

INFORMATION REPORT

TO: Mayor and Members Board of Health	WARD(S) AFFECTED: CITY WIDE
COMMITTEE DATE: September 17, 2012	
SUBJECT/REPORT NO: Expansion of the Human Papillomavirus (HPV) Publicly Funded Immunization Program (BOH12024) (City Wide)	
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Council Direction:

N/A

Information:

Human Papillomavirus (HPV) is a virus that is passed between two people, mostly through sexual activity but also by skin-to-skin contact. Each year in Ontario, HPV results in 254 deaths, 1090 cancers and 14,666 cases of genital warts. To decrease the incidence of HPV in Ontario, the Ministry of Health and Long-term Care (MOHLTC), in 2007, announced the public funding of HPV vaccine for all girls in Grade 8. This program is administered as part of the school-based immunization program under the Ontario Public Health Standards (2008).

The HPV Immunization Program has recently been expanded to include a catch-up program for eligible females. Female students, who have not completed their HPV immunization series or did not receive the vaccine in Grade 8, may receive publicly funded HPV vaccine until the end of Grade 12. In addition, a one-time catch-up program will be offered until June 2013 for females in the 2007/2008 school cohort year who are no longer in high school. It is anticipated that approximately 6000 girls remain eligible to receive vaccination under the extended eligibility criteria.

Given the number of girls who remain eligible to receive HPV vaccine, Public Health Services will be initiating the following response to ensure access to the HPV vaccine:

1. Issuing a medical advisory to physicians to notify them of the expansion of the HPV program and the eligibility criteria.
2. Distribute HPV vaccine to physicians by special order for the purpose of catch-up. The routine Grade 8 school-based program will continue to be delivered by the public health unit.
3. Letters will be mailed to all eligible females notifying them of the extended eligibility along with information about the HPV vaccine and where they can access the vaccine.
4. Offer HPV vaccine in public health clinics for individuals without a family physician.

There will be no impact on budget or staffing levels for the implementation of these initiatives.

It is difficult to assess what the uptake of vaccine will be for those who remain eligible. There is the risk that if Grade 8 students are provided with the opportunity to defer HPV immunization to a later date, immunization rates for the school-based program may decrease. Any decrease in HPV immunization rates may impact the ability of PHS to meet the accountability agreement indicators signed with the MOHLTC. Vaccine demand in the community, as well as, uptake in the schools will be monitored for their impact on immunization rates and will be reported back to the Board of Health.