referrals to pharmacists.

If you were unable to attend this informative workshop, we encourage you to view the presentations and archived webcast at: https://www.dropbox.com/sh/triflu2a5pk3crtzo/AAB6xEWBuHuN9_vF1kyy4MLa?dl=0. Please note that a DropBox account is required.

Talking to Parents About HPV Vaccine...Tips from the CDC

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

Q. I’m worried my child will think that getting this vaccine makes it ok to have sex.
A: Studies tell us that getting HPV vaccine doesn’t make kids more likely to start having sex. I recommend we give your child her first HPV shot today.

Q. I’m worried about the safety of the HPV vaccine. Do you think it’s safe?
A: 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 the shots and they could be injured if they fall from fainting. We’ll protect your child by having them stay seated after the shot.

For more Q & A tips, visit: https://www.cdc.gov/hpv/hcp/hpv-vaccine-tip-sheet.pdf

Talk to the Doc: Human Papillomavirus Vaccine (HPV)

Q: A patient who is currently 17 years old received her first dose of Human Papillomavirus vaccine (HPV) at age 11 years. How many doses of HPV vaccine does she need now to complete her series?

A: This patient needs one additional dose of HPV vaccine. Persons who initiated vaccination with 9vHPV, 4vHPV, or 2vHPV before their 15th birthday need a total of two doses of any HPV vaccine at the recommended dosing schedule (0, 6-12 months) to be considered adequately vaccinated. Persons who initiated vaccination with 9vHP, 4vHPV, or 2vHPV on or after their 15th birthday need a total of 3 doses (0, 1-2, 6 months) to be considered adequately vaccinated. If the vaccination schedule is interrupted, the series does not need to be restarted. The number of recommended doses is based on age at administration of the first dose.

Note: ACIP recommends vaccination with 3 doses of HPV vaccine for persons aged 9 through 26 years with primary or secondary immunocompromising conditions that might reduce cell-mediated or humoral immunity.

For further information, see: “Use of a 2-Dose Schedule for Human Papillomavirus Vaccination – Updated Recommendations of the Advisory Committee on Immunization Practices” at https://www.cdc.gov/mmwr/volumes/65/wr/pdfs/mm6549a5.pdf

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