Recommendations and information for your patients **HPV Vaccine**

On June 8, 2006, the Food and Drug Administration (FDA) approved Gardasil[®], the human papillomavirus (HPV) vaccine. HPV is a virus that can cause certain cancers and diseases in both men and women. In the United States, approximately one in nine males has oral infections from the cancer-causing HPV, and males are six times more likely to carry a high-risk strain than females.¹

According to the Centers for Disease Control and Prevention (CDC), approximately 79 million Americans in their late teens and early 20s are infected with HPV. In both males and females, the virus can present itself as genital warts. The virus may lead to cervical, vaginal, or vulvar cancers in females, while oral and anal cancers are more prevalent in males.¹

HPV is a common virus that can be spread from one person to another through anal, vaginal, or oral sex, and can also be spread through other close skin-to-skin touching with those who are sexually active.

What are the age recommendations for the HPV vaccine?

Adolescents ages 11 - 12 should be vaccinated to help protect them against the virus before they become sexually active. If they are not vaccinated at the suggested age range and are sexually active, females ages 13 - 26 and males ages 13 – 21 should still receive the vaccine. The age for males is extended to 26 for those who are gay or transgender. Those who did not receive the three-dose vaccination should follow these age guidelines as well.¹

Should the HPV vaccine be given as a two-dose or three-dose series?

- If the child is vaccinated before their 15th birthday, a two-dose series is recommended. The second dose should be given six months after the first.
- If the child is not vaccinated before their 15th birthday, a three-dose series on a six-month schedule is recommended. The second dose should be given one to two months after the first, and the third dose should be given six months after the first.1



How safe is the HPV vaccine?

The FDA and CDC closely monitor the safety of all vaccines through the Vaccine Adverse Event Reporting System (VAERS). VAERS reports are regularly reviewed for safety concerns or trends, and for all possible side effects. Based on the information available from the FDA and CDC, Gardasil continues to be safe and effective. The benefits of the vaccine outweigh the risks.²

Considerations when discussing the HPV vaccine with parents

- Parents trust what their doctors recommend. When other adolescent vaccines are scheduled, suggest the HPV vaccination as though it were a scheduled vaccination during their scheduled visit.
- · Continue to maintain positive doctor-patient relationships to help with challenging immunization conversations.
- Always be prepared to answer questions with informative and current medical facts concerning the HPV vaccine.

For additional information and dosing schedules, please view the U.S. Department of Health and Human Services' CDC 2018 Recommended Childhood and Adolescent Immunization Schedule on our website at www.amerihealthcaritasdc.com > Providers > Resources > EPSDT.

- ¹ Centers for Disease Control and Prevention, "Genital HPV Infection -Fact Sheet," www.cdc.gov/std/hpv/stdfact-hpv.htm.
- ^{2.} U.S. Food and Drug Administration, "Safety and Availability (Biologics)," www.fda.gov/biologicsbloodvaccines/safetyavailability/ vaccinesafety/ucm179549.htm.

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