Mandating HPV for School-Entry: A critical juncture for students’ health

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To mandate or not to mandate...

- What we know
- What we don’t know
- What we can do to find out
What we know...

- Mandatory school-entry immunization laws increase vaccine coverage
- High vaccine coverage rates have decreased the incidence of certain communicable diseases
- Less communicable disease results in decrease morbidity and mortality
Coverage with influenza vaccine and declining death rates

Figure 4. Excess Deaths Attributed to Pneumonia and Influenza over a 50-Year Period in Japan and the United States. The five-year moving average is also shown. The history of the rates of use of vaccine in each country is superimposed (shaded bars). Tick marks represent the beginning of the years indicated.

Reichert, et. al 2001
Hepatitis B coverage (3 doses)—before and after school-entry requirements

**Figure 1**—Hepatitis B vaccination coverage among students, by grade, 1996–1999.

Averhoff, et al. 2004
MMR coverage (2 doses)—before and after school-entry requirements

Averhoff, et al. 2004

What we don’t know…

- What are the *unintended* effects of school-entry immunization laws?
- What are the *unintended* effects specific for HPV immunization laws?
- What do parents really think?
Unintended effects of school-entry immunization laws

- Exclusion, exclusion, exclusion
- Expenses involved with enforcement
- Safety concerns
  - Reassurance that a vaccine is safe
  - Legal liability if adverse event suffered as part of a mandate
Unintended effects of HPV school-entry law

- Exclusion, exclusion, exclusion
  - Unequal, based on gender
  - Possibly unequal, based on income/SES
  - Basis grounded in protecting individual, rather than herd immunity
- Breaching parental/public trust
- Lenient exemption policies undermine objectives of immunization laws
What do parents really think?

- **Unfamiliar with HPV**
  - “I’ve never heard of it. I’ve heard of syphilis, gonorrhea. I’ve heard of genital warts, I’ve heard of herpes. Are any of these considered in the HPV family?”*
  - Information sheet-- changed knowledge, but not acceptability of HPV vaccine**

- **Risk of acquiring HPV**
  - “This is somewhat different vaccine than tetanus and chickenpox... HPV is preventable by not having sex, not being promiscuous.”*

- **Age of HPV vaccine administration**
  - Greater vaccine acceptability at older age groups**

* Olshen, et. al., 2005
** Dempsey, et al. 2006
Parent perceptions differ on HPV vaccine issues

- The vaccine is safe (total 89%)
- The vaccine may cause child to get HPV (total 14%)
- The vaccine may make child more likely to have sex (total 12%)

- Parent does not want child to receive HPV
- Parent wants child to receive HPV

Davis, et. al. 2004
What do parents really think?

- What percentage of those studied would agree to vaccinate their pre-teen daughter?
  - 55%, *increased to 70% after educational intervention* (Davis, 2004)
  - 75% (Constantine & Jerman, in press)
  - 81% (Brabin, 2006)
The RAND-LAUSD HPV Study

- Studying the attitudes, uptake, and barriers
- Recruiting over 1000 parents of 6th and 7th grade girls
- Survey currently being fielded
- Capturing a critical time when the HPV vaccine is just become widely available
- Analysis in the fall