Scottish Government Health Protection Team

PE1477 Gender neutral HPV vaccination

• What is the Scottish Government's view on the petitioner's call to extend the HPV immunisation programme to boys in Scotland?

We take advice on the introduction of vaccines from the Joint Committee on Vaccination and Immunisation (JCVI), the independent expert advisory group who provide advice on vaccination issues to all UK Health Departments. The JCVI considered in detail the available evidence on cervical cancer and its epidemiology prior to the introduction of the HPV vaccination programme in 2008. The JCVI did not recommend the vaccination of boys at that time.

As with all vaccination programmes, the JCVI continue to monitor all available evidence in respect of recommendations, and advice can be updated if new information or evidence becomes available. The Scottish Government will of course consider carefully any future JCVI recommendations in respect of HPV vaccination.

 What are the Scottish Government's views on the issues raised in the petition and during the discussion on the petition at the meeting on 11 June 2013?

We note the discussions around this issue. The main aim of the HPV vaccination programme in Scotland is to protect girls against cervical cancer, rather than protecting against the risks associated with HPV overall.

The JCVI previously considered detailed cost-effectiveness modelling of the benefits of a vaccination programme. The results showed that routine vaccination of girls aged 12 to 14 years with an HPV vaccine could reasonably be expected to be cost effective at 80% vaccine coverage, assuming the average duration of vaccine protection is at least 10 years. Vaccination of boys in addition to girls was considered unlikely to be cost-effective at that point. Additionally, the JCVI considered that there was insufficient evidence on the protective effects of the vaccine against cancers affecting males such as anal, head and neck cancers. The JCVI concluded that when more data became available, high risk groups such as men who have sex with men would be considered.

The JCVI again reviewed HPV vaccination in June 2012. It concluded given the expected effects of immunisation of girls on HPV transmission and the indirect protection of boys that accrues from high levels of coverage of HPV vaccination in girls, vaccination of boys in addition to girls was unlikely to be cost-effective. Therefore, the JCVI did not recommend vaccination of boys.

Further JCVI consideration of HPV vaccination

The JCVI asked the Health Protection Agency (HPA) to undertake modelling work to assess the impact and cost effectiveness of men-who-have-sex-with-men (MSM), since this group would be unlikely to receive direct protection from the vaccination of

girls. At the same time, the JCVI also issued a call for evidence to support further modelling work of other aspects of the potential benefits of HPV vaccination, including a 2-dose schedule; the potential benefits for those currently not offered immunisation; and vaccines that offer protection against a large number of HPV types. In terms of a Scottish response to JCVI request for evidence:

- HPS and the Scottish HPV Reference Laboratory in Edinburgh submitted a
 joint response which stated that "it is too early to determine whether femaleonly immunisation has had an impact on HPV prevalence & associated
 disease in men we do not routinely sample males as part of the national
 surveillance programme. Given the recent introduction of Gardasil into the
 national programme (August 2012), it will be of interest to monitor the
 prevalence of genital warts in both males and females".
- Additionally, the HPV Research Group and Scottish HPV Investigators have undertaken further research and have concluded that "There is early evidence of herd immunity in unvaccinated women and men of similar ages in Australia and Ohio, however, recent work on MSM, HIV, HPV and anal cytology suggests HPV vaccination might be useful in MSM. There is accumulating evidence about the UK health burden from non-cervical cancers but more work is needed on economic and potential vaccine impact".

Scottish Ministers, along with their UK counterparts, will consider any future recommendations made by the JCVI.

Health Protection team Scottish Government 15 August 2013