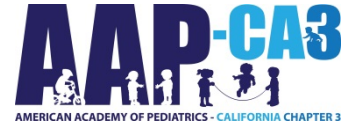


HPV VACCINE FACT SHEET



BACKGROUND

Human papillomavirus (HPV) causes cancer in women and men. HPV types 16 and 18 are the most common high-risk types associated with cancers in both genders. HPV types 6 and 11 are associated with genital warts and warts in the respiratory tract (recurrent respiratory papillomatosis or RRP). Women in the United States make up 60% of HPV-related cancers: 12,000 are diagnosed with cervical cancer and 4,000 die from it each year. HPV is also strongly associated with vulvovaginal cancers, anal cancers, and oropharyngeal cancers. Men make up about 40% of HPV-related cancers. Oropharyngeal cancers, but HPV is also associated with anal cancer and penile cancer in men.

According to the 2014 NIS-Teen, only 60% of girls aged 13-17 have started an HPV vaccine series, and only about 40% have received all three doses. For boys, 41.7% received at least one dose and 21.6% have completed all three. **Completing the 3-dose HPV vaccine series is very important to ensure protection against cervical cancer and other HPV-related disease.**

RECOMMENDATIONS

- **All 11 or 12 year olds should receive 3 doses of HPV vaccine to protect against HPV-related disease.**
- **All girls 11 or 12 years old should get 3 doses of HPV vaccine to protect against cervical cancer.** Girls and young women ages 13-26 should get all 3 doses of an HPV vaccine if they have not yet received all doses. Both brands of vaccine are highly effective for preventing cervical cancer and precancer caused by HPV types 16 and 18. Gardasil also protects against anal cancer and genital warts.
- **All boys 11 or 12 years old should get 3 doses of quadrivalent HPV vaccine (Gardasil) to protect against genital warts and anal cancer.** Boys and young ages 13-21 years, who did not get any or all of the three recommended doses when they were younger, should also get the HPV vaccine series. MSM and immunocompromised males should receive the vaccine through age 26 years, if they did not start or complete the vaccine series when they were younger.

POSSIBLE SIDE EFFECTS

Pain, headache, redness or swelling at the injection site are the most commonly reported side effects.

CONTRAINDICATIONS

- HPV vaccines are not recommended for use in pregnancy. If a patient is found to be pregnant after initiating the vaccination series, the remainder of the 3-dose series should be delayed until completion of pregnancy. However, if a vaccine dose has been administered during pregnancy, no intervention is needed. Clinicians should report exposure to Gardasil during pregnancy to Merck at 800-986-8999, and exposure to Cervarix during pregnancy to GlaxoSmithKline at 888-452-9622.
- HPV vaccines are contraindicated for persons with a history of immediate hypersensitivity to any vaccine component. Gardasil is contraindicated for persons with a history of immediate hypersensitivity to yeast. Prefilled syringes of Cervarix have latex in the rubber stopper and should not be used in persons with anaphylactic latex.

NOTES

- HPV vaccines are administered in a 3-dose schedule. The second dose should be administered 1 to 2 months after the first dose, and the third dose should be administered 6 months after the first dose. There is no maximum interval between doses. If the HPV vaccine schedule is interrupted, the vaccine series does not need to be restarted.
- Whenever feasible, the same brand of HPV vaccine should be used for the entire vaccination series. However, if the vaccine provider does not know which brand of vaccine was previously administered or have it available, either brand of HPV vaccine can be used to complete the series.
- Individuals will get the greatest benefit from the vaccine if it is administered before they have initiated *any* type of sexual activity with another person.
- Studies demonstrate that the risk for HPV infection is high immediately following sexual debut. It is also important to note that 1 in 5 women who have only had one lifetime sex partner have been infected with a high-risk HPV type.
- Vaccination is recommended for patients with HPV-related disease and/or apparent HPV infection because the vaccine can offer protection against infection with HPV vaccine types not already acquired. However, vaccination will not have a therapeutic effect on existing HPV infection or HPV-related disease.
- HPV vaccine can be administered at the same time as other adolescent vaccines.
- Over 80 million doses of the HPV vaccine have been distributed in the USA with no other significant side effects identified.