More children are being vaccinated against the human papilloma virus (HPV) – and protected for life against the cancers it causes – according to data from the athenahealth network.

The proportion of 11-to-12-year-old children receiving an HPV vaccine during an office visit rose from 13.2 percent in 2013 to 18.6 percent in 2016. That increase in children receiving their first vaccine at a younger age drives vaccination rates for all age groups: The proportion of patients receiving an HPV vaccination by age 13 rose from 27.4 percent to 38.5 percent during the same time period, and by the end of 2016, 92.2 percent of patients who had received at least one HPV vaccination by age 13 were fully vaccinated by age 15.

While vaccination rates are rising to nearly 40 percent of children overall, pediatricians remain concerned. “I would love to see those numbers at 90 percent like other vaccines,” says Sara Goza, M.D., pediatrician with First Georgia Physician Group Pediatrics of Privia Medical Group and on the board of directors of the American Academy of Pediatrics. “These rates are good, considering how hard it has been.”

First licensed for use in 2006, the vaccine for HPV has met more resistance from parents of pediatric patients than any other recommended vaccine except the MMR vaccine, report providers from the network. A 2010 survey of parents of more than 4,000 girls ages 13 to 17 showed that 31 percent of parents delayed or refused the HPV vaccine.

The 2017 data from athenaNet indicates that acceptance of the HPV vaccine may be, at last, on the rise.

The HPV vaccine “has been a really hard sell,” says Goza. The decade since the introduction of the new vaccine has simultaneously seen a rise in information available online about vaccinations – both factual and false.

“Having done this for 30 years, parents didn’t used to question vaccines at all. But now, if you Google ‘vaccine,’ you don’t want to look at the first 15 search results because they’re all going to be anti-vaccine,” she says. “I read some of them, too, and think that sounds really bad, even though I know differently. So, I understand their fear of it.”
Increased awareness of the link between HPV infections and cervical cancer may be winning out over misinformation. One in four adults – some 80 million people in the United States – are infected with some strain of HPV; the group of viruses leads to more than 30,000 cancer diagnoses in men and women in the U.S. and 500,000 cases worldwide each year.

Awareness is, in short, turning the tide. “We are seeing a decrease in cervical cancer, and we’re not seeing the virus on recurring pap smears,” says Alberto Sirven, M.D., ob/gyn and senior partner at West Kendall OB/GYN in Miami, and member of Florida Woman Care, a single-specialty women’s healthcare group. “I think the vaccine has a lot to do with it.”

With boys now being vaccinated at nearly the same rate as girls, according to athenahealth data, clinicians may encounter similar drops in throat and other HPV-related cancers. “It’s also important,” says Sirven, “for parents to think not only about protecting their male children, but also their sons’ future partners.”

Because original studies of effectiveness and safety of the vaccine were designed for people who had never been exposed to the virus – prepubescent children – payers may not cover the cost of HPV vaccines for adults due to a lack of data. Regardless, Sirven and his partners are seeing more patients in their 20s asking for the vaccine.

When it comes to HPV, understanding what is on patients’ minds is key, says Goza. Offering the HPV vaccine, she says, “is different from saying ‘I’m going to protect your child from an infection now.’ It’s saying ‘I’m going to prevent your child from getting a cancer when they’re grown and have children of their own.’ That’s a little harder to get your head around.”

At Goza’s practice at Privia, the time pediatricians spend in the exam room with patients and their parents is protected from data entry and other work to enable those thoughtful conversations. “We know that with a strong recommendation from trusted doctor, the likelihood of getting a parent to say yes is higher.”

But to earn that trust, Goza must counter inaccurate information while respecting parents’ wish to do their own research.

“I say ‘Go to this site [the CDC or another source of accurate information] and read about it, and then let me know.’ Encouraging them to research it themselves at a trusted site is shared decision-making – and that works well for me,” Goza says. “I still have parents who are absolutely never going to let their children be vaccinated. Then, I encourage the child to read about it, so that once they’re an adult they can make the decision on their own.”

Gale Pryor is associate editor of athenaInsight.