Estimates suggest that the HPV vaccine programme will lead to the prevention of over 64,000 cervical cancers and nearly 50,000 non-cervical cancers by 2058.

From September this year, boys in school year 8 will be offered the free Human Papilloma Virus (HPV) vaccine for the first time.

Worldwide, about 5% of all cancers are linked to the HPV virus. This includes cervical, penile, anal and genital cancers and some cancers of the head and neck – all of which the vaccine helps to protect against. Cervical cancer is currently the most common cancer in women under 35, killing around 850 women each year. HPV is thought to be responsible for over 99% of cervical cancers, as well as 90% of anal, about 70% of vaginal and vulvar cancers and more than 60% of penile cancers.

Modelling produced by the University of Warwick estimates that by 2058 in the UK the HPV vaccine currently being used may have prevented up to 64,138 HPV-related cervical cancers and 49,649 other HPV-related cancers. This would be 50 years after the introduction of the HPV vaccination programme, when people who were vaccinated as teenagers have reached the age groups that would typically be affected by HPV related cancers.
Head of Immunisation at PHE
Dr Mary Ramsay said

“I encourage all parents of eligible boys and girls to make sure they take up the offer for this potentially life-saving vaccine.

It’s important not to delay vaccination, as the vaccine may be less effective as adolescents get older.”

“This universal programme offers us the opportunity to make HPV-related diseases a thing of the past and build on the success of the girls’ programme.

Offering the vaccine to boys will not only protect them but will also prevent more cases of HPV related cancers in girls and reduce the overall burden of these cancers in both men and women in the future.”

The vaccine will be offered to boys, in addition to girls, as part of the routine school aged schedule in England from 1 September 2019. This follows the government’s announcement in July 2018 to include HPV vaccination of boys, which was based on the advice of the Joint Committee of Vaccination and Immunisation (JCVI).

Every vaccination offered and received contributes to a powerful global public health movement – a movement that seeks to eradicate disease – every HPV vaccination given, contributes to a global cancer reduction, that’s wonderful!” said Joanne Yarwood at the recent NIN2019 conference.

With the introduction of the universal HPV programme it’s a good time to look back to 2008 and congratulate all those involved in the national programme on the tremendous success that we have achieved together. It has been a massive effort involving school vaccination teams, schools, teachers and last but certainly not least those girls and their parents who agreed to the important protection this vaccine has offered. It is a wonderful example of organisations and people working together from government to individuals in order to help protect against cancer.
We should also remember that not only does vaccination protect the individual but those benefits spread to others through herd protection. Immunisation is part of a national and global programme that has successfully seen the reduction in infectious diseases and whose benefits cannot be underestimated. As we look forward to the start of the universal HPV programme in England it’s worth once again remembering the value of vaccines in our efforts to improve the well being of our population.

**New vaccine coverage data collection tool**

As the start of the universal HPV Vaccination Programme approaches, the Vaccine Coverage Team at Public Health England have created a new optional school-level vaccine coverage data collection tool to assist with local data collection. The 2019/20 school-based collection tool has been circulated to Local Screening and Immunisation Teams. The tool may be used to collect school-level data by gender and aggregates the data for national reporting to the Local Authority level. The aggregated data can be copied into the ImmForm annual survey. Local Areas that choose to use the tool can estimate real-time coverage throughout the academic year. For more information on the tool, please see the User Guide at [weblink 1](#), and Tutorial Videos with [weblink 2](#). To request a copy of the tool please contact adolescent@phe.gov.uk.

**Attitudinal Surveys and leaflet testing**

The young people’s immunisation programme in England is supported by an annual cross-sectional interview survey exploring parent and teenager attitudes. The results of the surveys inform the development of the programme and provides valuable feedback on public-facing communications.

The 2018 survey showed that overwhelming majority of young people (95%) felt that it was important to get vaccinated. Those who had learnt about vaccinations at school were more likely to believe it was very important to get vaccinated compared to those who had not (77% cf. 58%). Only 9% of parents and 6% of young people had seen or heard anything that would make them concerned about having a vaccine.

The survey confirmed the important role that health professionals play in providing immunisation advice. Over 90% of both parents and young people trust immunisation advice provided by health professionals and the NHS. Social media was the least trusted source of immunisation information.
Specific questions about the extension of the HPV immunisation programme to include boys showed that genital cancers and cancers of the head and neck perceived as equally serious as cervical cancer and meningitis. Seventy percent of parents stated that they would take up the offer of the HPV vaccine for their sons, 14% would not take up the offer, and a further 16% were unsure. This was prior to the release of any detailed information about the programme so it is expected that the number of parents who are unsure will reduce.

A subgroup of parents and young people agreed to take part in more detailed interviews on the content, layout and logos of the new HPV leaflet. Two rounds of testing took place and the leaflets and other materials were revised based on the feedback received. Following the first round of testing, we carried out photoshoots in a couple of schools to get contemporary pictures of young people in the relevant age groups in a school environment. The feedback from the testing was generally very positive and it was felt that the leaflet, including links to more detailed information for those who wanted it, provided enough information to make a decision.

We would like to extend a very special thank-you to Julie Thornton, immunisation lead, Essex, Chase school and Thorpe hall schools, to the two school teams and head teachers who permitted us to undertake the photoshoots on their premises. The wonderful children who contributed to our new image stock library for the teenage and HPV programmes are the focus of our new campaign. These young people embraced the photographic brief and worked so well with our photographers and have made a very important contribution to this public health intervention. We are looking forward to showcasing the portfolio to the two schools at the start of the Autumn term.
What difference has the HPV vaccine made so far?
Over 80 million people have received the vaccine worldwide.
In time it is expected that the vaccine will save hundreds of lives every year in the UK. A recent Scottish study has already shown a 71% reduction in pre-cancerous cervical disease in young women. Since the start of the vaccination programme in the UK there has been a big decline in the number of young people with genital warts.

To give you the best protection, the vaccine should be given before you become sexually active.
If you are sexually active you should still have the vaccine.

Having the HPV vaccine
The vaccine is given in your arm and you need two doses to be fully protected.
The first injection is given in year 8 and the second one usually 6 to 12 months later. You will be informed when you are due the second dose.

Don’t forget your HPV vaccination!
Protecting you from HPV cancers
My personal vaccination record card

Your guide to the HPV vaccination leaflet
Product code: 1012473A
Weblink 4

New Arm against Cancer resources
The new Arm against Cancer campaign materials for the HPV universal programme are ready and stocks are already being dispatched to teams, thank-you for ordering so promptly.

For anyone who has not yet ordered their stock please visit the DH health and social care order line and search for Arm against Cancer at weblink 3.

HPV universal programme record card
Product code: 3902657C
Weblink 5
Human papillomavirus (HPV) vaccination

FACTSHEET FOR HEALTH PROFESSIONALS

The HPV vaccine is not new

The HPV vaccine has been in the UK since 2008 and more than 10 million doses have been given. More than 80 million people have been vaccinated worldwide.

Most young people are being vaccinated

Nearly 90% of parents choose to accept the HPV vaccine for their child. Most women aged 15 to 24 years in England have now been given the vaccine and all eligible children from 2013 most boys will now given the vaccine too.

Girls and boys should have the vaccine at the recommended ages

Vaccination at a younger age is more effective at preventing HPV infection. So the best time to be vaccinated is between 12 and 14 years.

Safe sex wont provide enough protection

HPV can spread by any sexual contact. Condoms do not completely prevent the risk of infection.

HPV vaccine works

In England, we have already seen a significant decrease in infections with the two main HPV types that cause cancer (types 16 and 18). Scottish researchers have also shown a decline – probably due to cross-protection – in these other HPV types linked to cancer (types 31, 33 and 45).

The number of precancerous lesions in the cervix has already fallen by over 50% with the programme in Australia, Denmark and Scotland.

Are people reporting more side effects than expected after HPV?

To date, the number of reports to the Medicines and Healthcare Products Regulatory Agency (MHRA) of suspected side effects for HPV vaccines is not unusual. The overwhelming majority relate to mild conditions commonly seen when you vaccinate teenagers (e.g. injection site reactions, rashes, mild allergic events, nausea, dizziness, fatigue, immediate rashes due to needle phobia, etc.).

The UK programme has already contributed to preventing future deaths from cancer. We expect it to eventually prevent hundreds of cancer deaths every year.

Don’t forget to have your HPV vaccination poster

Product code: 3902657B

Weblink 7

HPV Consent form

Weblink 8

Subscribe to Vaccine Update here. Order immunisation publications here.

For vaccine ordering and supply enquiries, email: vaccinesupply@phe.gov.uk
Resources for social media

We have produced a toolkit of social media resources for you to use to promote the vaccination programmes in:

- below your signature for emails
- in your twitter account – banners

**Infographics to use in:**

- Facebook
- Instagram
- Twitter
- Websites
- Whatsapp

**And also on:**

- Whatsapp
- Websites

Please download them at [weblink 9](#)

Instructions for use:

- download them and save them to your drive.
- where applicable insert them in tweets, Whatsapp, etc.

Subscribe to Vaccine Update [here](#). Order immunisation publications [here](#). For vaccine ordering and supply enquiries, email: vaccinesupply@phe.gov.uk
The routine childhood immunisation schedule Autumn 2019 is available to download at weblink 10.
The Green Book chapter on human papilloma virus (HPV) has been published!

The Green Book HPV chapter has been comprehensively updated in preparation for the introduction of the HPV universal programme. This will be introduced in the coming 2019/20 academic year which for the first time will include the vaccination of boys, in addition to girls, as part of routine adolescent HPV programme. The chapter has also been updated to include guidance on the HPV vaccination programme for men who have sex with men (MSM). Since the last update which was in June 2014, which included the reduction of the three dose to two dose schedule, there has been a lot of scientific evidence published, especially on the impact of HPV vaccination. The sections on HPV disease, epidemiology and vaccination has been updated to reflect this. In addition, the chapter now includes reference to the 9 valent vaccine although this is not currently being used in the national programme. See weblink 13.

The European Society of Gynecologic Oncology (ESGO) supports vaccination programs for children and young adolescents, with a catch-up program for young adults, if feasible, and also vaccination on an individual basis. ‘Gender-neutral vaccination improves the protection of women and men, while it maximises benefits from vaccination at lower coverage. Individuals with a history of infection or previous treatment of HPV-related disease may also get a benefit from vaccination.’

Training slide set and guidance

This guidance provides information for healthcare practitioners about HPV universal programme eligibility, scheduling and vaccine administration for the adolescent programme.

Please download at weblink 14.

There is a slide set to accompany the guidance.

The purpose of this guidance is:

- to support healthcare professionals involved in advising on and delivering the HPV vaccination programme.
- to raise awareness of the current epidemiology of HPV
- to provide guidance on the vaccination programme extension to include boys.
- to describe the programme details including administration of the vaccine, eligibility, recommended dosage and schedule, contraindications, precautions and potential adverse reactions.
- to raise awareness of the impact of the HPV vaccination programme

Please download at weblink 15.

References


www.ejcancer.com/article/S0959-8049(19)30288-6/fulltext
Vaccine supply (centrally supplied)

Human papillomavirus (HPV) vaccine Gardasil

Additional vaccine stock for the extension to boys will be available to order from August, in preparation for the September start.

Human papillomavirus (HPV) vaccine: PGD template

Patient group direction (PGD) template to support the national human papillomavirus (HPV) vaccination programme has been published at weblink 16.

This patient group direction (PGD) template supports the administration of HPV vaccine to individuals from 12 years of age or from school year 8 in accordance with the national immunisation programme.

HPV PGD V03.00 is valid from 1 May 2019 to 31 August 2021.

Practitioners must not use this PGD template until it has been authorised in Section 2. This is a legal requirement see Human Medicines Regulations 2012. Practitioners should follow local policy/procedures to access authorised PGD documents.

This PGD template should be used with reference to current national guidance, the Green Book, and Summary of Product Characteristics.

Other documents relating to the universal human papilloma virus vaccination programme can be found on the Gov.UK website in the HPV vaccination programme collection.
Web links

weblink 2  https://publichealthengland-immunisation.app.box.com/s/n2oqm0fize4zpi9r10aoayes6dv6llzp
weblink 9  https://publichealthengland-immunisation.app.box.com/s/mgxur9qup2kia0n6ginwo7m9nblaf28u
weblink 12 https://www.gov.uk/government/publications/vaccination-timeline
weblink 15 https://publichealthengland-immunisation.box.com/s/mua76jmrtbjw18r6asl352bfpoce4g35