CDC reveals unacceptably low rates for the HPV vaccine and other adult immunizations

By ACSH Staff — February 6, 2015

Yesterday, Womenshealth.gov, the official website of the Office on Women's Health of the US Department of Health and Human Services published the story [1] of Michelle Whitlock, who was diagnosed with cervical cancer a month before her 27th birthday. The author describes the shock of receiving the diagnosis, as she had always thought it could never happen to her. I kept thinking: Not me, I am not that girl, she writes.

The cancer was a result of being infected with human papillomavirus (HPV), the most common sexually-transmitted infection in the U.S., and a known cause of cervical (and several other) cancer. She describes the feeling of isolation due to the stigma attached to HPV. However, as she points out, HPV is incredibly common, and a person can contract it from only one sexual encounter, with or without a condom. To treat the cancer, the author had her cervix and uterus removed and also underwent radiation and chemotherapy.

Michelle Whitlock was infected with HPV in 2001 before the HPV vaccine was available. She concludes, I got cervical cancer, but you don’t have to and neither do your children [↩]. Today, there are vaccines that protect against HPV-related cancers and genital warts. I only wish they had been available when I was younger.

Indeed, the HPV vaccination, first approved in 2006, protects against 70 percent of cervical cancers, as well as 90 percent of genital warts. Three doses of the HPV vaccine are recommended for girls and women between the ages of 9 to 26. The HPV vaccine is also recommended for boys and men aged 9 to 21.

However, CDC’s Morbidity and Mortality Weekly Report [2] (MMWR), published Thursday, revealed that the rates of adult vaccination including the HPV vaccine are unacceptably low. In 2013, not even 40 percent of women between the ages of 19 and 26 reported receiving more than one dose of the HPV vaccine, according to the report. Only about 6 percent of men aged 19-26 reported receiving more than one dose.

The report also disclosed low vaccination rates for five other vaccines on the approved adult vaccination schedule, including pneumococcal, tetanus, Hepatitis A, Hepatitis B, and Herpes Zoster (shingles). For example, the tetanus booster is recommended every 10 years to protect
against the potentially severe infection of the nervous system. However, the report stated that about 63 percent of adults aged 19 to 49, 64 percent of adults aged 50 to 64, and 56 percent of adults over age 65 received the tetanus booster in the 10 years before 2013. Also, hepatitis B vaccine coverage was only 25 percent for adults aged 19 and older much lower than the target rate of 90 percent.

Adult vaccinations are important to protect against several preventable diseases. However, there are many financial, informational, and operational obstacles to adult immunization. For example, physicians are often unaware of the recommendations [3], and therefore do not communicate them to their patients, who are uninformed of the need for booster doses and other adult-specific immunizations. Financial barriers may also intercede against needed protection. Dr. Susan Rehm, of the Department of Infectious Disease at the Cleveland Clinic, laments [4]: The story of adult vaccination is the story of missed opportunities.

For further information on the barriers to broader adult vaccination coverage, read ACSH’s publication: Adult Immunization: The Need for Enhanced Utilization [5].

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[2] http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6404a6.htm?s_cid=mm6404a6_w