



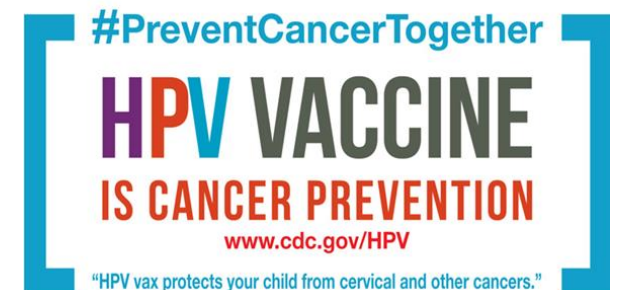
WASHINGTON STATE HPV TASK FORCE

October 20th, 2023



Agenda

1. Housekeeping and Updates
2. Resources and other Notable Materials
3. Project Brainstorming and Feedback
4. Report Out
5. **BREAK**
6. Data Update
7. Presentation: HPV Self Sampling
8. Wrap Up



Housekeeping

- We will be recording this webinar so you can find it and all the resources referenced today on the WithinReach website. You will receive a follow up email with links to the material covered once it is available.
- While the focus is absolutely on HPV vaccination – we are also looking at adolescent immunizations collectively as they are all significantly impacted by pandemic, too narrow a focus on just HPV can create missed opportunities and the actions steps we are going to be discussing can increase rates and protection against many vaccine preventable disease.

Code of Conduct

A friendly reminder that the HPV Taskforce invites all who attend today to help us create a safe, positive experience for everyone. Members and participants agree to support our mission and strengthen HPV prevention efforts in Washington State based on evidence-based guidance from the Advisory Committee on Immunization Practices (ACIP).


If you are subjected to an unacceptable behavior, notice that someone else is being subjected to unacceptable behavior, or have any other concerns, please notify any of the HPV Task Force planning team members as soon as possible. All reports will remain completely confidential.

See that chat message for more details.





Save the Date

- 2024 Meeting Dates:
 - February 2nd, 2024: Task Force (2-hour meeting)
 - May 10th, 2024: Roundtable (4-hour meeting)
 - October 11th, 2024: Task Force (2-hour meeting)
 - Meetings will be virtual
- 

Cancer Action Plan of Washington

- Recently Launched State-Wide Cancer Coalition
- 5-Year Cancer Plan
 - Includes HPV vaccine and HPV-related Cancer priorities
- Next Meeting January 24th, 2024
 - In-Person in Olympia, WA
 - Virtual Option



Task Force Accomplishments



Task Force Accomplishments

- April '23 – State Roundtable with over 90 attendees; 2 virtual task force meetings – Feb./Oct. '23
- Work Groups: Community Outreach & Clinical Interventions
 - Community Engagement – Dear native and Tribal Letter; Oral Health/Dental Provider Letter and Resources (sent to 33,000)
 - Clinical Intervention – Back to School Provider Letter; CME Webinars
 - [Understanding HPV Disparities in Rural Communities and Addressing Vaccine Hesitancy](#)
 - [HPV Vaccine Starts at 9: Why? How? Now! Cancer Prevention Made Easy](#)
- Published Article:
 - [Multi-level quality improvement strategies to optimize HPV vaccination starting at the 9-year well child visit: Success stories from two private pediatric clinics.](#)
 - Pending Second Article
- Quality Improvement Coaching – 25 clinics
 - Collaboration with WACHIP and WCAAP
- HPV Task Force Planning Team Awarded American Cancer Society Health Equity Award
- American Cancer Society Age 9 Champion – Dr. Sherri Zorn

HPV Resource Distribution

5,114 Pieces sent to partners around the state



235 – *Protect Preteen/Teen with Vaccines* - large posters – 18”x24” laminated (60 co-branded)

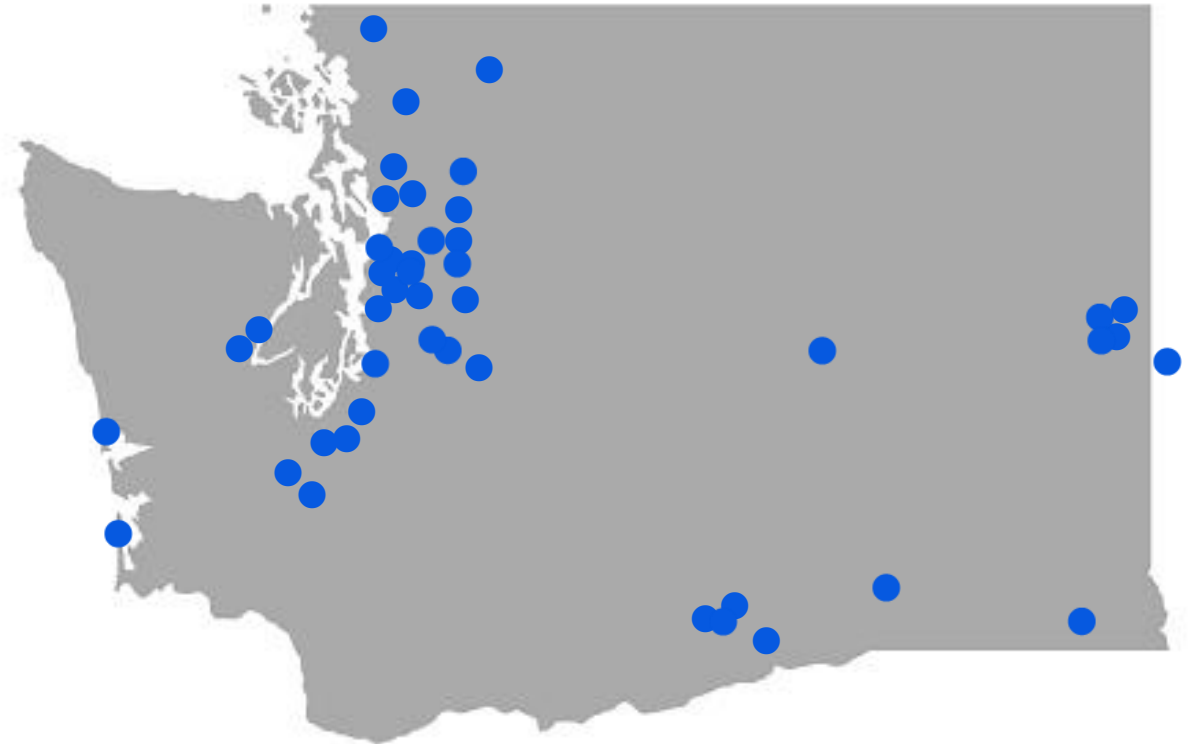
1,716 – *Protect Preteen/Teen with Vaccines* - small posters – 8.5”x11” laminated (423 co-branded)

500 – *Protect Preteen/Teen with Vaccines* - 8.5”x11” flat sheets (co-branded)

1,805 – *Protect Your Child Handout* - 8.5”x11” flat sheets

83 – *Preventing Cancer at the Dentist* - small posters – 8.5”x11” laminated

775 – *Preventing Cancer at the Dentist* - Tri-fold Dental brochures



Washington State HPV Task Force was awarded a grant from the NW HPV Summit, an arm of the National HPV Roundtable. Additional dollars were also secured from the American Cancer Society

Task Force Accomplishments

- Presentations Given: Washington State Public Health Association, National Public Health Information Coalition, Northwest Immunization Conference
- Tabling: WA Immunization Conference
- Resource Creation and Distribution: [Cue Card \(Spanish Translation\)](#); 2 New Languages for Posters: [Korean](#) and [Punjabi](#); What is the Task Force flyer.
- Collaboration with DOH, WithinReach, Vax Northwest
 - [Recall Letter \(in 11 languages\)](#)
 - [How to Guide](#)
 - [Reminder Recall Tutorial Video](#)
 - [Coverage Rate Report Tutorial Video](#)
- Coming Soon: Publicly Available DOH Age 9 Data



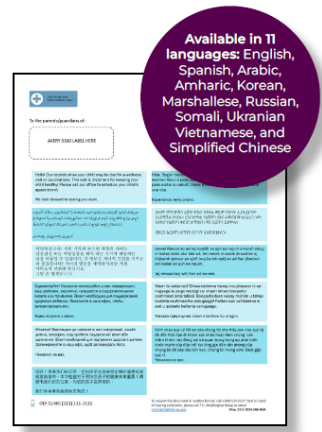
About

[Vax Northwest](#), an initiative of [WithinReach](#) and the Washington Department of Health (DOH) [Immunization Quality Improvement for Providers program \(IQIP\)](#), have collaborated to distribute a resource, the Reminder/Recall Letter Template.

The letter is translated into 11 languages (see image for specific languages) for Washington state healthcare providers and clinics' use. Research shows that reminder/recall methods work to improve immunization rates and well child visit appointments while reducing no shows.^{1,2,3} Vax Northwest and DOH hope this template will be a tool to help clinics and organizations keep patients up to date with recommended vaccines, increasing immunization rates and improving the health of our community.

Instructions for IIS

For instructions on how to run Reminder/Recall in IIS (Immunization Information System), review [DOH's Immunization Information System Reference Guide: Reminder/Recall](#) or watch a [video tutorial here](#). To generate a coverage rate report, [watch this tutorial](#).



2023 Topics Covered

- Provider Training
- Communication/Messaging
- Vaccine Hesitancy
- Impacts of WIIS Change
- Starting at 9 Resources
- Cancer Data
- Vaccine Data
- Latest Research
- Community Outreach
- Self-Sampling



Quick Poll



Nicole Rhodes, CHES

**Immunizations Health Educator
Washington State Department of Health**



HPV RESOURCE UPDATES

Washington State Department of Health



Nicole Rhodes

Immunization Health Educator

nicole.rhodes@doh.wa.gov

Health Promotion and Education (HPE)
Office of Public Affairs and Equity (OPAE)
Washington State Department of Health

HPV at Nine


- Last year the Washington state Vaccine Advisory Committee (VAC) passed a motion to take action to encourage HPV vaccination.
- On January 20th, the Washington state Immunization Information System (IIS) updated the forecast for HPV to start at nine.
- Starting the HPV vaccination series at age nine is recommended by:
 - American Cancer Society
 - American Academy of Pediatrics
 - Washington state Vaccine Advisory Committee (VAC)
 - Washington State Department of Health (DOH)
- DOH will track and publish state and county-level data on HPV vaccination coverage rates for children 9-10 annually (reporting starting in 2024)

DOH Resources

ADOLESCENT IMMUNIZATION SCHEDULE

At a Glance

Adolescents (age 9-18) need 4 vaccines to protect against meningococcal disease, some cancers, whooping cough, and other serious diseases, according to national guidelines.

AGE	IMMUNIZATIONS
9-10	<ul style="list-style-type: none">• HPV dose 1• HPV dose 2 (6-12 months after dose 1)  <p><i>More languages and information</i></p>
11-12	<ul style="list-style-type: none">• HPV doses 1 and 2 (if not given at ages 9-10)• MenACWY dose 1• Tdap (one dose)
16	<ul style="list-style-type: none">• MenACWY dose 2• MenB dose 1• MenB dose 2 (1-2 months or 6 months after dose 1, depending on brand)
YEARLY	<ul style="list-style-type: none">• Flu Vaccine (every year, every age, for adolescents)

Stay up-to-date on **COVID-19 Vaccination**

See full schedule at [cdc.gov/vaccines](https://www.cdc.gov/vaccines).



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DOH 348-739 March 2023

Available in:

- Spanish
- Russian
- Ukrainian
- Vietnamese
- Marshallese

NEW

- Korean
- Punjabi

Go to:
doh.wa.gov/hpv

Adolescent Immunization Schedule

청소년 백신 접종 일정 요약

국가 지침에 따르면 청소년(9-18세)은 수막구균성 수막염, 임파염, 백일해 및 기타 중증 질환을 예방하기 위해 4가지 백신을 접종해야 합니다.

연령	접종해야 할 백신
9~10세	<ul style="list-style-type: none"> HPV 1차 HPV 2차(1차 접종 후 6~12개월 후)
11~12세	<ul style="list-style-type: none"> HPV 1차 및 2차(9~10세에 접종하지 않은 경우) MenACWY 1차 Tdap (1회 접종)
16세	<ul style="list-style-type: none"> MenACWY 2차 MenB 1차 MenB 2차(브랜드에 따라 1차 접종 후 1~2개월 또는 6개월 후)
매년	<ul style="list-style-type: none"> 독감 백신(매년, 모든 연령대, 청소년 대상)

COVID-19 백신 접종 최신 상태 유지하기

전체 일정은 [cdc.gov/vaccines](https://www.cdc.gov/vaccines)에서 확인하십시오.



본 문서를 다른 형식으로 요청하려면 1-800-525-0127로 전화하십시오. 청각 장애가 있는 고객은 전화 711(Washington Relay) 또는 711(WA)에 연락하십시오.

DCH 348-739 March 2023 Korean

ਕਿਸ਼ੋਰ ਟੀਕਾਕਰਨ ਸਮਾਂ-ਸਾਰਣੀ ਇੱਕ ਝਲਕ ਵਿੱਚ

ਰਾਸ਼ਟਰੀ ਇਥਾ-ਨਿਰਦੇਸ਼ਾਂ ਦੇ ਅਨੁਸਾਰ, ਕਿਸ਼ੋਰਾਂ (ਉਮਰ 9-18) ਨੂੰ ਮੈਨਿਨੋਕੋਕਲ ਰੋਗ, ਖੂਨ ਕਿਸਮ ਦੇ ਕੈਂਸਰਾਂ, ਕਾਲੀ ਖਾਂਸੀ ਅਤੇ ਹੋਰ ਗੰਭੀਰ ਬਿਮਾਰੀਆਂ ਤੋਂ ਬਚਾਉਣ ਲਈ 4 ਟੀਕਿਆਂ ਯਾਨੀ ਕਿ ਵੈਕਸੀਨਾਂ ਦੀ ਲੋੜ ਪੈਂਦੀ ਹੈ।

ਉਮਰ	ਟੀਕਾਕਰਨ
9-10	<ul style="list-style-type: none"> HPV ਖੁਰਾਕ 1 HPV ਖੁਰਾਕ 2 (ਖੁਰਾਕ 1 ਤੋਂ 6-12 ਮਹੀਨਿਆਂ ਬਾਅਦ)
11-12	<ul style="list-style-type: none"> HPV ਖੁਰਾਕ 1 ਅਤੇ 2 (ਜੇਕਰ 9-10 ਸਾਲ ਦੀ ਉਮਰ 'ਤੇ ਨਹੀਂ ਦਿੱਤੀ ਜਾਂਦੀ ਹੈ) MenACWY ਖੁਰਾਕ 1 Tdap (ਇੱਕ ਖੁਰਾਕ)
16	<ul style="list-style-type: none"> MenACWY ਖੁਰਾਕ 2 MenB ਖੁਰਾਕ 1 MenB ਖੁਰਾਕ 2 (ਖੁਰਾਕ 1 ਤੋਂ 1-2 ਮਹੀਨਿਆਂ ਜਾਂ 6 ਮਹੀਨਿਆਂ ਬਾਅਦ, ਬ੍ਰਾਂਡ ਉੱਤੇ ਨਿਰਭਰ ਕਰਦੇ ਹੋਏ)
ਸਲਾਨਾ	<ul style="list-style-type: none"> ਫਲੂ ਵੈਕਸੀਨ (ਹਰ ਸਾਲ, ਹਰ ਉਮਰ ਦੇ ਕਿਸ਼ੋਰਾਂ ਲਈ)

COVID-19 ਵੈਕਸੀਨੇਸ਼ਨ ਨਾਲ ਅਪ-ਟੂ-ਡੇਟ ਰਹੋ


[cdc.gov/vaccines](https://www.cdc.gov/vaccines) ਉੱਤੇ ਪੂਰੀ ਸਮਾਂ-ਸਾਰਣੀ ਦੇਖੋ



ਕਿਸੇ ਵੀ ਸ਼ੱਕਾਂ ਲਿਖ ਕੇ ਸਵਾਲਾਂ ਲਈ ਕੋਈ ਸ਼ੱਕ ਨਾ ਰੱਖੋ: 1-800-525-0127 ਤੇ ਸਵਾਲ ਕਰੋ; ਅੰਤਿਮ ਸਮਾਂ ਨੂੰ ਚਿੰਨ੍ਹ ਨਾ ਰੱਖੋ; ਉਹ ਨਿੱਕੇ ਨੰਬਰ 711 (Washington Relay) ਤੇ ਸਵਾਲ ਕਰੋ ਜਾਂ www.cdc.gov/vaccines/imz/downloads.htm ਤੇ ਚੱਕਰ ਲਗੋ।


DCH 348-739 March 2023 Punjabi

HPV Brochure




You have the power to protect your kids from certain cancers.
HPV vaccine is important because it protects against cancers caused by the human papillomavirus (HPV). HPV vaccines are safe and highly effective in preventing infection from certain types of HPV when given before a person is exposed to the virus.

Parents are the key to protecting adolescents from HPV. Talk with your child's healthcare provider about the HPV vaccine and make an appointment today.



37,000 people get cancer caused by HPV each year in the U.S.




HPV vaccine is cancer prevention.


HPV Vaccine

Protect your child against viruses that can cause cancer

Resources
Washington State Department of Health: www.doh.wa.gov/hpv
Centers for Disease Control and Prevention: www.cdc.gov/hpv
Watch Me Grow Washington Hotline: 1-800-322-2588
Washington State Local Health Departments and Districts: www.doh.wa.gov/localhealth



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- Now available in:
- Spanish
 - Russian
 - Ukrainian
 - Vietnamese
 - Marshallese

HPV Flyer

Protect your child against viruses that can cause cancer.

HPV vaccine can be given starting at age nine. It protects children against cancers caused by the human papillomavirus.

Two reasons for two doses at age nine

HPV vaccines are safe and develop better immunity when given at younger ages, producing the most infection-fighting cells, or antibodies, in preteens. It is highly effective in preventing infection from certain types of HPV when given before a person is exposed to the virus.

When your child turns nine, ask your health care provider about protecting them from cancer with the HPV vaccine. Learn more at <https://www.doh.wa.gov/hpv>.



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At least 35,900 people in the U.S. get cancer caused by HPV each year.

The two most common cancers caused by HPV are cervical cancer in women and mouth/throat cancer in men.

Only TWO doses of HPV vaccine are needed for most kids who start the series at ages 9 to 14. THREE doses are needed for those starting at ages 15 to 26.



Protéjalos contra los virus que pueden causar cáncer.

La vacuna contra el VPH puede empezar a darse a partir de los 9 años. La vacuna protege a los niños y niñas contra los cánceres causados por el virus del papiloma humano.

2 razones por las que hay que recibir 2 dosis a los 9 años

La vacuna contra el VPH es segura y produce una mejor inmunidad cuando se da a una edad más temprana debido a que ayuda a producir un mayor número de anticuerpos o células que ayudan a combatir la infección en los preadolescentes. La efectividad de la vacuna contra infecciones con ciertos tipos de VPH es mayor cuando se da antes de que la persona se exponga al virus.

Cuando su hijo o hija cumpla los 9, pregúntele a su médico sobre cómo protegerlos contra el cáncer con la vacuna del VPH. Aprenda más en <https://www.doh.wa.gov/hpv>.



Para solicitar este documento en otro formato, llame al 1-800-525-0127. Las personas con sordera o problemas de audición deben llamar al 711 (servicio de relé de Washington) o enviar un correo electrónico a civil.rights@doh.wa.gov. Feb. 2023 DOH #348-612



Cada año en los EE. UU., a por lo menos 34 800 personas se les detecta cáncer causado por el VPH.

Los 2 cánceres más comunes causados por el VPH son el cáncer del cuello uterino en las mujeres y el de boca y garganta en los hombres.

Sólo DOS dosis de la vacuna contra el VPH son necesarias para la mayoría de los niños que empezaron la serie de los 9 a 14 años. TRES dosis para los que empezaron de los 15 a 26.



Dental Provider Resources

- Dental providers play a unique role in HPV cancer prevention.
- Pre-teen and adolescent patients tend to see the dentist twice yearly
- Dental professionals can promote HPV vaccination by providing counseling to parents and patients
- Share HPV's link to oropharyngeal cancer



Printing Dental Cards

The screenshot shows a printing application interface. At the top, a navigation bar includes 'Home', 'File', 'Magic Switch NEW', and a search bar containing 'Talk to your doctor a...'. On the right side of the navigation bar, there are icons for 'Print Business Cards' and 'Share'. Below the navigation bar, the main workspace displays a business card design with the text 'Are you serious about preventing cancer?' and 'We are!' next to a cartoon tooth character. A red arrow points to the 'Business Cards' tab in the right-hand settings panel. The settings panel includes options for 'Paper type' (Premium paper), 'Paper finish' (Matte finish), and 'How many?' (50 Business Cards for \$16). At the bottom of the settings panel, it shows a 'Subtotal' of \$16 with '+ FREE DELIVERY' and a 'Continue' button. The bottom status bar of the application shows 'Page 1 / 2', a zoom level of '136%', and other navigation icons.

Vaccine resource hub

POPULATIONS

Race / Ethnicity Foc... ▾

Language ▾

Other Populations ▾

FORMATS

Resource Format ▾

Resource Type ▾

VACCINE

Virus / Vaccine Type ▾

Other Vaccine Topics ▾

Partnering for Vaccine Equity
RESOURCE HUB

SEARCH Q ENGLISH ▾

About Find Resources Create Resources Stories SIGN IN

Search Discover Additional Resources

Showing 1315 results Sorting by newest first

Social Media: Graphics Answer FAQs About Updated COVID-19 Vaccines (English, Spanish) →

Format: Graphic / Image
Race/Ethnicity: Multiple Races/Ethnicities
Language(s): English, Spanish

Social Media: Graphics Answer Questions About Taking a Home COVID-19 Test (English, Spanish) →

Format: Graphic / Image
Race/Ethnicity: Black/African American
Language(s): English, Spanish

HPV Research

Investing in progress for HPV cancer prevention



**\$6.7
Million**

invested in HPV
research in 2022/23

**7
HPV grants**

in investigation in
2022/23

**65%
reduction**

in cervical cancer
incidence

ACS has helped make possible almost every major cancer breakthrough since 1946. Since then, we've invested more than \$5 billion in cancer research, making us the largest nonprofit funder of cancer research in the United States, outside of the federal government.

Between 2022-2023, seven HPV-related research projects have been funded by ACS. These grants have been instrumental in advancing research and innovation in the field of HPV prevention, detection, treatment, and survivorship.

ACS researchers announced in Cancer Facts & Figures 2023 an astounding 65% reduction in cervical cancer rates in women ages 20-24 from 2012 through 2019, in the wake of the introduction of the HPV vaccine. Although incidence rates were already declining because of screening, the HPV vaccine accelerated this progress. This is likely to foreshadow reduction of other HPV-associated cancers.

Trends in cervical cancer incidence rates among women aged 20-24 years by race and ethnicity, United States, 1998-2019

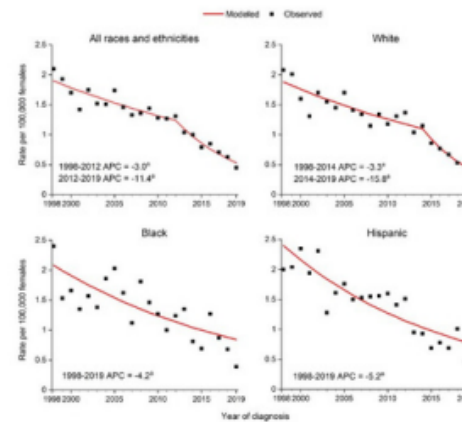









FIGURE 4. Trends in cervical cancer incidence rates among women aged 20-24 years by race and ethnicity, United States, 1998-2019. Rates are age adjusted to the 2000 US standard population and adjusted for reporting delays. White and Black race are exclusive of Hispanic ethnicity. *The APC is statistically significant ($p < .05$). APC indicates annual percent change.

National HPV Roundtable

There was a 65%
reduction in cervical
cancer incidence rates in
women aged 20-24 from
2012 to 2018

National Roundtable Resource Center

hpv.vaccination.roundtable@cancer.org     

  [Who We Are](#) [Learn About HPV](#) [Resource Center](#) [News And Events](#) [Get Involved](#) | [Search](#)

Home > [Resource Center](#)

Resource Center

The HPVRT Resource Center hosts resources developed as well as resources developed by our members and partners. The Resource Center does not provide an exhaustive catalogue, but rather provides a sampling of key resources and tools that we believe will be most useful to improving HPV vaccination initiation and completion rates.

[Search](#)



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Project Brainstorming

- Breakout into 2 groups to discuss 2024 focus areas for HPV Task Force.
 - Group 1: Community Outreach
 - Group 2: Clinical Intervention



Report Out



Quick Poll



BREAK
Back at 9:10am



Nicole Rhodes, CHES

**Immunizations Health Educator
Washington State Department of Health**



HPV DATA

Washington State Department of Health

WAIIS vs. NIS Teen Data



WAIIS Data

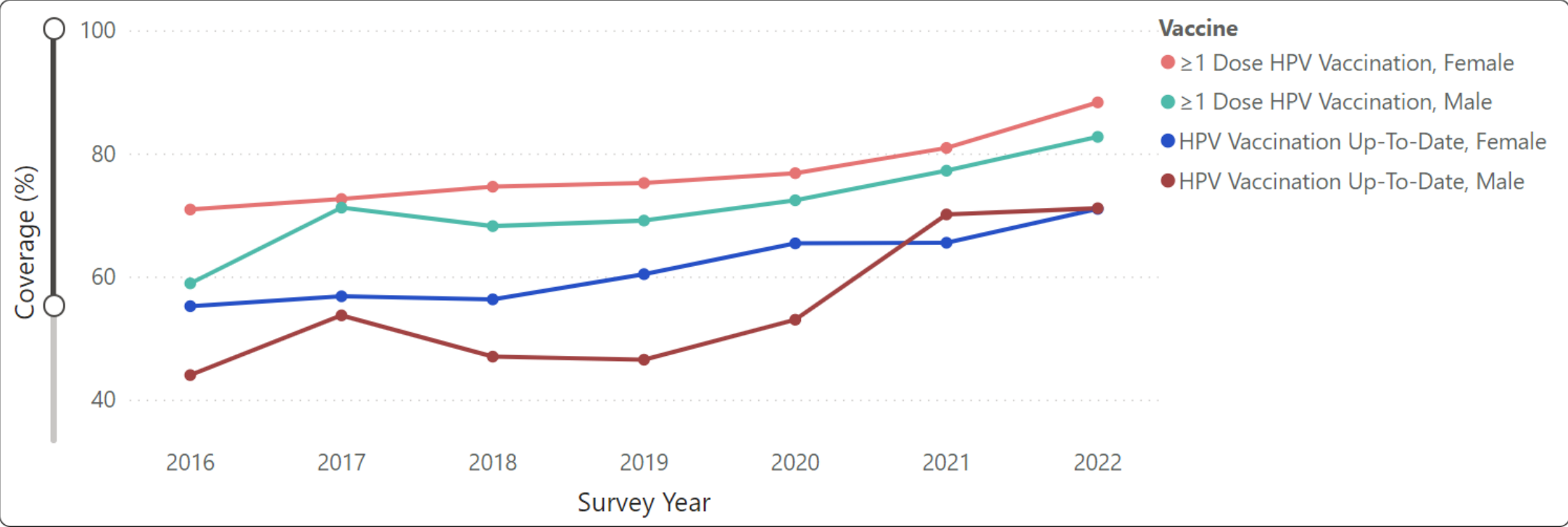
- Population based
- Uses valid vaccine (ACIP)
- Point in time estimates
- Small area estimates (county, zip code, etc.)
- Real time
- Used to compare within state



NIS Teen Data

- Sample based
- Uses all vaccine administered
- Annual estimates
- State and regional estimates
- Not timely
- Used to compare nationally

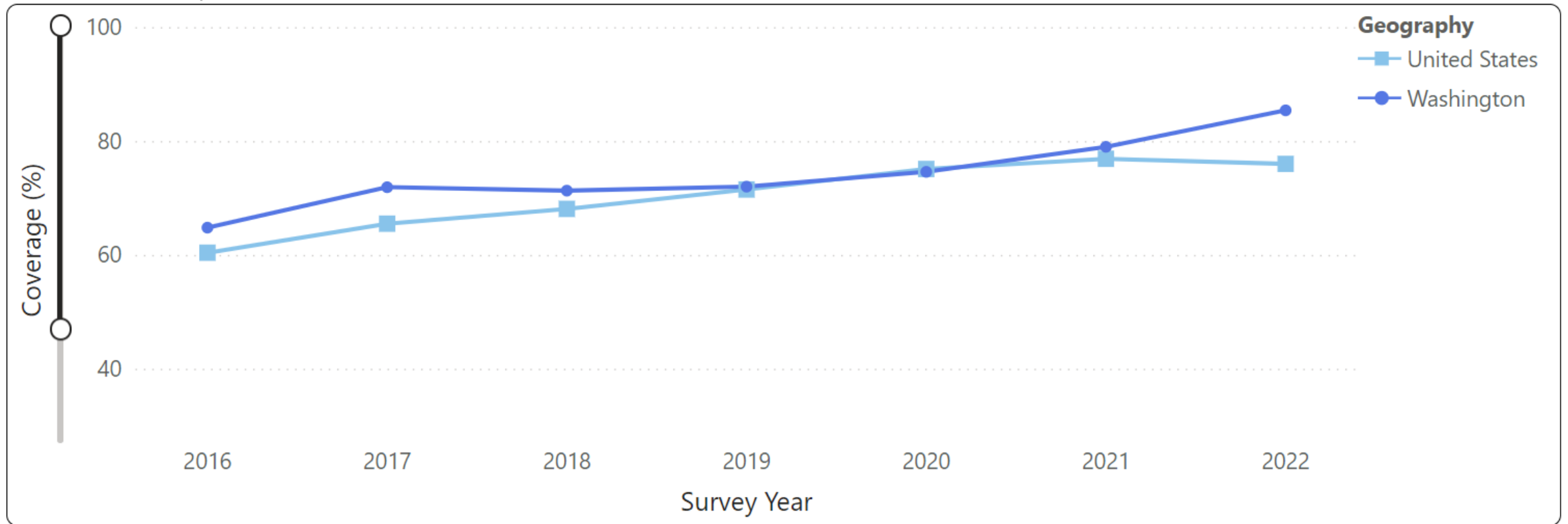
Vaccination Coverage by Year among Adolescents Age 13-17 years, Washington



>1 Dose HPV Vaccination Coverage, 13-17 Year Olds

[Back to report](#)

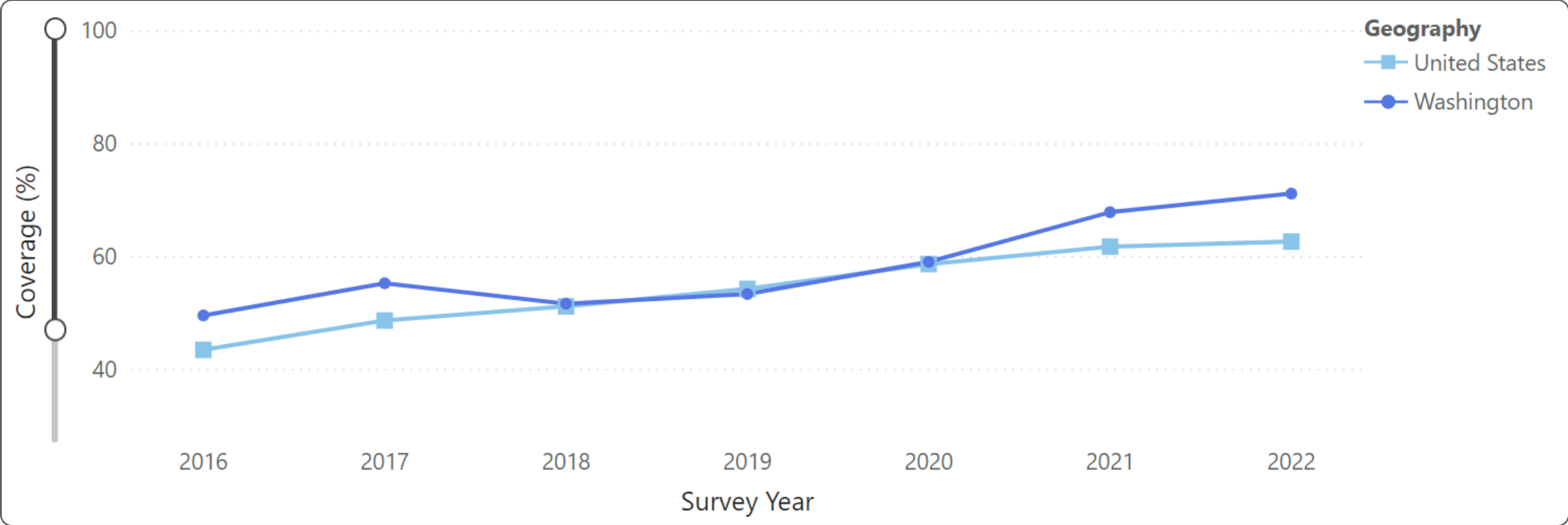
≥1 DOSE HPV VACCINATION COVERAGE BY YEAR AMONG ADOLESCENTS AGE 13-17 YEARS, ...



Up-to-date HPV Vaccination Coverage, 13-17 Year Olds

< Back to report

UP-TO-DATE HPV VACCINATION COVERAGE BY YEAR AMONG ADOLESCENTS AGE 13-17 YEA...



Vaccination Coverage, Private vs. any-Medicaid Insurance

Table. Estimated vaccination coverage with selected vaccines and doses among adolescents aged 13–17 years and those with private and any-Medicaid insurance— National Immunization Survey–Teen (NIS-Teen), United States, 2021 and 2022.

Vaccines	Health Insurance Status, % (95% CI)					
	Private Insurance Only			Any-Medicaid		
	2022	2021	Difference	2022	2021	Difference
	(n = 9,463)	(n = 11,146)		(n = 4,939)	(n = 5,163)	
Tdap ≥ 1 dose	91.0 (89.8 to 92.0)	90.2 (88.9 to 91.3)	0.8 (-0.8-2.5)	89.0 (86.9 to 90.8)	89.6 (88.0 to 91.0)	-0.6 (-3.0 to 1.9)
MenACWY						
≥1 dose	90.2 (89.0 to 91.3)	90.2 (88.8 to 91.4)	0.0 (-1.7-1.7)	87.8 (85.8 to 89.6)	88.8 (86.9 to 90.4)	-1.0 (-3.5 to 1.6)
≥2 doses	65.1 (61.3 to 68.8)	61.7 (57.3 to 65.9)	3.5 (-2.3-9.2)	59.7 (53.5 to 65.5)	60.7 (54.7 to 66.4)	-1.0 (-9.5 to 7.4)
HPV vaccine						
≥1 dose	76.9 (75.3 to 78.4)	75.9 (74.1 to 77.6)	1.0 (-1.3-3.4)	77.2 (74.8 to 79.4)	80.5 (78.2 to 82.5)	-3.3 (-6.4 to -0.1) *
HPV UTD	64.4 (62.6 to 66.1)	62.1 (60.2 to 64.0)	2.3 (-0.4-4.9)	63.5 (60.9 to 66.0)	64.1 (61.3 to 66.7)	-0.5 (-4.3 to 3.2)
*Statistically significant difference (p<0.05) in estimated vaccination coverage within insurance status; referent group was 2021 survey year.						

Coverage by Birth Year

Teens born in 2008 have **significantly lower** coverage with ≥ 1 Tdap, ≥ 1 HPV, and a lower percentage HPV UTD than previous birth cohorts.

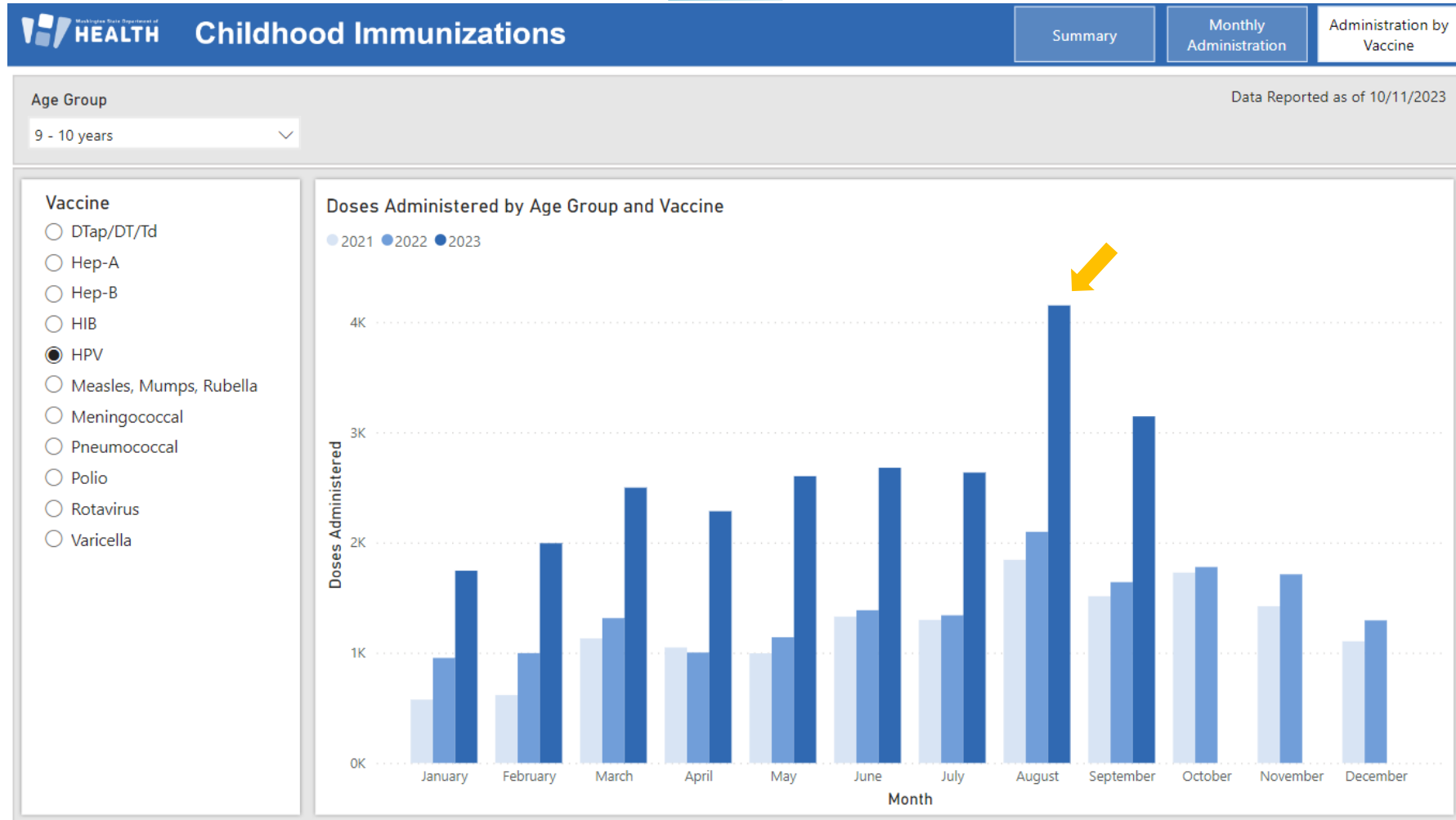
TABLE 2. Coverage with ≥ 1 dose of tetanus, diphtheria, and acellular pertussis vaccine, ≥ 1 dose of quadrivalent meningococcal conjugate vaccine, ≥ 1 dose of human papillomavirus vaccine, and percentage of adolescents up to date with human papillomavirus vaccination, among adolescents born during 2006–2009,* by age 13 years and 14 years,[†] metropolitan statistical area status,[‡] poverty status,[§] race and ethnicity,^{**} and health insurance status^{††} — National Immunization Survey-Teen, United States, 2020–2022

Age group/ Characteristic	Vaccination coverage,% (95% CI) ^{§§}														
	≥ 1 Tdap				≥ 1 MenACWY				≥ 1 HPV				HPV Vaccine UTD		
	Birth year				Birth year				Birth year				Birth year		
	2006	2007	2008	2009	2006	2007	2008	2009	2006	2007	2008	2009	2006	2007	2008
By age 13 yrs															
All adolescents	88.8 (87.7– 89.9)	89.6 (88.5– 90.7)	86.4 (84.1– 88.5) ^{¶¶}	87.1 (83.0– 90.7)	87.3 (86.0– 88.5)	87.1 (85.5– 88.5)	84.1 (81.5– 86.4) ^{¶¶}	87.3 (84.1– 90.2)	70.4 (68.8– 72.0)	72.6 (70.8– 74.5)	69.5 (66.8– 72.1)	71.4 (67.1– 75.6)	50.2 (48.5– 51.9)	52.9 (50.8– 55.0)	50.0 (47.2– 52.8)

WAIS Data

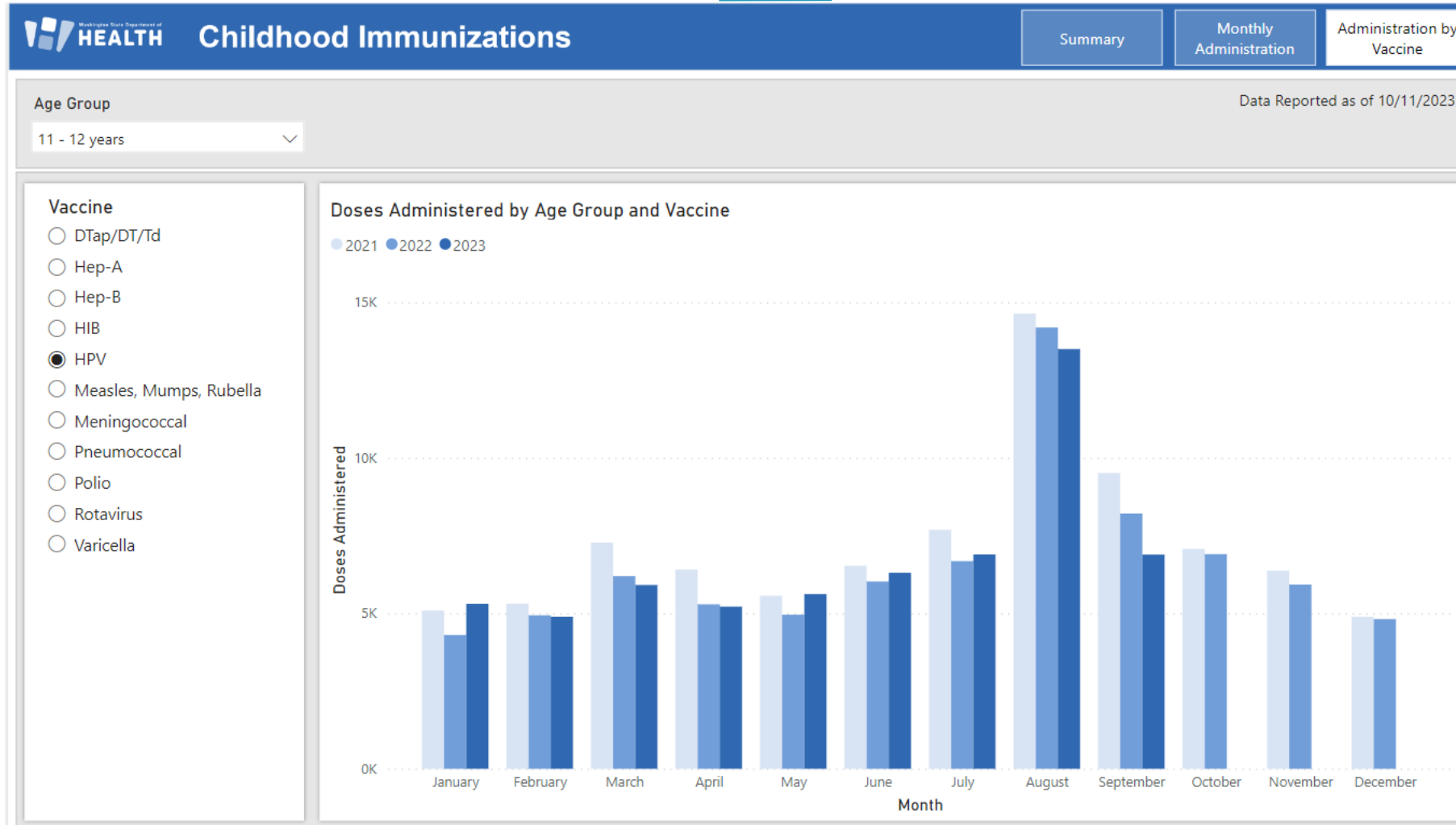


HPV Doses Administered 9-10 Year Olds



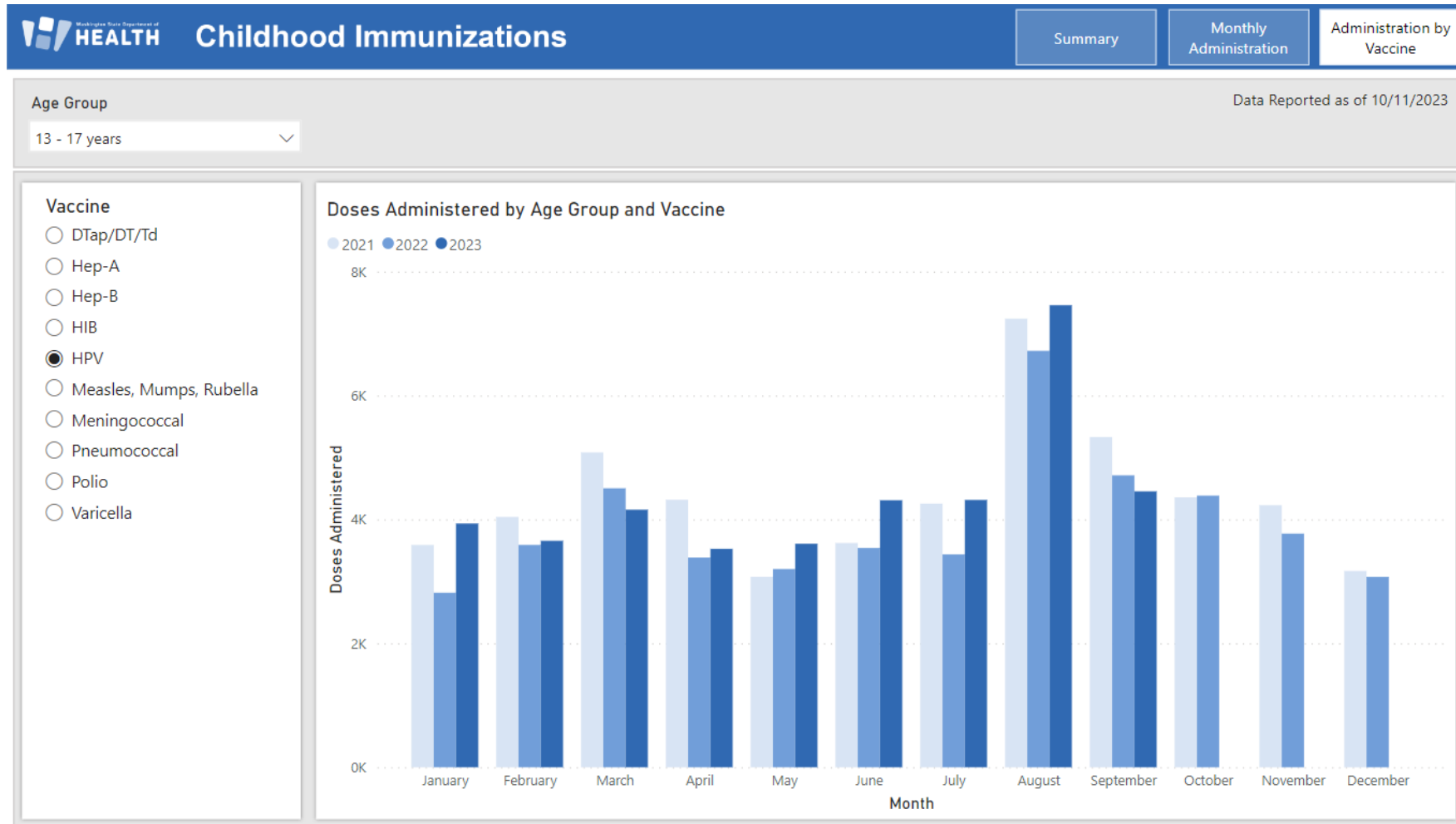
Source: Data based on doses administered data documented in the Washington State Department of Health Immunization Information System

HPV Doses Administered 11-12 Year Olds



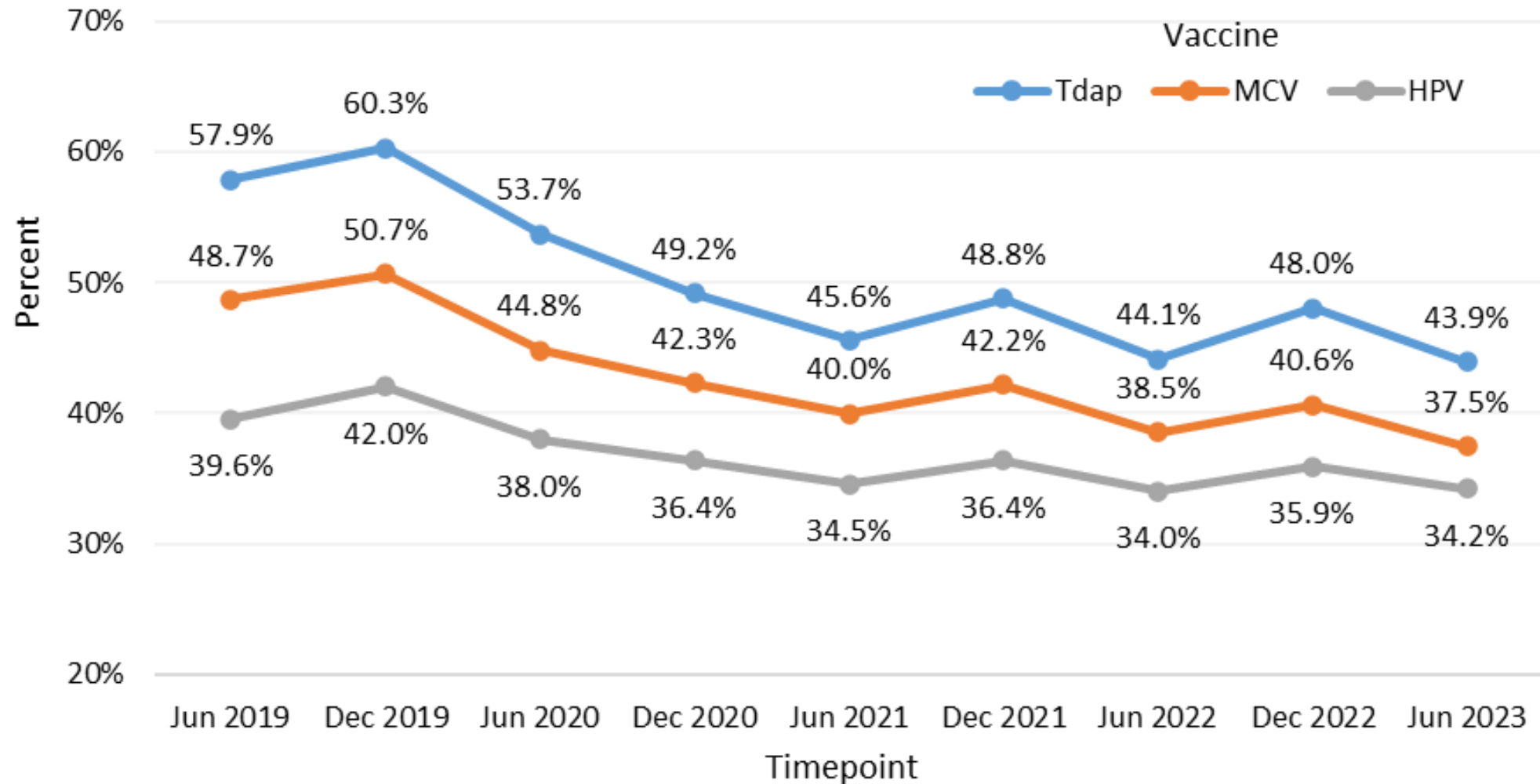
Source: Data based on doses administered data documented in the Washington State Department of Health Immunization Information System

HPV Doses Administered – 13-17 Year Olds

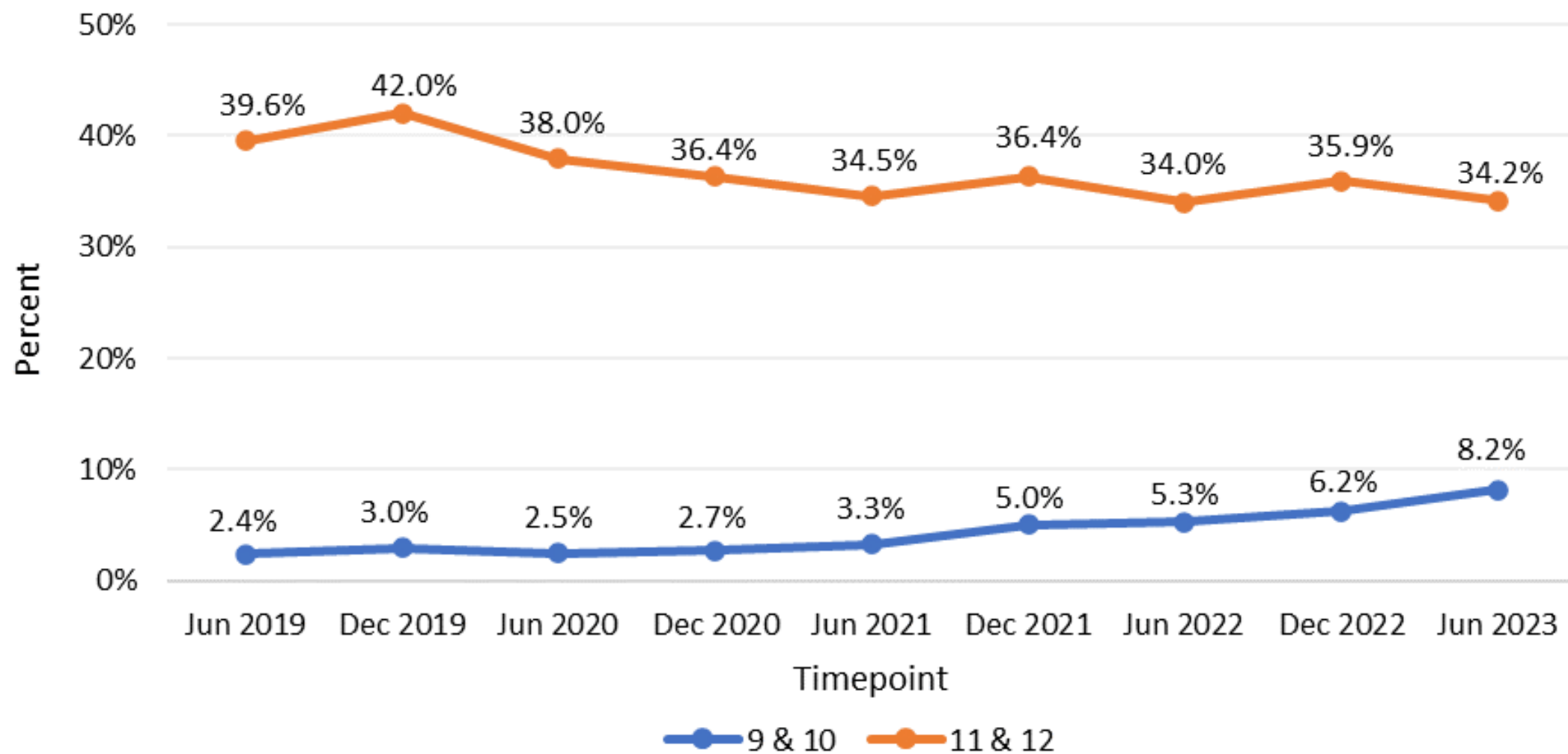


Source: Data based on doses administered data documented in the Washington State Department of Health Immunization Information System

Percent of 11-12 year olds with at least 1 dose (initiated) of Tdap, MCV, and HPV, June 2019 - June 2023



Percent of HPV-initiated (≥ 1 dose) adolescents by age group, June 2019 - June 2023





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**HPV Self Sampling
Rachel Winer and John Lin
University of Washington**



DEPARTMENT OF EPIDEMIOLOGY

UNIVERSITY *of* WASHINGTON

School of Public Health

THE POTENTIAL FOR HPV SELF-SAMPLING TO INCREASE CERVICAL CANCER SCREENING ACCESS AND UPTAKE

Rachel Winer, John Lin

Department of Epidemiology

University of Washington

A map of the United States is shown against a black background. The map is divided into two regions: a red-shaded region on the left side, representing 25% of the population, and a grey-shaded region on the right side, representing 75% of the population. The text is overlaid on the red region.

>50%

of the 14,000 cervical cancers diagnosed each year are in the 25% of people who are not up to date with screening.



ALTERNATIVE SCREENING STRATEGIES

- > **With primary HPV screening now a guideline-approved option, HPV self-sampling is an emerging strategy.**
- > **Potential to increase access & eliminate need for a clinic visit for a majority of people with a cervix.**

SELF-SAMPLING FOR HPV

- > **Highly acceptable & increases participation in cervical cancer screening**
- > **Comparable diagnostic accuracy to clinician-collected sampling for detecting cervical precancer**
- > **WHO guidelines recommend primary HPV screening & recommend making self-sampling available as an additional approach**
- > **Several countries now include HPV self-sampling options**

OPPORTUNITIES WITH HPV SELF-SAMPLING

- > **Potential to address disparities (exacerbated by COVID-19 pandemic)**
- > **Potential utility for underscreened/marginalized groups (e.g., rural residents, racial/ethnic minorities, sexual & gender minorities, victims of sexual abuse, individuals with physical or mental health concerns, individuals with religious or cultural barriers)**

THE STEP TRIAL: BACKGROUND

- > **Mailing HPV self-sampling kits to underscreened individuals increases adherence.**
 - Meta-analysis of 25 trials¹: 13% absolute increase vs. control
 - U.S. HOME trial²: 9% absolute increase vs. control
- > **Randomized trials have not evaluated offering self-sampling to previously-adherent individuals.**
- > **Optimal strategies for increasing cervical cancer screening may differ by patient screening history and healthcare setting.**

1. Costa et al, Br J Cancer 2023; 2. Winer et al, JAMA Netw Open 2019

STUDY OVERVIEW

- > **Study setting: Kaiser Permanente Washington – a large, integrated healthcare delivery system in Washington State, USA**
- > **Pragmatic trial to evaluate effectiveness of different outreach approaches for offering HPV self-sampling, by screening history (previously-adherent, overdue, unknown)**

OUTREACH APPROACHES

- > **Education**: Mailed educational material + Usual care screening reminders
- > **Direct Mail**: Directly-mailed home HPV kit + educational material + Usual care
- > **Opt-In**: Option to request a home HPV kit + educational material + Usual care

STUDY DESIGN

- > **Electronic medical records to identify and randomize eligible individuals, Nov 2020 - Jan 2022**
- > **Screening completion outcome tracked for 6-months post-randomization as either:**
 - In-clinic screening
 - Kit return with negative or HPV16/18+ results
 - Kit return with in-clinic reflex cytology when results were other HR-HPV+ or unsatisfactory
- > **Intention-to-treat analysis**

ACKNOWLEDGEMENTS

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Margaret Chin

Chris Tachibana

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ClinicalTrials.gov: NCT04679675



Wrap Up



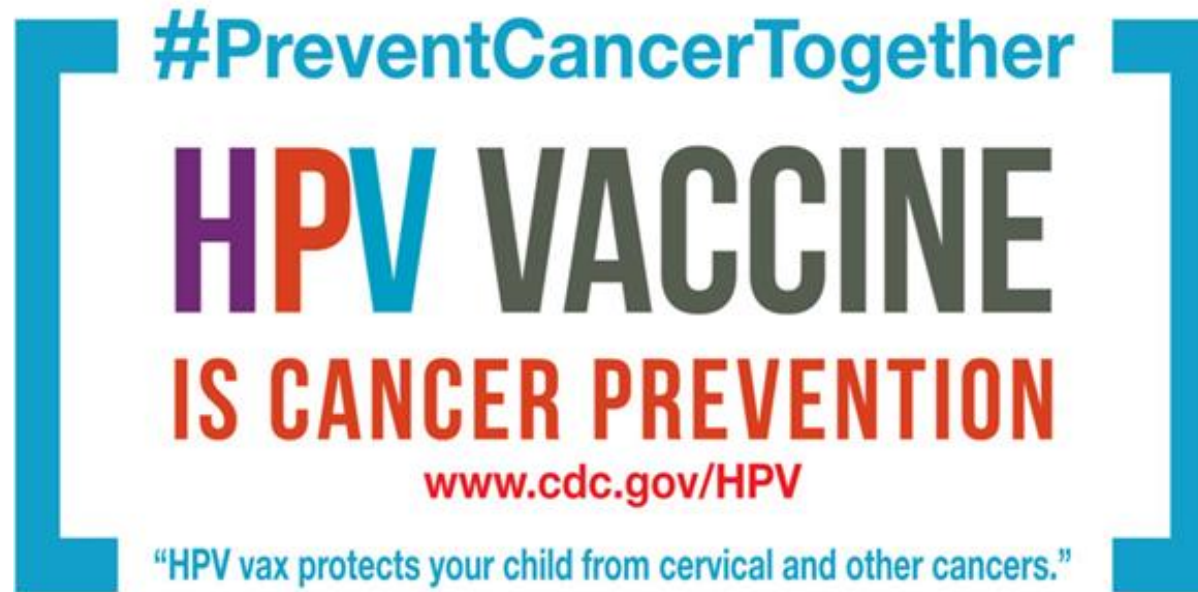
Save the Date

- 2024 Meeting Dates:
 - February 2nd, 2024: Task Force (2-hour meeting)
 - May 10th, 2024: Roundtable (4-hour meeting)
 - October 11th, 2024: Task Force (2-hour meeting)
 - Meetings will be virtual
- 

Cancer Action Plan of Washington

- Recently Launched State-Wide Cancer Coalition
- 5-Year Cancer Plan
 - Includes HPV vaccine and HPV-related Cancer priorities
- Next Meeting January 24th, 2024
 - In-Person in Olympia, WA
 - Virtual Option

Thank you for doing your part to prevent
HPV Cancers!

A graphic for the HPV vaccine campaign. It features a large blue bracket on the left and right sides. Inside the bracket, the text is arranged as follows: the hashtag #PreventCancerTogether in blue at the top; the words HPV VACCINE in large, bold letters, with HPV in purple and blue and VACCINE in grey; the phrase IS CANCER PREVENTION in red below that; the website address www.cdc.gov/HPV in red below the phrase; and a quote in blue at the bottom: "HPV vax protects your child from cervical and other cancers."

#PreventCancerTogether

HPV VACCINE

IS CANCER PREVENTION

www.cdc.gov/HPV

"HPV vax protects your child from cervical and other cancers."