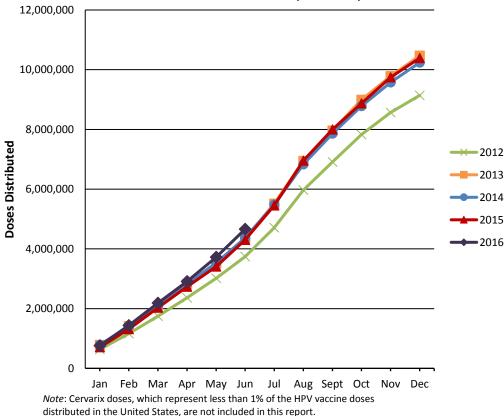
## Human Papillomavirus (HPV) Vaccination Report: United States

Working Together to Reach National Goals for HPV Vaccination

The Morbidity and Mortality Weekly Report (MMWR)\* recently released the 2015 National Immunization Survey-Teen (NIS-Teen) data, which provides national, state, regional, and selected local area estimates of vaccination coverage. As reported in the MMWR, "In 2015, coverage with each HPV vaccine dose increased among males, however, among females,  $\geq 1$  dose HPV vaccination coverage increased only modestly, and no change was observed in coverage with  $\geq 2$  and  $\geq 3$  HPV doses." As in prior years, coverage with  $\geq 1$  HPV vaccine dose was lower than coverage estimates for two other vaccines routinely recommended at age 11–12 years, highlighting ongoing missed opportunities for HPV vaccination when other recommended vaccines are administered. Next year, a **revised Healthcare Effectiveness Data and Information Set (HEDIS) measure will be implemented to evaluate receipt of the three recommended vaccines by age 13 years in females and males combined in one composite indicator, \*\* facilitating health plans' and providers' assessment of their performances in administering these vaccines on time to adolescents. See page 2 of this report for 2015 NIS-Teen vaccination coverage, as well as a data summary for the United States.** 

### 2016 HPV Vaccine Distribution Trends in the United States

Below are available year-to-date totals of CDC and non-CDC distributed HPV vaccine doses of Gardasil and Gardasil 9 in your state or city. CDC recommends examining vaccine distribution data for trends to approximate recent HPV vaccine administration, as distribution data can inform action in real time to increase vaccination.



### Year-to-date Total of Distributed<sup>+</sup> Gardasil and Gardasil 9 HPV Vaccine Doses in the United States (2012-2016)

September 2016

# Year-to-Date Total of Distributed<sup>+</sup> Gardasil and Gardasil 9 HPV Vaccine Doses, US (2015-2016)

	2015	2016	% change	
Jan	704,540	758,591	7.7%	
Feb	1,309,896	1,435,056	9.6%	
Mar	2,028,793	2,184,949	7.7%	
Apr	2,730,981	2,911,014	6.6%	
May	3,405,341	3,722,032	9.3%	
Jun	4,302,453	4,661,314	8.3%	
Jul	5,455,515			
Aug	6,954,029			
Sept	7,997,691			
Oct	8,873,834			
Nov	9,744,100			
Dec	10,389,014			

<sup>&</sup>lt;sup>†</sup>These data represent an estimate of all Gardasil and Gardasil 9 HPV vaccine doses distributed in the United States.

\*To read the full *MMWR* about the 2015 NIS-Teen analysis, visit: <u>http://www.cdc.gov/mmwr/volumes/65/wr/mm6533a4.htm?s\_cid=mm6533a4\_e</u> \*\*National Committee for Quality Assurance. NCQA updates quality measures for HEDIS® 2017 (press release). Washington, DC: National Committee for Quality Assurance; 2016. <u>http://www.ncqa.org/newsroom/details/ncqa-updates-quality-measures-for-hedis-2017</u>

Have questions? Contact us at preteenvaccines@cdc.gov.



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### Estimates of Teen Vaccination Coverage Nationwide: 2014-2015

To assess vaccination coverage among teens aged 13–17 years, CDC analyzed the 2015 NIS-Teen survey data collected through questionnaires completed by vaccination providers following consents by interviewed parents or guardians.

#### Estimated National Vacicnation Coverage, Teens Aged 13-17 Years, NIS-Teen 2014-2015

			HPV							
	≥1 Tdap	≥1 MenACWY	Females			Males				
			≥1 dose	≥2 doses	≥3 doses	≥1 dose	≥2 doses	≥3 doses		
United States										
2014	87.6(±0.9)	79.3(±1.1)	60.0(±1.9)	50.3(±1.9)	39.7(±1.9)	41.7(±1.8)	31.4(±1.7)	21.6(±1.6)		
2015	86.4(±1.0)	81.3(±1.0)*	62.8(±1.8)*	52.2(±1.8)	41.9(±1.8)	49.8(±1.8)*	39.0(±1.7)*	28.1(±1.6)*		

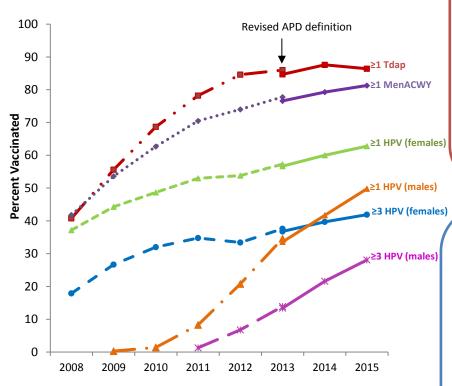
Ref: Reagan-Steiner et al. National, Regional, State, and Selected Local Area Vaccination Coverage among Adolescents Aged 13–17 Years: United States, 2015. Morbidity and Mortality Weekly Report (MMWR). August 26, 2016.

Abbreviations: Tdap= tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine; MenACWY= quadrivalent meningococcal conjugate vaccine.

Tdap, MenACWY, and HPV vaccines are routinely recommended for adolescents aged 11–12 years.

\*Statistically significant (p<0.05) increase from 2014 estimates.

### Estimated Vaccination Coverage Among Adolescents Aged 13-17 Years, United States, NIS-Teen, 2008-2015



NIS-Teen estimates from 2008–2013 connected with dashed lines are previously published estimates using the previous adequate provider data (APD) definition. NIS-Teen estimates from 2013–2015 connected with solid lines use the revised APD definition. For complete footnotes, consult the MMWR article:

http://www.cdc.gov/mmwr/volumes/65/wr/mm6533a4.htm?s\_cid=mm6533a4\_e

2015 NIS-Teen HPV Data Summary: US

Compared to estimates from 2014, HPV vaccination coverage in the United States:

- Significantly increased from 2014 to 2015 in ≥1 dose coverage among females. There were nonsignificant increases in ≥2 and ≥3 dose coverage among females.
- Significantly increased from 2014 to 2015 in ≥1, ≥2, and ≥3 dose coverage among males.

Consult this CDC-authored publication for information on interpreting survey findings:

http://www.sciencedirect.com/science/article/pii/S074937 9701002756

### **Resources to Increase HPV Vaccination Coverage**

- Get involved with partners, such as the American Cancer Society (ACS). Information on the National HPV Vaccination Roundtable can be found at: <u>http://www.cancer.org/healthy/informationforhealthca</u> reprofessionals/nationalhpvvaccinationroundtable/
- View the latest #PreteenVaxScene webinar, "Research Project Update: AFIX Program Strategies for Improving HPV Vaccination Rates in the Field": https://www.youtube.com/watch?v=MAF3\_Mt7zdQ
- Visit TeenVaxView for comprehensive interactive adolescent vaccination coverage data online at: <u>https://www.cdc.gov/vaccines/imz-</u><u>managers/coverage/teenvaxview/index.html</u>



