**HPV Vaccination: How Can We Do Better?**

Recently released data on vaccination coverage of teen girls and boys age 13–17 shows the rate of HPV vaccination lags way behind rates of Tdap and meningococcal conjugate (MCV4) vaccination. Since 2006–07, when the Centers for Disease Control and Prevention (CDC) recommended the three vaccines for use in adolescents, coverage with Tdap and MCV4 has increased steadily. But HPV coverage has plateaued. Vaccination coverage of teens in 2011 for the three vaccines follows:

- Coverage with 1 or more doses of Tdap vaccine was 78.2%.
- Coverage with 1 or more doses of MCV4 was 70.5%.
- Coverage with 1 or more doses of HPV among teen girls was 53.0%, and coverage with 3 or more doses was 34.8%.

**Cervical Cancer Prevention**

Annually in the United States, 12,000 new cases of cervical cancer are diagnosed and 4000 cervical cancer deaths occur. HPV vaccine, which prevents infections that cause about 70% of cervical cancers, holds the prospect of being an incredible cancer-prevention tool for an entire generation of women. Tragically, that prospect is not now being fully realized—but healthcare professionals have the opportunity to turn the tide.

An article in the September 2012 issue of AAP News states that a “pediatrician’s strong recommendation is the key to helping parents with their decision” to vaccinate their child with HPV vaccine and that “if a dose of HPV vaccine were administered each time a clinician gave Tdap or MCV4, coverage could jump to more than 80%.”

In a recent letter addressed to CDC grantees and partners, Dr. Anne Schuchat, director, CDC’s National Center for Immunization and Respiratory Diseases, outlines a call to action that involves promoting HPV vaccination to physician audiences, immunization providers, and parents of preteen and teen girls and boys. To that end, CDC has developed several new HPV resources, as have other respected partner organizations. A selection of them follows.

**HPV Resources**

- CDC’s HPV web section: www.cdc.gov/hpv
  - 19-minute Medscape video, “HPV Vaccine: A Shot of Cancer Prevention,” Anne Schuchat, MD; Laurie E. Markowitz, MD; Mona Saraiya, MPH. Released: 08/10/2012; valid for credit through 08/10/2013: www.medscape.org/viewarticle/768633
- IAC’s HPV web section: www.immunize.org/resources/dis_hpv.asp
- IAC’s HPV video collection: www.immunize.org/votw/hpv-videos.asp
- Four videos for parents on Children’s Hospital of Philadelphia’s HPV web section: www.chop.edu/service/vaccine-education-center/prevent-hpv/index.html
- Heather’s story: www.youtube.com/user/immunizationaction

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**Influenza Vaccine**

**What is the latest CDC guidance on influenza vaccination and egg allergy?**

People who have experienced a serious systemic or anaphylactic reaction (e.g., hives, swelling of the lips or tongue, acute respiratory distress, or collapse) after eating eggs should consult a specialist for appropriate evaluation to help determine if vaccine should be administered.

A previous severe allergic reaction to influenza vaccine, regardless of the component suspected to be responsible for the reaction, is a contraindication to future receipt of the vaccine.

People who have documented immunoglobulin E (IgE)-mediated hypersensitivity to eggs, including those who have had occupational asthma or other allergic reactions to egg protein, might also be at increased risk for allergic reactions to influenza vaccine. Protocols have been published for safely administering influenza vaccine to people with egg allergy.

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