

May 6, 2015

Bruce Gellin, MD, MPH
Deputy Assistant Secretary for Health
Director, National Vaccine Program Office
U.S. Department of Health and Human Services
200 Independence Avenue SW, Room 715H
Washington, DC 20201

Dear Dr. Gellin:

The Association of Immunization Managers (AIM), representing the 64 federally-funded state, local and territorial immunization programs, appreciates this opportunity to comment on the HHS National Vaccine Advisory Committee HPV Working Group Proposed Recommendations. AIM fully supports the NVAC HPV Working Group's recommendations.

Immunization program managers play an important role in the nation's highly successful childhood and adolescent immunization efforts. High immunization coverage rates in children and adolescents have prevented millions of infections and saved countless lives. However, while other childhood and adolescent vaccination rates have climbed to high levels, HPV vaccination rates remain unacceptably low.

Effective vaccines that protect against many strains of HPV are currently available but only 37% of girls and 13.9% of boys aged 13-17 years had completed the 3 dose HPV vaccine series in 2013. (MMWR 63(29); 625-33). HPV coverage rates remain far below other ACIP recommended adolescent vaccines as well. The coverage rate in adolescents aged 13-17 years for Tdap was 89.1% in 2013, and 77.8% for meningococcal vaccine (MMWR 63(29); 625-33). Were HPV vaccine consistently provided to adolescent patients along with Tdap and meningococcal vaccine, HPV rates would be substantially higher. These low rates of HPV vaccination represent millions of adolescents and children unprotected from the dangers of HPV and HPV-related cancers.

AIM has both created and participated in activities focused on increase HPV vaccination rates. AIM has held a total of 9 HPV Call to Action conference calls to provide information and ideas for immunization program managers to increase HPV vaccine coverage rates. AIM also participated in the American Cancer Society HPV Roundtable and participates on the Roundtable's pharmacy task force.

Eighteen immunization programs were awarded Prevention and Public Health Funds (PPHF) to address HPV coverage rates through joint initiatives with immunization stakeholders,

communication campaigns, IIS-based reminder/recall, assessment and feedback (AFIX), and strategies targeted to improve immunization providers' knowledge, skills, and adherence to current HPV vaccination recommendations. For example, in 2014, Massachusetts brought together 29 organizations to create a coalition for HPV/cervical cancer awareness. AIM will continue to work with immunization programs to increase HPV coverage rates and commends NVAC for focusing recommendations in this area.

AIM supports the NVAC recommendations and believes they are critical to improving HPV vaccination rates. AIM supports improving communication about HPV vaccine, including providing a strong and consistent recommendation to vaccinate, and strengthening the immunization system to maximize access and support of adolescent vaccines. AIM is dedicated to working with our members to create a substantial and lasting impact on HPV vaccination rates. AIM looks forward to working with NVPO, along with federal and non-federal stakeholders, to meet the recommendations laid out in the proposed recommendations.

Thank you again for this opportunity to offer our comments on the goals and objectives of the HHS National Vaccine Advisory Committee HPV Working Group Proposed Recommendations.

Sincerely,

Pejman Talebian, MA, MPH

Chair

Claire Hannan, MPH Executive Director

Clair Hannan