

Costs cast cloud over Nigeria's HPV vaccine plan

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A staff member of the Blue Star Hospital takes the vital signs of a patient in Mogadishu. Credit: AMISOM Photo/Ilyas Ahmed, CC0 1.0

Nigeria's latest target for introducing a life-saving vaccine against cervical cancer has been branded unrealistic by health specialists as cost concerns have yet to be addressed, leaving thousands of Nigerian women at risk.

According to the International Agency for Research on Cancer, [cervical cancer](#) ranks as the second most frequent cancer among women in Nigeria.

The [human papillomavirus](#) (HPV) vaccine helps prevent the disease, which caused about 342,000 deaths in 2020—about 90 percent of them in low- and [middle-income countries](#)—according to the World Health Organization (WHO).

In November 2020, Nigerian health minister Osagie Ehanire, in a keynote speech at a national stakeholders' forum on the elimination of cervical cancer in Nigeria, said the country would introduce the HPV vaccination into its national immunization schedule by 2021.

Two years later, the vaccine has yet to be rolled out, leading to skepticism that a new date announced by Faisal Shuaib, executive director of Nigeria's National Primary Health Care Development Agency, would also be missed.

Shuaib, had on 14 July announced a revised date to introduce HPV vaccines for Nigerians aged nine to 14 into the country's expanded immunization program by the second quarter of 2023.

During an event to mark World Cancer Day, Ehanire said that Nigeria had met the conditions for support from Gavi, the Vaccine Alliance to introduce the HPV vaccine into its national immunization scheme.

The WHO has stated its commitment to support Nigeria's HPV vaccine rollout, according to Walter Mulombo, WHO country representative to Nigeria. Speaking at the event, he said the WHO would work with the National Primary Health Care Development Agency to implement the plan.

"The major drawback is the huge cost of the vaccine," says Francis Durosinmi-Etti, consultant radiation and clinical oncologist at Lagos University Teaching Hospital's Cancer Centre.

But he added: "It may also be possible to solicit the assistance of WHO in negotiating specially discounted prices for Nigeria from the manufacturers."

He suggests that the government could improve access to the vaccine by subsidizing the cost through the National Health Insurance Authority.

Tunji Akintade, medical director of Hamaab Medical Centre, Lagos, and former chairman of the Association of General and Private Medical Practitioners of Nigeria, is concerned that the Nigerian government might delay including HPV vaccines in the immunization program because of the high burden of infectious diseases, which are prioritized in public health policy.

Left behind

Cancer specialists in Nigeria worry that the country is being left behind in the HPV vaccination scheme despite the prevalence of cervical cancer.

"Developed countries are already vaccinating their boys, which means they have finished vaccinating girls," said Hadiza Amanabo, program manager at Medicaid Cancer Foundation, in Abuja, Nigeria.

Ifeoma Okoye, a professor of radiation medicine at the University of Nigeria, Nsukka, in Enugu State, says that currently the vaccines are only available in a few private health facilities at a cost that is above the reach of most Nigerians.

She said authorities had attempted to test the vaccine in several local government areas in Abakaliki and Abuja, while the National Primary Health Care Development Agency had prepared a policy document on HPV vaccine implementation, but the shot was not yet included in routine vaccinations.

"While [government efforts](#) are critical in the fight against cervical cancer, all partners, corporate groups and other stakeholders must urgently support measures aimed at eliminating the disease in Nigeria," said Okoye.

"Immunization against HPV infection, coupled with screening and treatment, is the best strategy to reduce the burden of cervical cancer."

Magnifique Irakoze, obstetrician and gynecologist at the University Teaching Hospital of Kigali, Rwanda, says that good health outcomes cannot be achieved as a stand-alone program.

She suggests that African countries should emulate Rwanda by integrating their HPV vaccine programs with other initiatives such as education and social-economic empowerment.

"Most African countries ratified the WHO goal to eradicate cervical cancer by 2030," said Irakoze.

"This can be achieved if countries cover a 90 percent vaccination rate for HPV alongside other measures."

Provided by SciDev.Net

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