
November PE 46 Webinar



Talking about the HPV Vaccine

REPRODUCTIVE HEALTH PROGRAM
Adolescent, Genetics, and Reproductive Health

Oregon
Health
Authority



Agenda

- Welcome/Introductions
- Everything PE 46
- General Updates
- *“Talking about the HPV Vaccine”* by guest speaker
Dr. Stewart Decker



To find an RH Clinic



www.healthoregon.org/rhclinics

Everything PE 46



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Upcoming Webinars

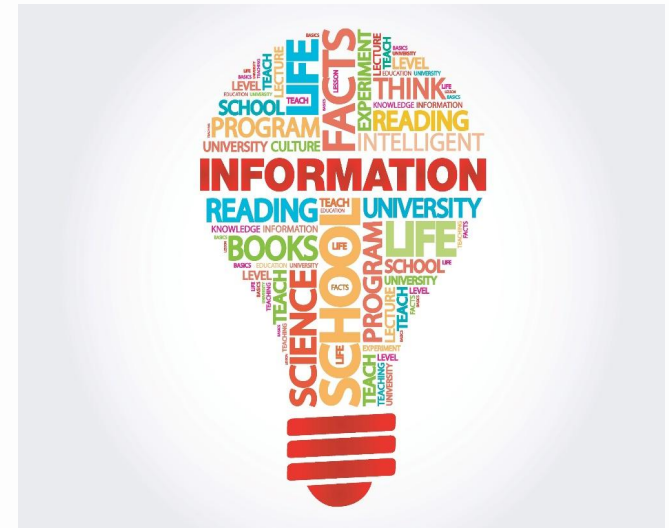
12/20: Reproductive Health Outreach and Education

<https://attendee.gotowebinar.com/register/1171370611412478989>

1/24/2020: LPHA Round Table: Where we are with PE 46

<https://attendee.gotowebinar.com/register/6736966529819094285>

****Please note that ALL LPHAs are expected to participate in the January 2020 PE 46 Webinar***



Dolly England Dolly.A.England@dhsoha.state.or.us

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January 2020 PE 46 Webinar

- What is the focus of your 2019/2020 Annual Plan?
- What have you done so far?
- What are your next steps?
- Challenges?
- What are you proud of?
- What do you want to know from other counties?
- **It is expected that each county participates.**

Materials Due Date

- Please send Powerpoint slides by **Friday January 17th**
- Dolly.A.England@state.or.us
- **It is expected that each county participates.**



Technical Assistance Calls Available

- Available for TA Calls: Email to schedule a time!!!



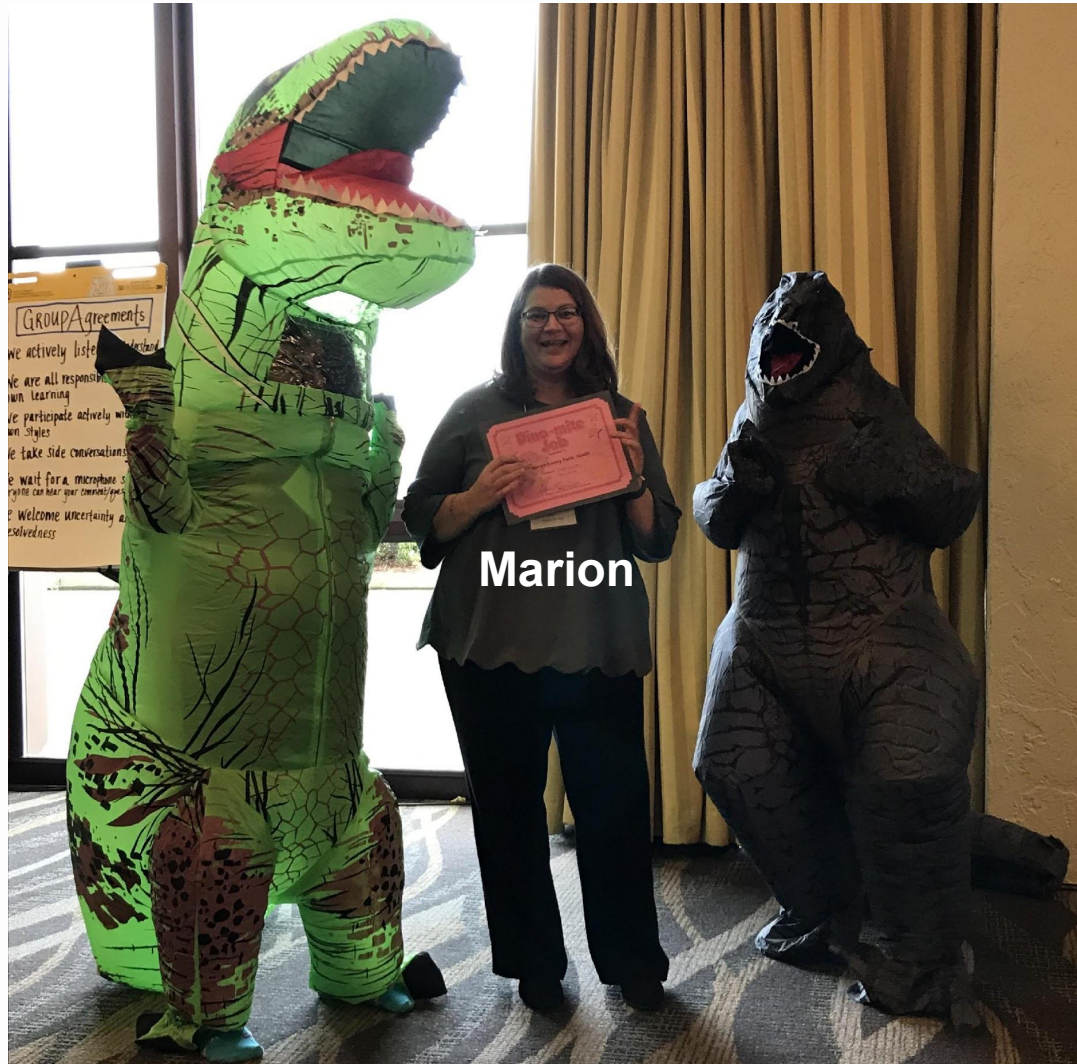
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Reproductive Health Coordinators Meeting 2019



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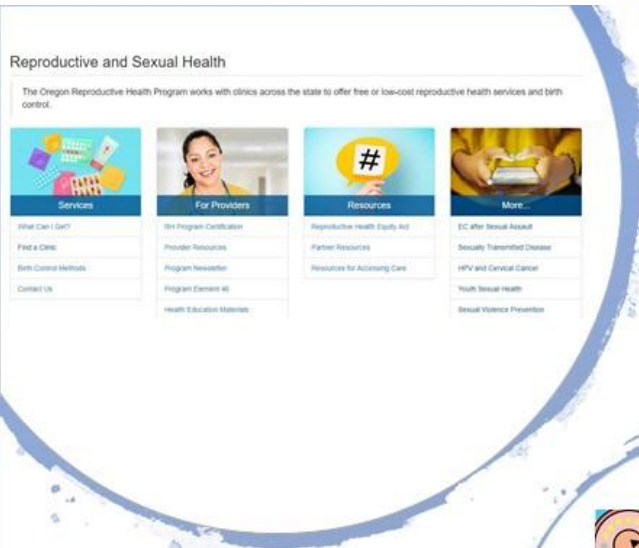
Reproductive Health Coordinators Meeting 2019



Reproductive Health Coordinators Meeting 2019



REPRODUCTIVE HEALTH PROGRAM
Adolescent, Genetics, and Reproductive



Digital RH!!

- Find us on the web at healthoregon.org/rh
- Find us on Facebook  www.facebook.com/OregonCCare/
-  Launched May 1st
-  Instagram at @oregonccare



Dolly's Community Engagement Moment



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Hello, Dolly!

By Dolly England

Let's talk about sex, and how to do it safely

What everybody should know about HPV

Recently, I had a conversation with a friend who tested positive for the human papillomavirus (HPV). After talking with her, I realized that not enough is being done to educate people. So here I am to keep it real and let you know what HPV is about.

More commonly known as genital warts, HPV has in recent years been proven to cause cervical cancer. Genital warts are soft and moist, and are flesh colored. They usually appear in the genital area within weeks or months of infection.

Genital warts can show up in women on the vulva and cervix, inside the surrounding areas of the vagina and anus. In men, genital warts can appear on the scrotum and penis.

There are over 100 strains of HPV. Some cause genital warts and some cause cancer in women. The strains that cause cancer in women develop on the cervix.

There are 14,000 cases of cervical cancer diagnosed in the United States each year.

How do you contract HPV?

It is estimated that 80-85 percent of the population will contract HPV at some point in life, with a large portion of women contracting HPV by age 30. Most HPV infection is associated with skin-to-skin contact like the kind you may have under the sheets.

However a study done in the UK showed that 7 percent of girls tested between the ages of 10-12 showed signs of HPV. These young girls aren't having sex; they're playing with Malibu Barbie and oogaling over Aaron Carter.

There have also been cases of HPV in virgins. So while skin contact is the most likely way people con-

tract HPV, research is inconclusive.

How can you prevent HPV?

Ways that lower your risk of getting other sexually transmitted diseases may also work to lower your risk of getting HPV or genital warts:

- Abstain from sex (Safe sex is in the palm of your hands, people.)
- Abstain from sex with a person who has visible warts (although some infected people may not have visible warts but can still transmit the infection).
- Monogamy (You + Me = Us)
- Have sex with fewer people.

The more people you have sex with, the greater your chance of getting HPV.

Use a latex condom. Used consistently and correctly during every sexual act, condoms can decrease the risk of infection.

Although these methods can reduce your risk of contracting HPV, know that it is a sneaky virus. If you have had more than four sexual partners, there's a good chance you already have it.

An estimated 5.5 million people become infected with HPV each year in the United States, and an estimated 20 million Americans are currently infected. In most cases, the virus is harmless and symptomless.

There is a vaccine currently available at most doctor's offices. I encourage all women to get it.

To any critics out there of vaccinating young girls, I hope you'll reconsider. This isn't about encouraging sex, but rather giving our young girls the opportunity to grow old and enjoy their lives instead of possibly falling ill to an easily treated virus.

The more we know, the more informed decisions we can make about our sexual health.

Be Healthy YO!

Print Media

That one time I had a newspaper column.


REPRODUCTIVE HEALTH PROGRAM
Adolescent, Genetics, and Reproductive Health

Print Media

- Information Changes
- We get smarter
- 2019 Stats

REPRODUCTIVE HEALTH PROGRAM
Adolescent, Genetics, and Reproductive Health

18 • April 5-11, 2007 • CLUB HOOLIGAN.COM



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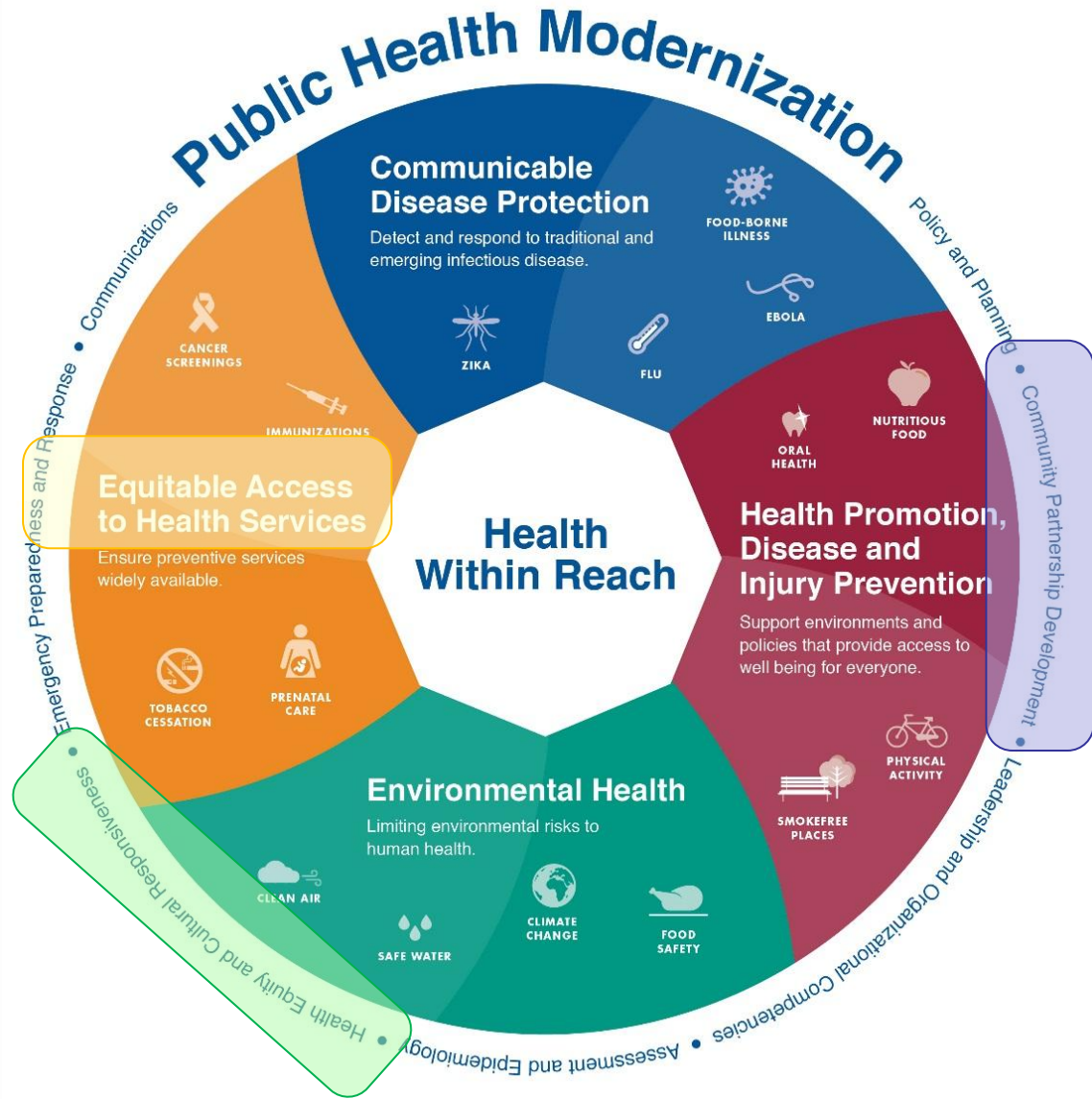
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Be Healthy YO!

Addresses Public Health Modernization

- Equitable Access to Health Services
- Community Partnership Development
- Health Equity and Cultural Responsiveness



Talking about the HPV Vaccine



Dr. Stewart Decker



HPV Champion and
trainer for
Klamath County
Health Department

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Talking about the HPV Vaccine

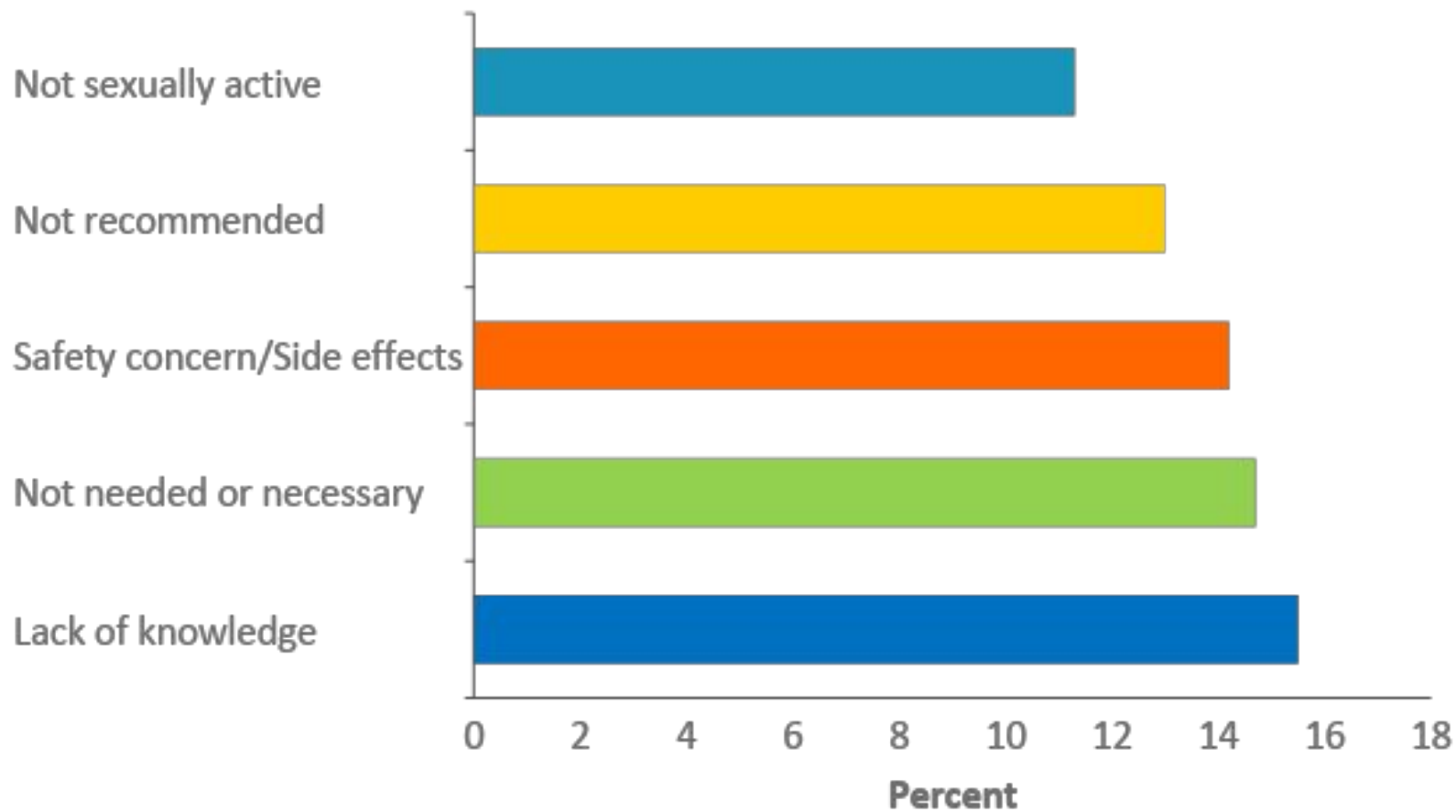


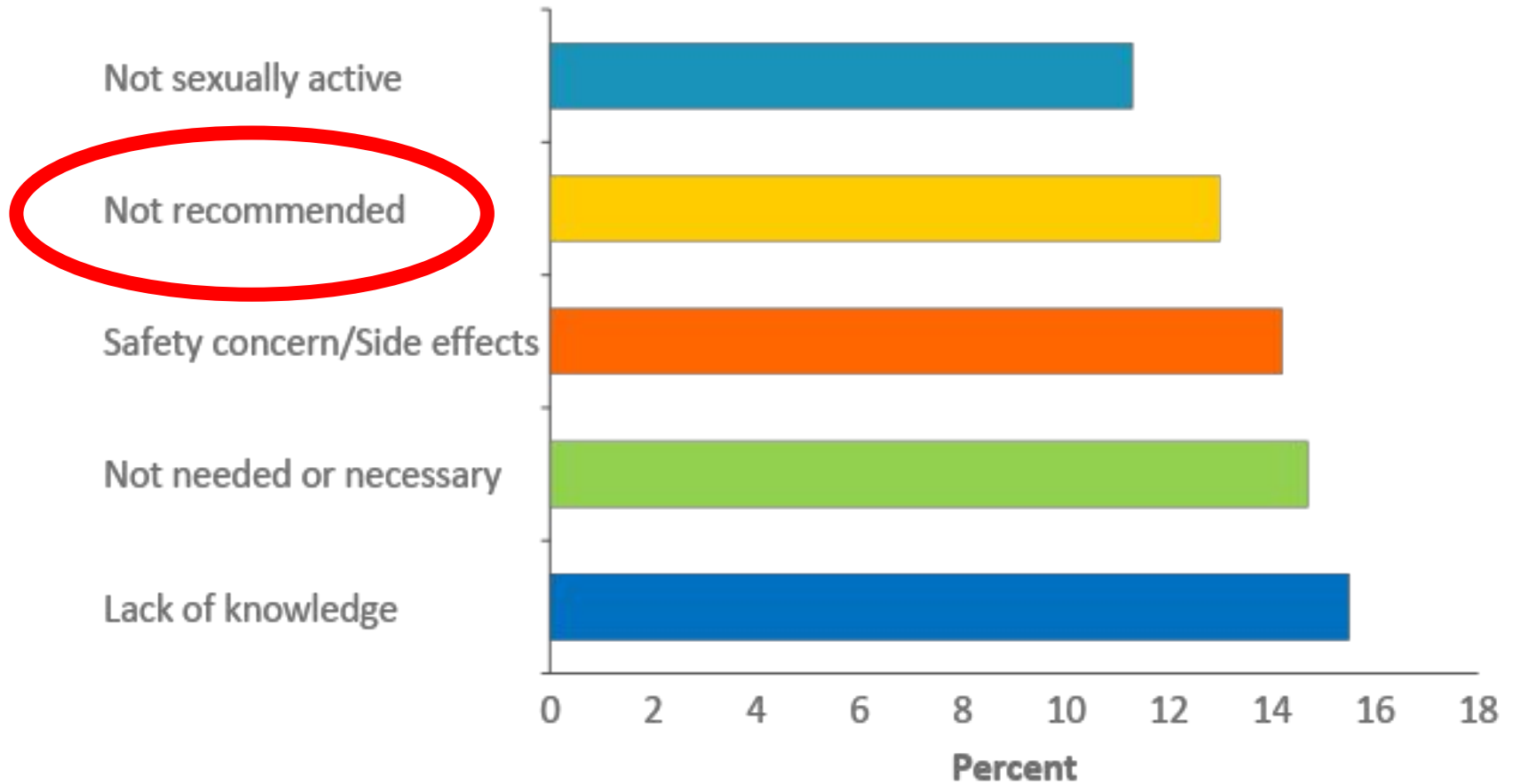
Or

How to say “I’m not telling your children its ok to have sex”
without actually saying it.

The things I want you to leave here knowing:

- 1) Fun facts about the HPV vaccine
- 2) Actual reasons kids don't get the HPV vaccine
- 3) Parents trust you
- 4) BUNDLE YOUR RECOMMENDATIONS
- 5) How to not miss opportunities via QI
- 6) Herd immunity works
 - a) So don't beat yourself up
- 7) Some examples of how to respond to parental concerns.





What ARE the side effects of the HPV vaccine?

Pain, redness, or swelling in the arm where the shot was given

Fever

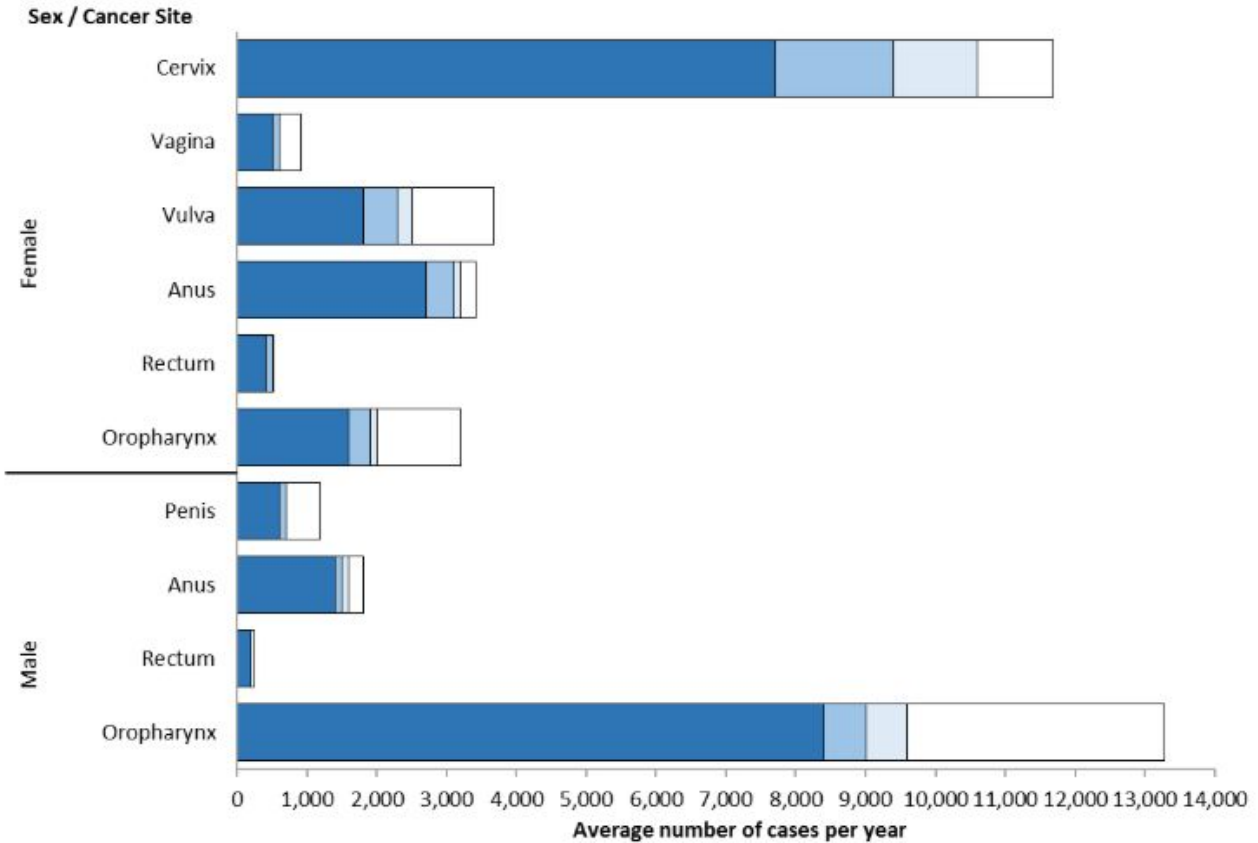
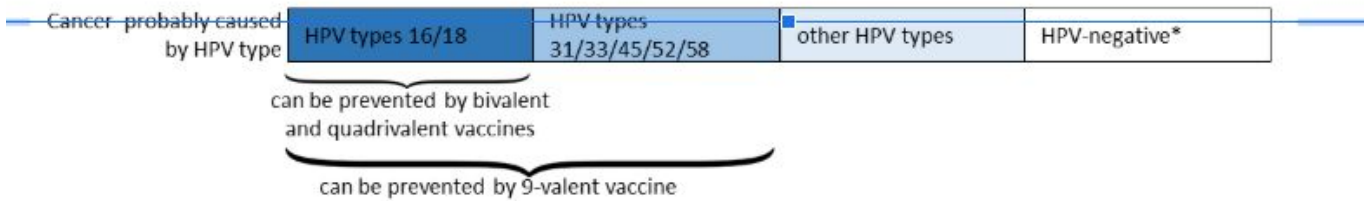
Headache or feeling tired

Nausea

Muscle or joint pain

Fun facts!

- 1) 120 types of HPV!
 - a) 80 cause cutaneous warts
 - b) 40 cause mucosal pathology
- 2) 79 million americans currently infected
 - a) 25%!
- 3) 91% of cervical cancers are from HPV
 - a) 91% rectal and anal cancers
 - b) 70% of oropharyngeal (5x as common in men)
 - c) 63% of penis cancers
- 4) Half of all cervical cancers are in women <50
 - a) 25% in ages 25-39
 - b) 4000 deaths per year

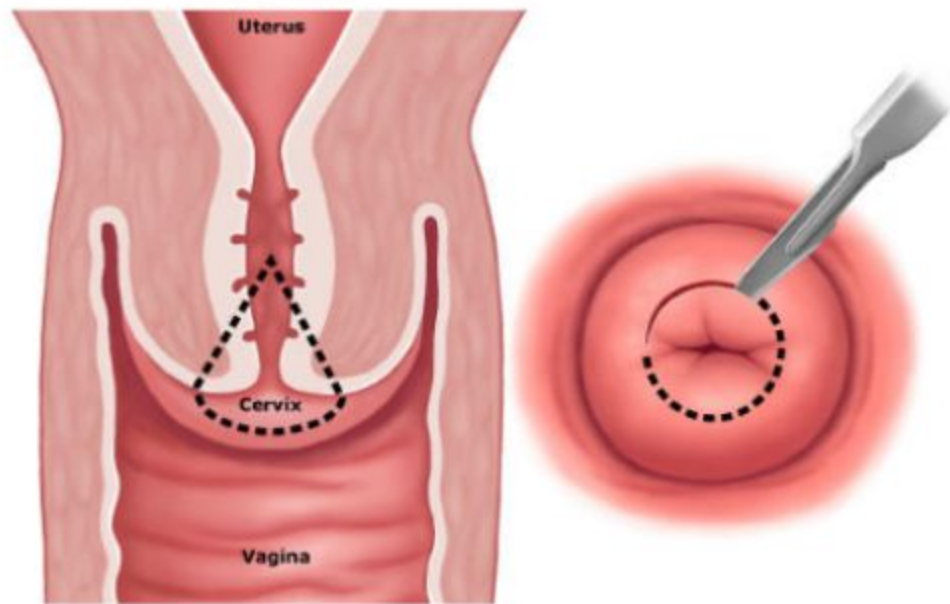


Fun facts!

- 5) 80% of sexually active people have been infected at some point in their lives

- 6) 20% of women have had an abnormal pap smear
 - a) 3.1 million per year are ABNORMAL
 - b) Half of those have to get biopsies and colposcopies

- 7) There 62 million pap smear performed PER YEAR



How to start the conversation

SAME WAY

SAME DAY

How to start the conversation

SAME WAY

SAME DAY

Tdap and meningitis vaccinations are also due at age 11/12.

Recommend the HPV vaccine in the same way and same day as those others

ITS A BUNDLE

If they don't interrupt you to ask more about the HPV, you don't need to let them know it is controversial.

How to start the conversation

SAME WAY

SAME DAY

“Today your kiddo is due for three vaccines, one to prevent tetanus and pertussis, one to prevent meningitis, and one to prevent cervical and oral cancers.”

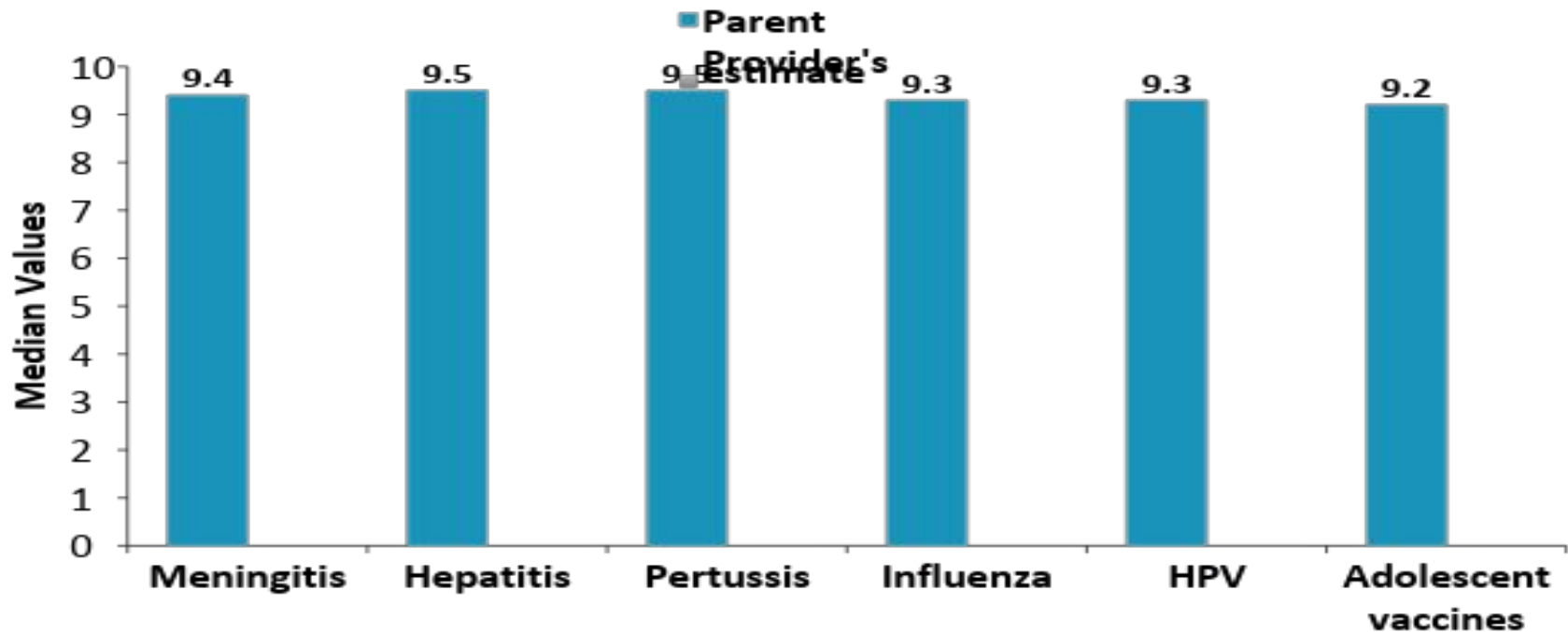
How to start the conversation

SAME WAY

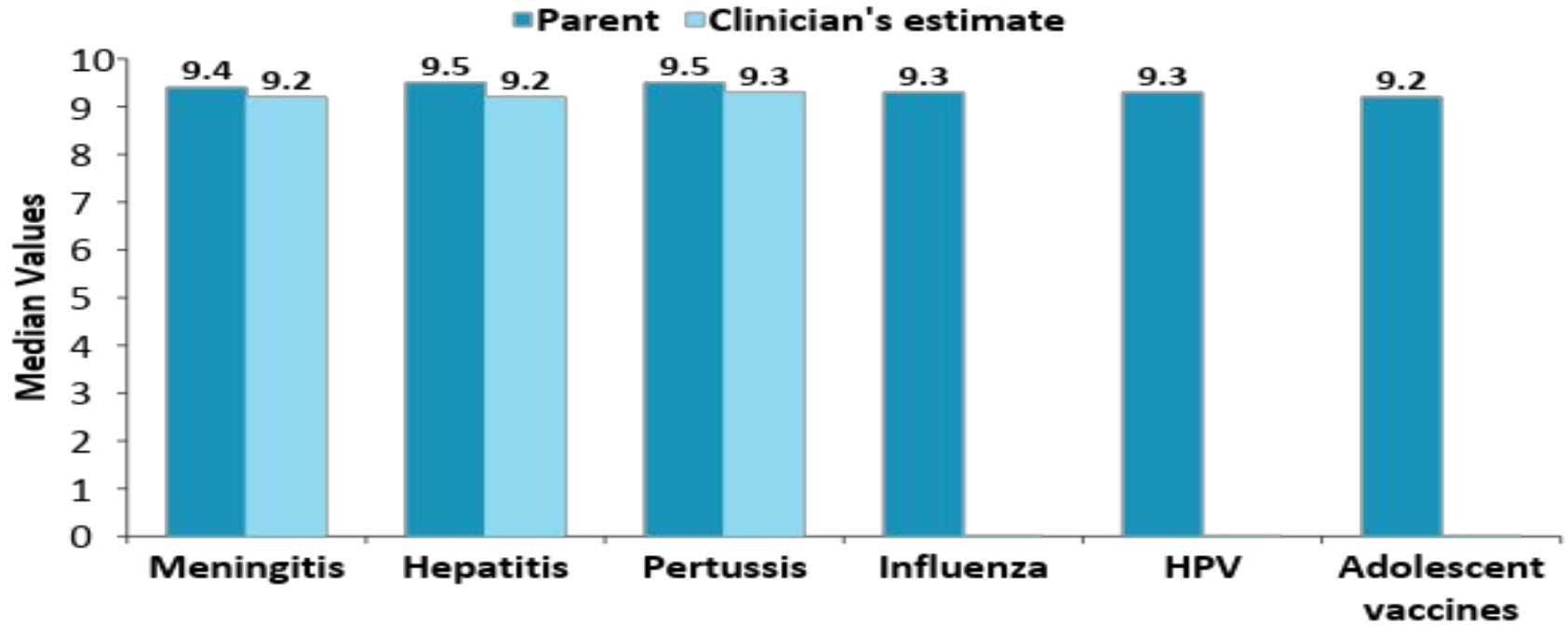
SAME DAY

“Now that Sophia is 11, she is due today for three important vaccines. The first is to help prevent an infection that can cause meningitis, which is very rare, but potentially deadly. The second is to prevent a very common infection, HPV, that can cause several kinds of cancer. The third is the “tetanus booster” which also protects against pertussis, so your child doesn’t get whooping cough, but also to protect babies too young to be vaccinated. We’ll give those shots at the end of the visit. Do you have any questions for me?”

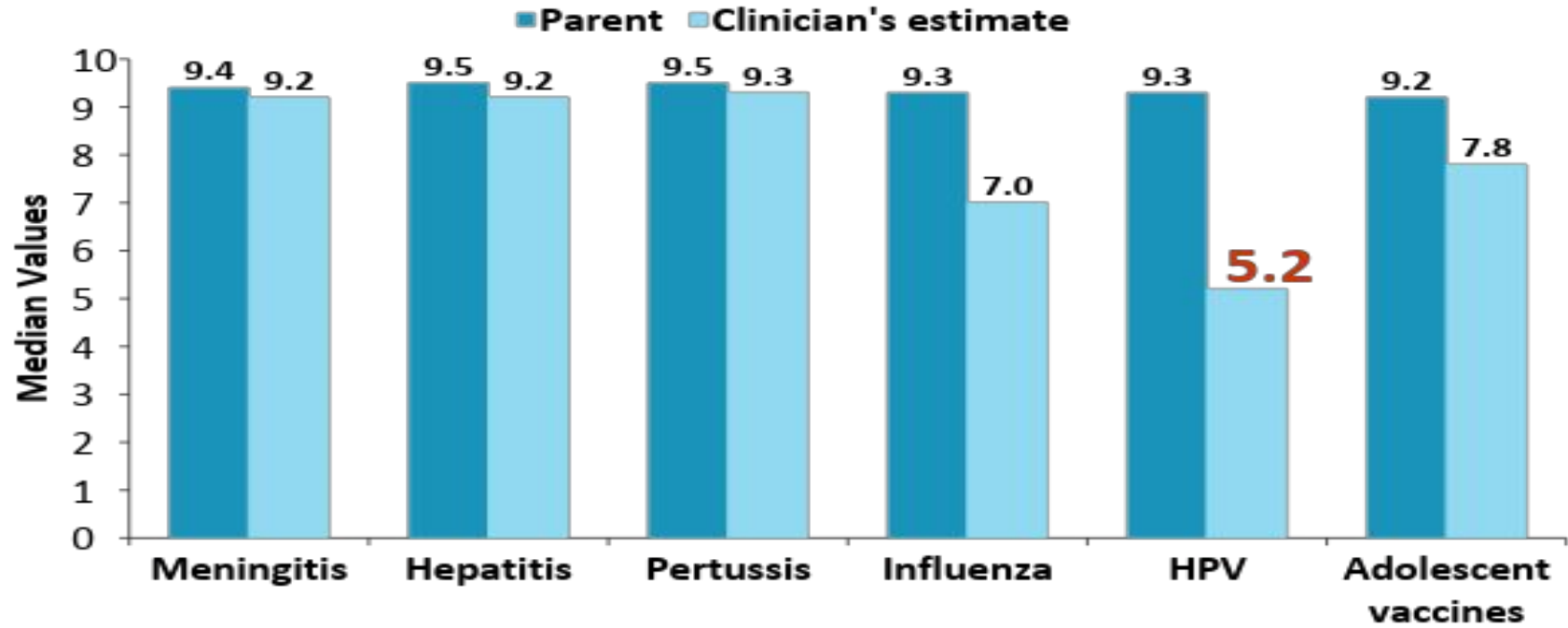
Value Parents place on the Vaccines

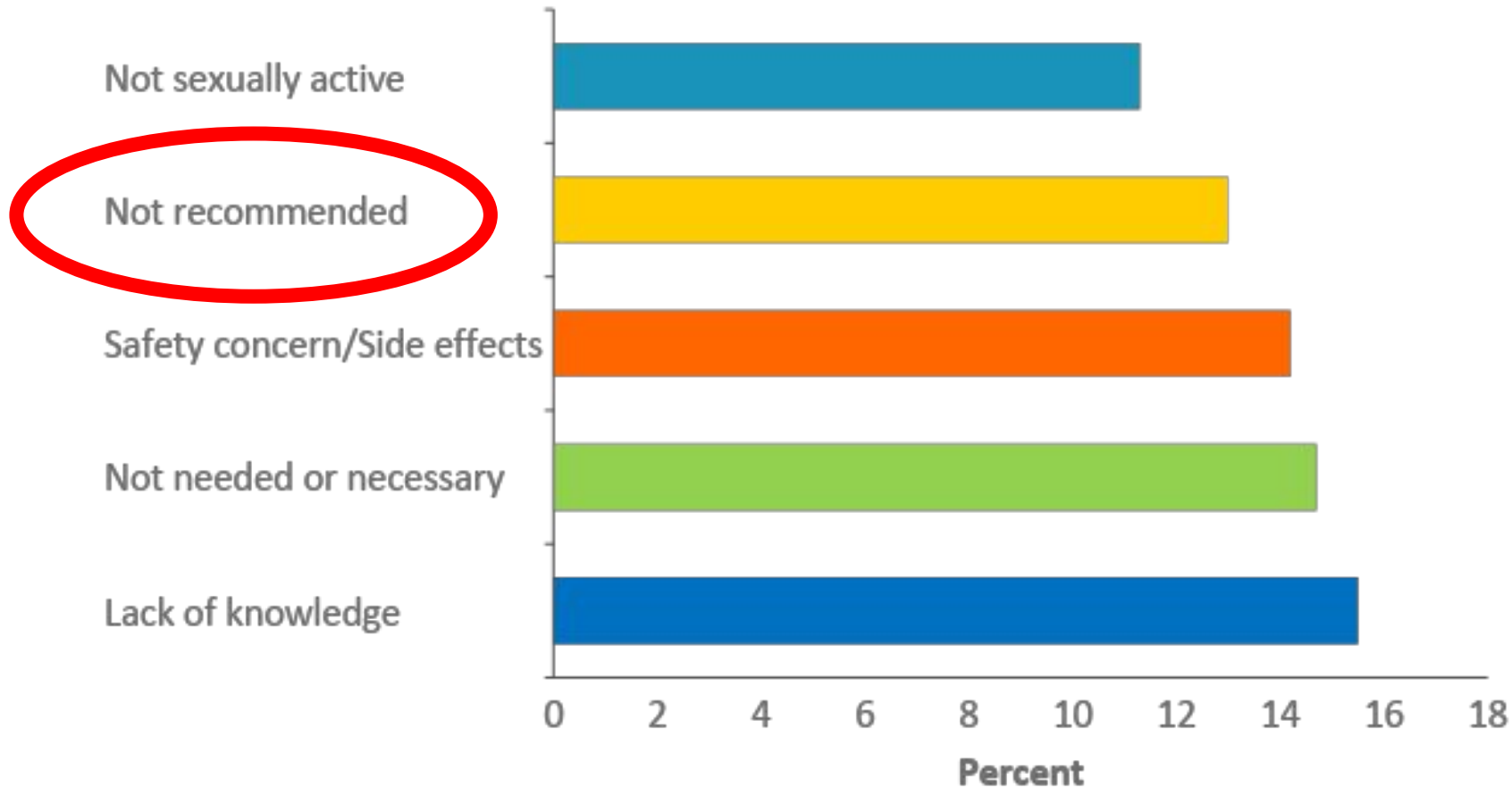


Clinician Estimations



Clinicians underestimate the value parents place on the HPV vaccine





How to finish the conversation

Most people will just accept the bundled recommendation.

If they don't, they LIKELY just need reassurance:

- 1) Ask what their specific concern is.
- 2) Respond knowledgeably to that specific concern(s)

Q and A

Do they really need it?

- 1) 80% infected
- 2) 80 million CURRENTLY infected
- 3) Responsible for 91% cervical cancers
- 4) Kills 4000 women per year
- 5) Cancer of young people
- 6) PAP smears - why even have them?

Q and A

Does my BOY really need it?

- 1) PAP smears - why even have them?
- 2) Oropharyngeal cancers - 5x as common in men.

Q and A

Why so young?

- 1) Your immune system creates the strongest immunity when you are younger.
 - a) If you start after your 15th birthday its THREE shots, not just two

- 2) It's like a seatbelt - put it on BEFORE the car accident.

Q and A

“I’m worried it will seem like permission to go have S-E-X”

- 1) Giving children the chicken pox vaccine doesn’t feel like permission to rub up on people with chicken pox, right?
 - a) If you make it clear that something is a bad idea, no amount of protection from it will seem like permission.
- 2) Make sure you talk about sex, so that they know HPV is not the biggest “risk” associated with sex - pregnancy is!
- 3) Oh. also. Lots of studies show that there no increased sexual activity among vaccinated youths.

Q and A

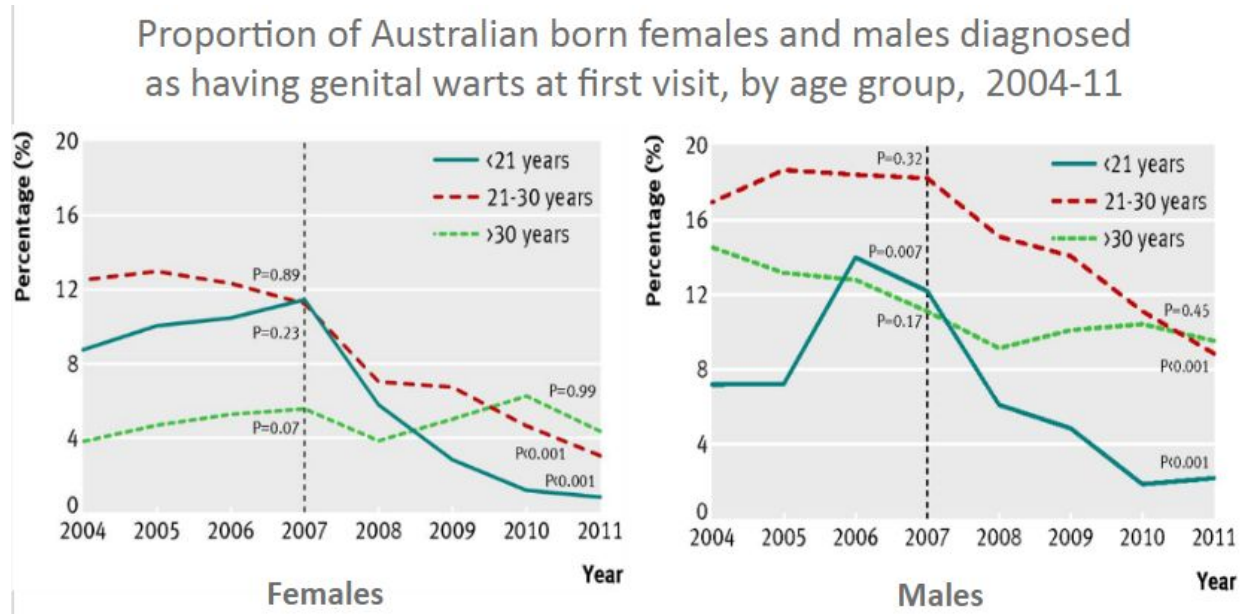
Does it actually work?

- 1) Short term outcomes
 - a) Genital warts
 - b) HPV prevalence
- 2) Mid term outcomes
 - a) CIN
 - b) Precancers
- 3) Long term outcomes
 - a) HPV associated cancer prevalence

Q and A

Does it actually work?

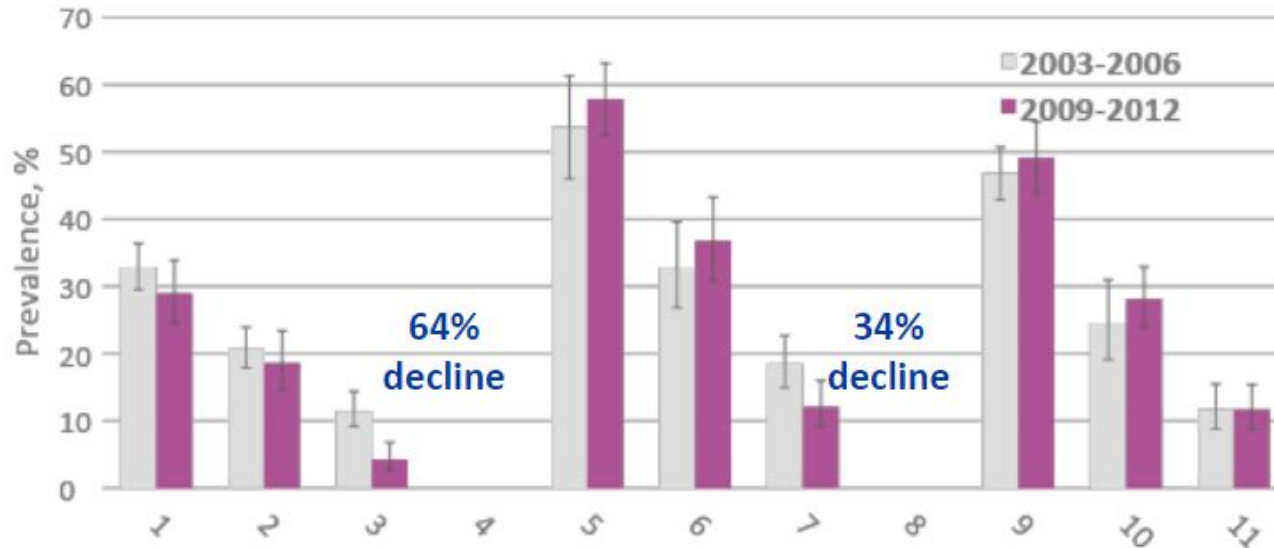
1) Short term outcomes



Q and A

Does it actually work?

1) Short term outcomes



Q and A

Does it actually work?

1) Short term outcomes

a) Review of 20 studies in 9 high income countries

i) In countries with >50% coverage, among 13-19 year olds

(1) HPV 16/18 prevalence decreased at least 68%

(2) Anogenital warts decreased by 61%

Q and A

Is it safe?

- 1) It doesn't have ANY ACTUAL VIRUS IN IT, cannot give you HPV
- 2) 4 different reporting agencies, none of which have seen any increase above baseline for negative outcomes
- 3) There ARE side effects, but they are the same side effects for any vaccine:
 - a) Injection site reactions: pain, redness, and/or swelling in the arm where the shot was given
 - b) Systemic: fever, headaches

Q and A

Why isn't it required for school?

- 1) Because the people who create school requirement lists are not public health officials.
 - a) Recommended by the CDC, pediatric, adolescent, OB and family medicine groups.

Q and A

Does it cause infertility?

- 1) Nope. Participants are perfectly fertile 12 years on. If they want to be.

How to RE-start the conversation

If they've already gotten the 11/12 year old shots and are back in for their 16 year old well child...

“Looks like you're (child is) due for your/their HPV vaccine. Do you have any questions about that shot?”

HAIL THE HERD

Don't feel bad if you "strike out"

Some people just cannot be persuaded.

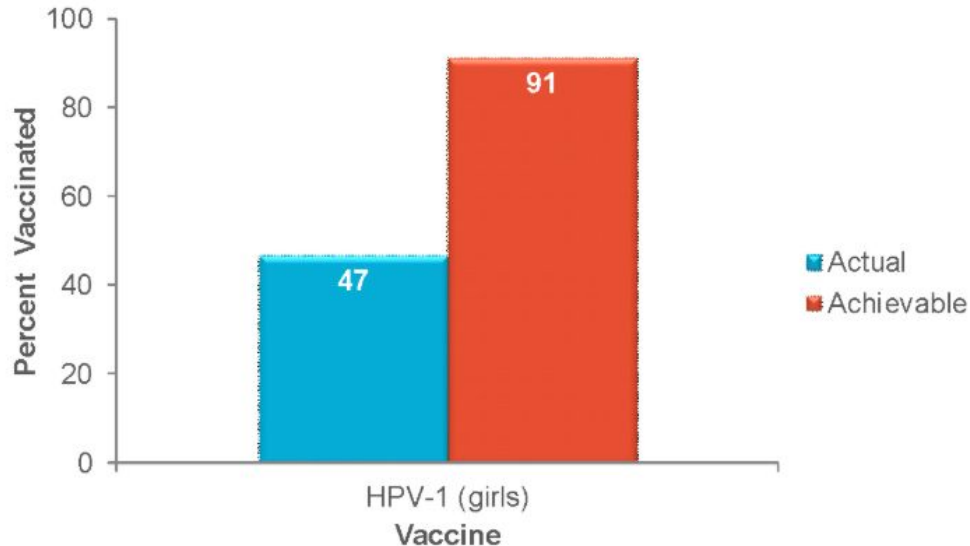
But the herd will prevail, a 2019 study showed:

“Prevalence of the types of oral human papillomavirus (HPV) infections prevented by the HPV vaccine dropped by 37% over an eight-year period in unvaccinated U.S. men ages 18 to 59.”

Missed opportunities?

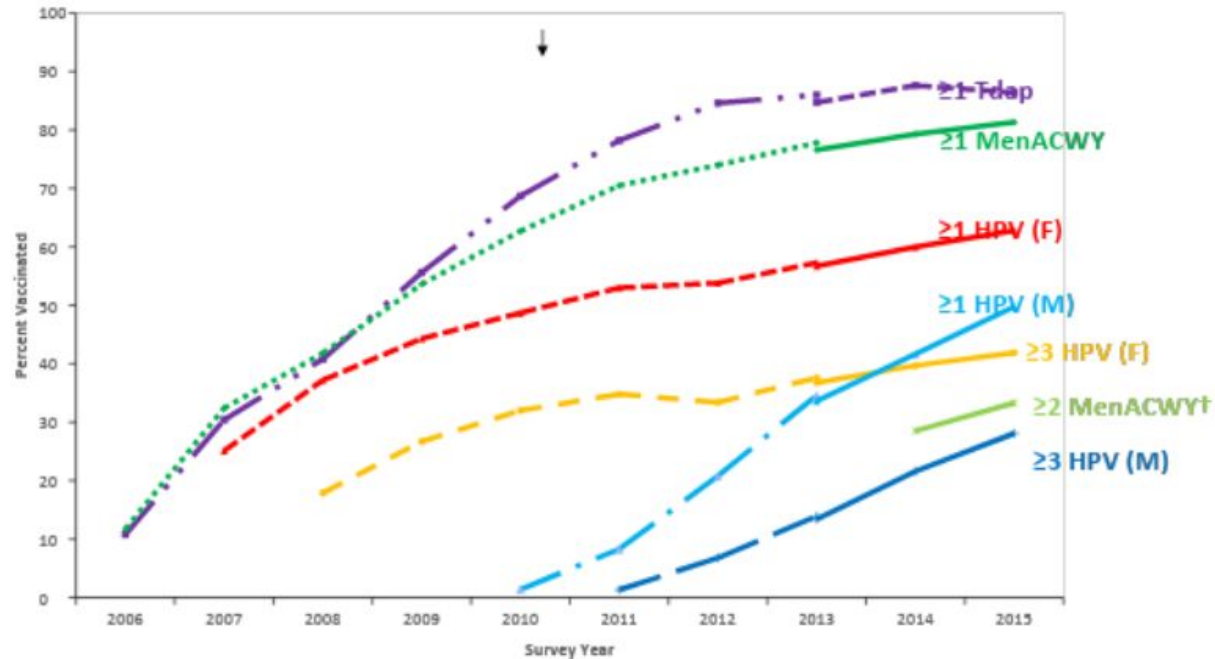
Every time a kid walks out without a vaccine is a missed opportunity.

Impact of Eliminating Missed Opportunities by Age 13 Years in Girls Born in 2000



Missed opportunities?

Every time a kid walks out without a vaccine is a missed opportunity.



Missed opportunities?

- 1) Does your clinic have an EHR? Does it have templates for well child visits?
 - a) EDIT THOSE TEMPLATES!
- 2) Does that EHR have a health care maintenance section?
 - a) Create a red flag warning!
- 3) Does your rooming staff tell them what vaccines they are due for BEFORE the provider gets in?
 - a) Do they have access to what is recommended / what they are missing?
- 4) Do you have standing orders for giving vaccines WHENEVER desired without appt?
- 5) Do you check for missing vaccines at ANY visit?
- 6) Do you call children who are missing well child exams to get them scheduled?
- 7) Can you print “gap lists” to proactively create well child checks for those missing them?

Merck Patient Assistance Program

Eligibility:

- Uninsured
- Over 18
- Less than 400% FPL
 - \$49,960 or less for individuals
 - \$67,640 or less for couples
 - \$103,000 or less for a family of 4

Provider:

- You buy the first box
- Fax an eligibility form for each patient
- Merck sends you a free replacement dose for each dose administered

Website: <https://www.merckhelps.com/gardasil%209>

Community outreach

Doc in a box at school carnivals

Answer questions at parent teacher conferences

Write a letter to the editor of the local paper

Anyone running a school based health center? Do you do vaccines?

For more information on the Immunization Program or for HPV Resources:

Oregon Immunization Program:

<https://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/VACCINESIMMUNIZATION/pages/index.aspx>

HPV Resources:

<https://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/VACCINESIMMUNIZATION/GETTINGIMMUNIZED/Pages/hpv.aspx>

VFC Help Desk: 971-673-4VFC

vfc.help@state.or.us

For more information visit our web page:

PE 46 Web page

www.healthoregon.org/PE46

Reproductive Health Program

www.healthoregon.org/rhresources