



**Cervical cancer prevention and  
beyond: Optimizing HPV vaccine  
uptake in all eligible individuals**



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# A conversation between:



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# Agenda

**Going beyond cervical cancer: Other cancers and diseases related to HPV**

**Recommended HPV vaccination schedules and approved indications**

**The role of primary care providers in education and overcoming vaccine hesitancy**

# Going beyond cervical cancer: Other cancers and diseases related to HPV

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# The burden of HPV

## HPV causes a range of diseases

Estimated annual incidence of new HPV-related cancers worldwide<sup>1,2</sup>

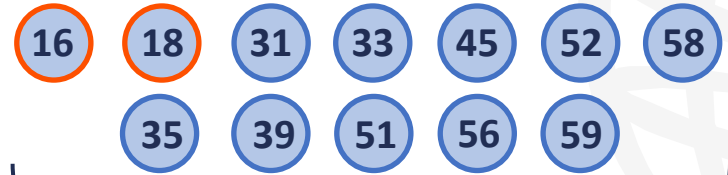


4.5% of all cancers<sup>†</sup>

HPV types causing most HPV-related disease<sup>3,4</sup>



Anogenital warts or recurrent respiratory papillomatosis<sup>3,4</sup>



Cancers of the cervix, vulva, vagina, penis, anus and oropharynx<sup>3,4</sup>

\*Data from 2018; †Data from 2012. HPV, human papillomavirus.

1. de Martel, C et al. *Lancet Glob Health*. 2020;8:e180–90; 2. de Martel, C et al. *Int J Cancer*. 2017;141:664–70; 3. National Cancer Institute. HPV and Cancer.

Available at: [www.cancer.gov/about-cancer/causes-prevention/risk/infectious-agents/hpv-and-cancer](http://www.cancer.gov/about-cancer/causes-prevention/risk/infectious-agents/hpv-and-cancer) (accessed 14 January 2025);

4. World Health Organization. Human papillomavirus vaccines: WHO position paper (2022 update). Available at:

[www.who.int/publications/i/item/who-wer9750-645-672](http://www.who.int/publications/i/item/who-wer9750-645-672) (accessed 14 January 2025).

# Recommended HPV vaccination schedules and approved indications

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# Effectiveness and specificity of HPV vaccines

HPV vaccines are among the **most effective** prophylactic vaccines available<sup>1</sup>

Vaccines offer sterilizing immunity against HPV types in vaccine for **up to 14 years**<sup>1,2</sup>

Estimates suggest HPV vaccination could prevent more than **90% of HPV-related cancers** developing<sup>3</sup>

Anogenital wart diagnoses decreased

- **67% in girls**
- **48% in boys**

aged 15–19 years after 5–8 years of HPV vaccination<sup>4</sup>

HPV types targeted by HPV vaccines<sup>5</sup>

6

11

16

18

Bivalent HPV vaccine

31

33

45

52

58

Quadrivalent HPV vaccine

Nonavalent HPV vaccine

**Vaccine availability varies by country; only the nonavalent vaccine is available in high-income countries/regions such as Australia, Canada, Europe and the USA**

HPV, human papillomavirus.

1. Markowitz LE, Schiller JT. *J Infect Dis.* 2021;224(Suppl. 2):S367–78; 2. Kjaer, SK et al. *EClinicalMedicine.* 2020 Jun;23:1004013; 3. Centers for Disease Control. Clinical overview of HPV. Available at: [www.cdc.gov/hpv/hcp/clinical-overview](http://www.cdc.gov/hpv/hcp/clinical-overview) (accessed 14 January 2025); 4. Drolet M, et al. *Lancet.* 2019;394:497–509; 5. European Commission. Proposal for a council recommendation on vaccine-preventable cancers. Available at: [https://health.ec.europa.eu/system/files/2024-01/com\\_2024\\_45\\_1\\_act\\_en.pdf](https://health.ec.europa.eu/system/files/2024-01/com_2024_45_1_act_en.pdf) (accessed 14 January 2025).



# The role of primary care providers in education and overcoming vaccine hesitancy

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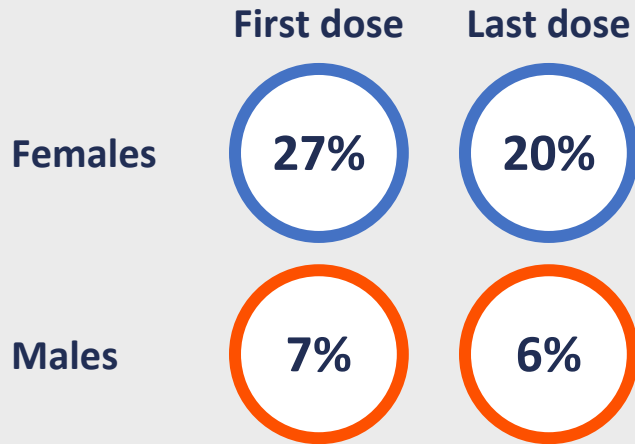
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# Global HPV vaccine coverage

In 2022, 64% of countries had national HPV vaccination programmes for girls, 24% for boys<sup>1</sup>

## WHO global HPV vaccine coverage, 2023<sup>2</sup>



Wide range of vaccine coverage across countries, ranging from 0 to 100% coverage<sup>2</sup>

Affordability remains a key barrier to vaccination in many countries<sup>3</sup>

Globally, HPV vaccine coverage is lower in males than females<sup>2</sup>

HPV, human papillomavirus; WHO, World Health Organization.

1. World Health Organization. Human papillomavirus vaccines: WHO position paper (2022 update). Available at: [www.who.int/publications/i/item/who-wer9750-645-672](https://www.who.int/publications/i/item/who-wer9750-645-672) (accessed 14 January 2025);
2. World Health Organization. HPV vaccination coverage. Available at: [https://immunizationdata.who.int/global/wiise-detail-page/human-papillomavirus-\(hpv\)-vaccination-coverage](https://immunizationdata.who.int/global/wiise-detail-page/human-papillomavirus-(hpv)-vaccination-coverage) (accessed 14 January 2025);
3. Spayne J, Hesketh T. *BMJ Open*. 2021;11:e052016.

# Examples of discrepancies in perception between physicians and adult consumers in Canada

39% of unvaccinated women stated that a reason they weren't HPV-vaccinated is that **their doctor had not discussed it with them**<sup>1</sup>

83% of GPs said they **routinely administered or recommended** HPV vaccination to adult patients<sup>2</sup>

55% of unvaccinated women said a recommendation from their doctor would **motivate them to get an HPV vaccination**<sup>1</sup>

GPs believed **cost or lack of private insurance** was the major reason preventing HPV vaccination; **95%** stated it was a major or moderate barrier<sup>2</sup>

Only **20%** of unvaccinated women cited cost or lack of insurance as a barrier to HPV vaccination<sup>1</sup>

**36%** of GPs believed **dislike of needles** was a major or moderate barrier to HPV vaccination<sup>2</sup>

Only **5%** of unvaccinated women cited dislike of needles as a barrier to HPV vaccination<sup>1</sup>