National and State-Level HPV Vaccination Coverage

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Overview

- Adolescent vaccination coverage levels
- Impact of the COVID-19 pandemic on routine vaccination
- Catch-up vaccination
Vaccination Coverage for Adolescent Vaccines
Estimated vaccination coverage with selected vaccines and doses* among adolescents aged 13-17 years, by survey year†—National Immunization Survey-Teen§, ¶, United States, 2006-2020

Abbreviations: Tdap = tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine; MenACWY = quadrivalent meningococcal conjugate vaccine; HPV = human papillomavirus; ACIP = Advisory Committee on Immunization Practices.

https://www.cdc.gov/mmwr/volumes/70/wr/mm7035a1.htm
Estimated vaccination coverage with ≥1 HPV vaccine, 2020

National Coverage: 75.1%
Range: 93.0% (RI) to 55.2% (MS)

Source: https://www.cdc.gov/vaccines/imz-managers/coverage/teenvaxview/index.html
Estimated HPV vaccine series completion, 2020

National Coverage: 58.6%
Range: 83.0% (RI) to 31.9% (MS)

Source: https://www.cdc.gov/vaccines/imz-managers/coverage/teenvaxview/index.html
HPV vaccination coverage among White Non-Hispanic adolescents is consistently lower.

Source: https://www.cdc.gov/vaccines/imz-managers/coverage/teenvaxview/index.html
>1 HPV vaccination coverage in rural areas is consistently lower

Source: https://www.cdc.gov/vaccines/imz-managers/coverage/teenvaxview/index.html
Key Points

- We continue to see high coverage rates nationally for Tdap and MenACWY vaccines

- HPV vaccination initiation and series completion continue to increase but coverage is still lower than that for other routinely recommended adolescent vaccines

- Continue to see disparities in vaccination coverage by race/ethnicity and MSA status
COVID-19 Pandemic and Adolescent Vaccines
Assessing the impact of the pandemic on vaccine administration

- Data from the 2020 NIS-Teen was not able to assess the impact the pandemic may have had on HPV vaccine uptake among adolescents
  - Most teens included in the 2020 sample had started the vaccine series prior to the pandemic
  - Additional years of data are needed
Comparison of Vaccines For Children (VFC) provider orders for HPV vaccine by Fiscal Year*

Compared to FY2019
- FY2020: Total vaccine orders decreased 24%
- FY2021: Total vaccine orders decreased 9%
- FY2022: year to date (May 2022) orders are down 10%

*Fiscal Year is defined as October 1 through September 30.
Vaccination coverage for $\geq 1$ dose of HPV vaccine by age, 13 IIS* sites

*IIS: Immunization information systems
Vaccination coverage for ≥2 doses of HPV vaccine by age, 13 IIS* sites

*IIS: Immunization information systems
Key Points

- Vaccine orders and vaccine administration have decreased since the start of the pandemic, leaving some children and particularly adolescents unprotected from vaccine-preventable diseases.

- Parental concerns about potential exposure to COVID-19 during well child visits might be contributing to the declines observed.

- Concerted efforts are needed to help adolescents catch-up with vaccines that have been missed since the start of the pandemic.
Vaccine Catch-up

- Vaccine catch-up will be critically important over the coming months and will require a multi-faceted approach
  - Healthcare systems/healthcare providers
  - Schools
  - State and local government agencies
  - Public health
  - Communities

https://www.cdc.gov/vaccines/partners/childhood/stayingontrack.html
Healthcare Systems and Healthcare Providers

- Encourage members to identify and follow up with families whose children have missed doses to get appointments scheduled

- Prompt clinicians when these children are seen to deliver vaccines that are due or overdue

- Communicate directly to families the importance of well-child visits and getting caught up on any recommended vaccines that were missed

- Let families know what precautions are in place for safe delivery of in-person services

Resource: CDC’s Call to Action letter
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For more information, contact CDC
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