

Gains in HPV vaccination coverage after interventions sustainable for several years

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Electron micrograph of a negatively stained human papilloma virus (HPV) which occurs in human warts. Credit: public domain

Approximately 45,300 Human papillomavirus (HPV)-related cancers occur in the U.S. every year. HPV vaccination has the potential to prevent up to 80 percent of these cancers. While raising HPV vaccination rates has been a public health priority since 2014, improving

these numbers has been slow and uneven.

Understanding ways to increase and sustain HPV vaccination levels has taken on additional importance in light of the COVID-19 pandemic. National pediatric and [adolescent](#) vaccinations during the pandemic, including HPV vaccination, declined initially by more than 70 percent and have remained below pre-pandemic levels.

A new study has found that multi-level interventions that include training the entire medical staff and starting HPV vaccination before age 11 has the potential to promote on-time vaccination, which will save many lives.

In an effort to identify ways to improve vaccination rates, a team of researchers from Boston University School of Medicine (BUSM) developed a program called Development of Systems and Education to improve HPV vaccination (DOSE HPV), which was rolled out at Boston Medical Center (BMC) and four practices in affiliated community health centers between 2016 and 2018. This intervention demonstrated double-digit improvements in HPV vaccine initiation. While this was encouraging, the researchers wanted to see if the improvements were sustained after the intervention was completed.

The researchers looked at monthly HPV vaccination coverage among the adolescents aged 9-18 who received primary care at the two practices from March 2016 (before the [intervention](#)) to October 2020. They examined how many adolescents in different age groups started and completed the vaccine series over time. Both practices chose to start the HPV vaccine series at age 10 to give adolescents more chances to complete the series before their 13th birthdays.

"The data showed that the improvements were sustained for four years beyond the completion of the initial vaccination and the rates of adolescents completing the HPV [vaccine](#) series by their 13th birthday

(the CDC definition of on time completion) increased from 62 percent to 88 percent—nearly double the national rate of series completion among 13 year-olds (45.6 percent)," explained corresponding author Rebecca Perkins, MD, associate professor of obstetrics & gynecology at BUSM.

According to Perkins, this is believed to be the first study to examine the sustainability of interventions four years after implementation. "The sustained improvement over time indicates that these types of programs may be a good public health investment. It also indicates that starting the HPV vaccines series before age 11 can improve on-time completion of the series by giving more chances for kids to be vaccinated," said Perkins, who also is a gynecologist at BMC.

These findings appear online in the journal of *Journal of Lower Genital Tract Disease*.

More information: Sharon M. Casey et al, Long-Term Multilevel Intervention Impact on Human Papillomavirus Vaccination Rates Spanning the COVID-19 Pandemic, *Journal of Lower Genital Tract Disease* (2021). [DOI: 10.1097/LGT.0000000000000648](https://doi.org/10.1097/LGT.0000000000000648)

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