Inviting the Elephant into the Living Room

An Armchair Discussion about HPV Vaccine Communications
Kirk Forbes, MBA

Advocate and Author of
Love, Kristen: One young woman's courageous battle against cancer

Co-Founder, Kristen Forbes EVE (Educate & Screen, Vaccinate, Eradicate) Foundation
Michael Moore, MD
Associate Professor, Division Chief, Head and Neck Surgery, Indiana University
Board Member, Head and Neck Cancer Alliance
Member, National HPV Vaccination Roundtable
Rebecca B. Perkins
MD, MSc, FACOG
Associate Professor of
Obstetrics and Gynecology
Boston University School
of Medicine
Boston Medical Center
Gregory Zimet, PhD, HSPP
Professor, Pediatrics and Clinical Psychology
Adolescent Medicine, Department of Pediatrics, Indiana University School of Medicine
We may discuss the use of vaccines in a manner not approved by the Food and Drug Administration (FDA), but that is in accordance with Advisory Committee on Immunization Practices (ACIP) recommendations.
"How many women and men are being affected by HPV cancers in the U.S.?"
Every year in the United States, 27,000 people are diagnosed with a cancer caused by HPV. That’s one case every 20 minutes.
New Cancers Caused by HPV per Year
United States 2006-2010

Women (n = 17,600)
- Cervix n=10,400 (59%)
- Vulva n=2,200 (13%)
- Anus n=2,600 (15%)
- Vagina n=600 (3%)
- Oropharynx n=1,800 (10%)

Men (n = 9,300)
- Oropharynx n=7,200 (77%)
- Penis n=700 (8%)
- Anus n=1,400 (15%)

CDC, United States Cancer Statistics (USCS), 2006-2010
“IT NEVER OCCURRED TO ME THAT INVASIVE CERVICAL CANCER WOULD BE FOUND IN A FORMER PATIENT OF MINE AT SUCH A YOUNG AGE.”
Love, Kristen

One young woman's courageous battle against cancer
“I’m not just preventing HPV cancers in my female patients, I’m also preventing invasive testing and treatment.”
HPV-Associated Cervical Cancer Incidence Rates by State, United States, 2006-2010

10,000+ Cases and 4,000+ Deaths Every Year
Cervical Precancer in U.S. Females

• 1.4M new cases of low grade cervical dysplasia
• 330K new cases of high grade cervical dysplasia
"I’m preventing devastating cancers caused by HPV infection in my male patients."
Cancer Cases Most Likely Caused by HPV

The graph shows the average number of cancer cases per year attributable to HPV for different sites. The sites include:
- Anus
- Oropharynx (Male)
- Penis
- Anus (Female)
- Oropharynx (Female)
- Cervix
- Vagina
- Vulva

The high number of cases in the oropharynx (both male and female) and the cervix are indicative of the role of HPV in these cancers.
Anatomy of the oropharynx
INCIDENCE OF HPV-RELATED OROPHARYNGEAL CANCER HAS INCREASED BY 225% OVER THE PAST 30 YEARS
The new head and neck cancer patient

**Classic Patient**
- Older (57yrs)
- Heavy EtOH/tobacco
- Dysphagia
- Later T stage

**HPV Patient**
- Younger (53yrs)
- Lack of EtOH/tobacco
- Painless neck mass
- Early T stage

Deschler, et al, 2014
"I’m shocked that we have a vaccine that prevents cancer and there aren’t lines around the block to get it."

SOMEONE YOU LOVE
THE HPV EPIDEMIC

this film could save your life or someone you love
"I find it very helpful to know how well HPV vaccination works and how long it should last."
HPV Vaccine Impact on HPV Prevalence

2003-2006
2007-2010

56% decline

44% decline
64% decline
HPV Vaccine Impact on Precancerous Lesions

- 1,662 patients aged <27 years presenting to colposcopy clinic 2007-2014
- Vaccinated women had:
  - 53% lower odds of presenting with high-grade cytology
  - 36% lower odds of presenting with cervical intraepithelial neoplasia 2 or 3 or worse
Expected Duration of Protection

• Recombinant L1 capsid proteins that form “virus-like” particles (VLP)
• Same vaccine technology and adjuvant as Hepatitis B vaccine
No indication for oropharyngeal cancer?

• Due to long latent period before cancer development, direct study to prove efficacy in preventing oropharyngeal cancer is unlikely
“I was surprised to learn that parents value HPV vaccine as much as other adolescent vaccines.”
Don’t anticipate opposition

• It is important for providers to NOT anticipate opposition to HPV vaccination
• Parents value HPV vaccine as much as they value other adolescent platform vaccines
How Parents Feel

<table>
<thead>
<tr>
<th>Condition</th>
<th>Median Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meningitis</td>
<td>9.4</td>
</tr>
<tr>
<td>Hepatitis</td>
<td>9.5</td>
</tr>
<tr>
<td>Pertussis</td>
<td>9.5</td>
</tr>
<tr>
<td>Influenza</td>
<td>9.3</td>
</tr>
<tr>
<td>HPV</td>
<td>9.3</td>
</tr>
<tr>
<td>Adolescent vaccines</td>
<td>9.2</td>
</tr>
</tbody>
</table>
How Providers Think Parents Feel

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Parent</th>
<th>Provider's estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meningitis</td>
<td>9.4</td>
<td>9.2</td>
</tr>
<tr>
<td>Hepatitis</td>
<td>9.5</td>
<td>9.2</td>
</tr>
<tr>
<td>Pertussis</td>
<td>9.5</td>
<td>9.3</td>
</tr>
<tr>
<td>Influenza</td>
<td>9.3</td>
<td></td>
</tr>
<tr>
<td>HPV</td>
<td>9.3</td>
<td></td>
</tr>
<tr>
<td>Adolescent vaccines</td>
<td>9.2</td>
<td></td>
</tr>
</tbody>
</table>

Median Values
The Difference

<table>
<thead>
<tr>
<th></th>
<th>Parent</th>
<th>Provider's estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meningitis</td>
<td>9.4</td>
<td>9.2</td>
</tr>
<tr>
<td>Hepatitis</td>
<td>9.5</td>
<td>9.2</td>
</tr>
<tr>
<td>Pertussis</td>
<td>9.5</td>
<td>9.3</td>
</tr>
<tr>
<td>Influenza</td>
<td>9.3</td>
<td>7.0</td>
</tr>
<tr>
<td>HPV</td>
<td>9.3</td>
<td>7.8</td>
</tr>
<tr>
<td>Adolescent vaccines</td>
<td>9.2</td>
<td>7.8</td>
</tr>
</tbody>
</table>

Median Values

- Meningitis: 9.4
- Hepatitis: 9.5
- Pertussis: 9.5
- Influenza: 9.3
- HPV: 9.3
- Adolescent vaccines: 9.2
The perceived and real concerns of parents influence how the provider recommends and administers HPV vaccine.
"I thought I was making a strong recommendation, but patients were leaving unvaccinated against HPV cancers."
Resistance Doesn’t Mean Refusal

- Interpret questions as a request for reassurance and information

- For HPV vaccine-hesitant parents, it is important to remain engaged with them and to ask questions before giving answers
A word on risk profiling: *Don’t do it*

80% of people will be exposed to HPV
You can’t predict who or when
"WHEN I RECOMMEND HPV VACCINE IN THE SAME WAY AND ON THE SAME DAY AS OTHER VACCINES, PARENTS RESPOND WITH ACCEPTANCE."
Make an Effective Recommendation

• **Same way: Effective recommendations group all of the adolescent vaccines**
  Recommend HPV vaccination the *same way* you recommend Tdap & meningococcal vaccines.

• **Same day: Recommend HPV vaccine *today***
  Recommend HPV vaccination the *same day* you recommend Tdap & meningococcal vaccines.

Unpublished CDC data, 2013.
Preteen Vaccines

Tdap
HPV
MenACWY
Now that Sophia is 11, she is due for three vaccines. These will help protect her from meningitis, HPV cancers, and pertussis. We’ll give those shots at the end of the visit.
HPV Vaccine Recommendation

Girls & Boys can start HPV vaccination at age 9

Preteens should finish HPV vaccine series by 13th birthday

Plus girls 13-26 years old who haven’t started or finished HPV vaccine series

Plus boys 13-21 years old who haven’t started or finished HPV vaccine series
HPV Vaccine Conversations: Call to Action

1) Strong, bundled recommendation to all parents of girls and boys age 11–12
2) Use cervical cancer screening to talk to moms about HPV vaccines for their kids
3) Reinforce the message that HPV vaccine IS cancer prevention, for girls AND boys
“WHAT SHOULD I SAY TO PARENTS WHO RESIST OR BRING UP SAFETY CONCERNS?”
When should the bike helmet go on?

A

B

C
HPV Can Be Transmitted Without "Having Sex"

- HPV has been detected in women prior to first vaginal sex. The percentage ranges from 9 to 46%, depending on the study.
- 70% of these women reported non-coital behaviors that may in part explain genital transmission.
“ALL THREE VACCINES ARE EQUALLY AND STRONGLY RECOMMENDED BY THE CDC, AND BY PEDIATRIC, ADOLESCENT, AND FAMILY PHYSICIAN GROUPS.

SCHOOL ENTRY REQUIREMENTS DON’T ALWAYS REFLECT THE MOST CURRENT MEDICAL RECOMMENDATIONS FOR YOUR CHILD’S HEALTH”
HPV Vaccination *is* safe.

All aspects of living entail risk, but vaccinating against HPV is much safer than making the decision to not vaccinate.
No Increased Risk Of:

- Allergic reactions, anaphylaxis, Guillain–Barré Syndrome, stroke, blood clots, appendicitis, or seizures (than unvaccinated or who received other vaccines; 2011)
- Blood clots or AEs related to the immune & CNS (2013; ~1M girls)
- Venous thromboembolism or blood clots (2014; >1M women)
- Autoimmune disorders (2012, 2014- 2 studies)
- Multiple sclerosis or demyelinating diseases (2015)

WE MADE SOME SIMPLE CHANGES TO OUR OFFICE PRACTICES TO RAISE HPV VACCINATION RATES.
EVERYONE in the office/clinic/practice needs to be saying the same thing
• **Encourage convenient same-day vaccination**
  
  “Since Pat is 11 now, he should have 3 vaccines. They will help protect him from meningitis, the HPV cancers, and from tetanus, diphtheria, & pertussis. Do you have any questions for me?”

• **If a parents hesitates**, the MA/nurse should say
  
  “Our practice is so dedicated to cancer prevention that I’m sure the doctor will want to talk with you about your concerns.”
Reminders & Recall

• Most parents don’t know when they need to bring their child back for additional doses or how many doses are in the series

• Recent studies showed that doctors tend to think the parent is responsible for knowing that information, while parents believe the doctor’s office is going to let them know
Dear Mrs. Jones,

I am pleased to inform you that your recent Pap smear was normal and your test for high risk HPV (the virus that causes most cervical cancers) was negative. If you have any questions about your Pap or HPV test, please call and leave a message with the nurse.

As your medical provider, I want to make sure you know that there are safe and effective vaccines available for children, adolescents, and young adults to protect them against HPV. HPV vaccines are recommended for all girls and boys ages 11-12 to prevent cancers caused by HPV. If you have children 13-26 who haven’t started or finished the HPV vaccine series, they should do so as soon as possible.

If you think you have any members of your family or friends that need to be vaccinated against HPV, please have them call our office to schedule an appointment.

Yours sincerely,
Screen Someone You Love for Staff

"It's the best film on this subject in existence. A perfect mix of pathos, science, and medicine with a clear call to action."

- Dr. Paul Offit
Chief of the Division of Infectious Diseases - Children's Hospital of Philadelphia

"Remarkable Achievement!"

- LJ Tan, Immunization Action Coalition
“PREVENTING CANCER BY NOT SMOKING, WEARING SUNSCREEN, AND EATING BROCCOLI REQUIRES A LIFETIME OF ACTION. BUT HPV VACCINATION IS JUST THREE SHOTS.”
HPV Vaccination Roundtable

• Hosted by The American Cancer Society
• Representatives from over 65 member organizations
• Developed seven pilot projects
• Encourages collaboration across specialties
National Cancer Institute HPV Project

• Funded 18 NCI-Designated Cancers
• Another 18+ took on project without the additional NCI funding
• Funding has ended, cancer centers in the collaborative continue to meet every 6 months
Comprehensive Cancer Control Project

• Funded 11 states, cancer + immunization
• 1.5 day reverse site visit = Action Plan
### WHAT CAN WE DO?
What specific partners can bring to the table

#### HEALTH DEPARTMENTS
1. Work with faith-based health initiatives to have HPV vax info included
2. Ask pharmacies to hang HPV vax posters next to other vax info
3. Offer in-service or feedback visit to every pediatric/FP practice in local area
4. State Medicaid office sends info to parents of 9-12 year olds
5. Ask largest employers in area to send HPV vaccine and cancer screening info to employees

#### CANCER CENTERS
1. Provide speakers for provider groups/grand rounds CME events on why HPV vaccination is an urgent priority
2. Sponsor a showing of “Someone You Love” for pediatricians and family physicians (offer CME credit)
3. Write a letter to all family physicians and pediatricians on the urgency of HPV vaccinations
4. Reach out to health system executives to encourage HPV vaccination initiatives

#### CANCER PROGRAMS
1. Include HPV vax as a priority & include in CCC State plan
2. Analyze and share local data on HPV-related cancers
3. Share survivor/caregiver stories
4. Work with partners to promote HPV vaccination at other cancer events
5. Ask local ACS chapter to co-sponsor events and/or co-brand materials/PSAs

#### COMMS/PR/MARKETING
1. Pitch local radio stations to run CDC Radio PSAs
   - Local TV stations to run CDC Video PSAs
   - Local movie theaters to run of CDC Video PSAs
   - Local airports to post PSA-style ads
2. Work with local university Greek system to take on HPV vaccination as their cause
3. Encourage local book clubs to skip a book one month and watch Someone You Love instead

#### MEDICAL PRACTICES
1. Every clinician knows their individual HPV vaccination rates
2. Open scheduling up to 6 months in advance (like dentists do)
3. Print registry of all 13 year olds

#### OTHER PROVIDERS
1. Pediatric dentists send info to parents of 9-12 year old patients
2. Family dentists send info to all families about vaccination and oral cancer screening
3. Distribute a letter from cancer center director about the urgency of HPV vaccination

#### MEDICAL SOCIETIES
1. Include cancer specialists in conferences as speakers on why HPV vaccination is urgent
2. Distribute a letter from cancer center director about the urgency of HPV vaccination

#### HEALTH SYSTEMS/PAYERS
1. For Cervical Cancer Awareness Month in January, send postcards to moms with reminders for cervical cancer screening for themselves and HPV vaccination
Questions for our panelists?