HPV Vaccination: Latest teachings:

A year-long ACIP review of new clinical trial data showed that among girls and boys starting HPV vaccination at ages 9 to 14 years, immunogenicity resulting from the 2-dose regimen was not inferior to, and was sometimes superior to, that seen with the 3-dose regimen.

According to this review, ACIP and the FDA approved the 2-dose series in October 2016 for persons beginning vaccination between their ninth and 15th birthday; the second dose is to be given 6 to 12 months after the first.

Rationale favouring the 2-dose schedule also includes cost saving and cost effectiveness.

ACIP recommends that routine HPV vaccination begin at age 11 or 12 years in both sexes and may begin at age 9 years.

Young women through age 26 years and young men through age 21 years (in some cases, through age 26 years) should receive catch-up vaccinations if they were not adequately vaccinated previously.

ACIP now recommends a 2-dose immunization schedule for persons beginning vaccination before their 15th birthday, with the second dose given 6 to 12 months after the first dose.

Persons who began vaccination with 9vHPV, 4vHPV, or 2vHPV before their 15th birthday and received 2 or 3 doses of any HPV vaccine at the recommended dosing schedule are considered adequately vaccinated.

Persons beginning vaccination on or after their 15th birthday should receive a 3-dose schedule, with the second dose given 1 to 2 months after the first dose, and the third dose given 6 months after the first dose.

Persons who began vaccination with 9vHPV, 4vHPV, or 2vHPV on or after their 15th birthday and received 3 doses of any HPV vaccine at the recommended dosing schedule are considered adequately vaccinated.

Persons who began a vaccination series with 4vHPV or 2vHPV may receive 9vHPV to continue or complete the series.

The series does not need to be restarted if the vaccination schedule is interrupted; age at receipt of the first dose determines the number of recommended doses.

Children with a history of sexual abuse or assault should undergo routine HPV vaccination beginning at age 9 years.

As for all men, men who have sex with men should undergo routine HPV vaccination and should be vaccinated through age 26 years if not adequately vaccinated previously.
Transgender persons should be routinely vaccinated against HPV as for all adolescents, and they should receive vaccination through age 26 years if they were not adequately vaccinated previously.

Girls and women and boys and men 9 through 26 years old with primary or secondary immunocompromising conditions that might lower cell-mediated or humoral immunity (B-lymphocyte antibody deficiencies, T-lymphocyte complete or partial defects, HIV infection, malignant neoplasm, transplantation, autoimmune disease, or immunosuppressive therapy) should be vaccinated with the 3-dose schedule.

Contraindications and precautions, including those associated with pregnancy, are unchanged from previous recommendations.

Clinicians should report adverse events occurring after administration of any vaccine to the Vaccine Adverse Event Reporting System.

Clinical Implications

Updated ACIP recommendations now include a 2-dose schedule for girls and boys who begin the HPV vaccination series at ages 9 through 14 years.

For persons beginning the vaccination series at ages 15 through 26 years, and for immunocompromised persons, ACIP still recommends 3 doses.

Implications for the Healthcare Team: Healthcare providers should keep in mind that children with a history of sexual abuse or assault should undergo routine HPV vaccination beginning at age 9 years.