Strategies to Improve Human Papillomavirus (HPV) Vaccination Rates Among Students at Johns Hopkins University

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Introduction

- Study Objectives: Increase HPV vaccination in students attending Johns Hopkins University and create a toolkit of strategies for use on other college campuses.
- HPV is the most common sexually transmitted infection in the U.S.:1
 - o 42.5% of adults have genital HPV.
 - o 7.3 % of adults have oral HPV.
- Each year in the U.S., there are more than:
- o 24,886 cases of HPV-associated cancer in females.
- o 19,113 cases in males.²
- The 9-valent HPV vaccine has demonstrated 96.7% efficacy in preventing infection and disease related to HPV subtypes 6, 11, 16, 18, 31, 33, 45, 52, and 58.³
- The Advisory Committee on Immunization Practices (ACIP) recommends vaccination at age 11-12, with catch-up vaccination through age 26, and shared clinical decision-making for adults 27-45.4
- Uptake of the vaccine in the U.S. has not been robust:
 - o 68.1% of adolescents have > one dose, and 51.1% have completed the series.⁵
 - o 51.5% of adult females and 21.2% of adult males have at least one dose.6
- College health centers have the opportunity to improve HPV vaccination rates.

Methods

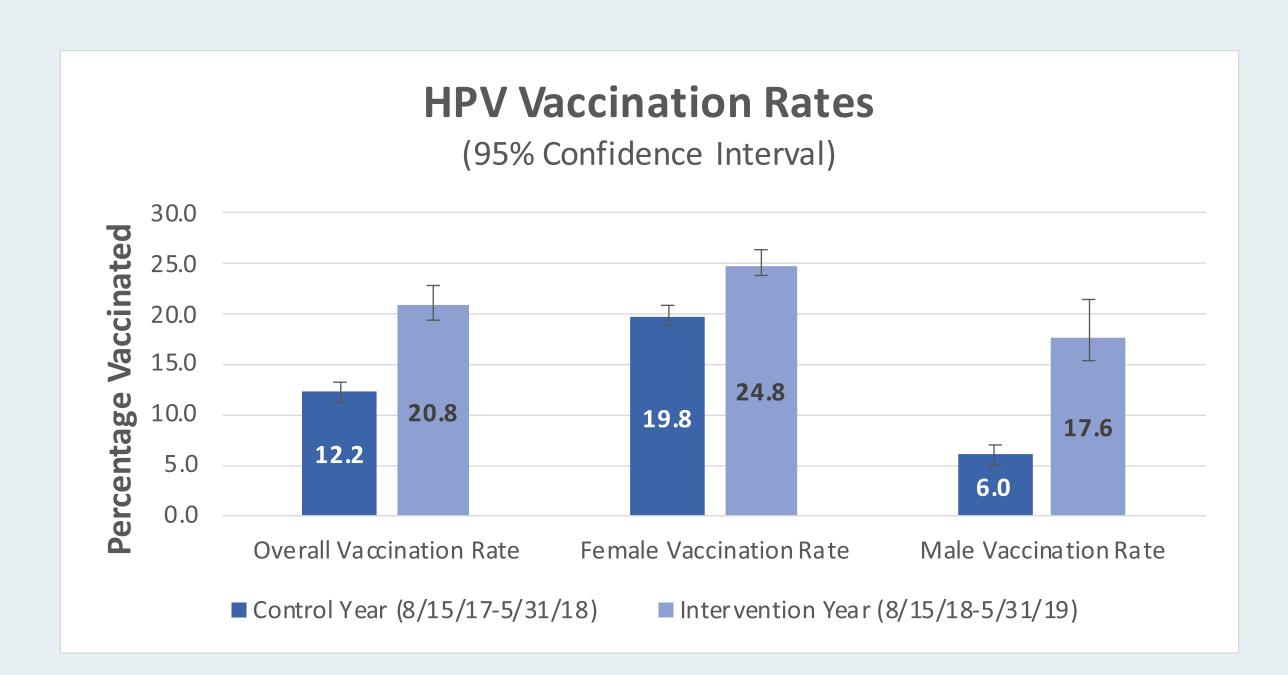
- In partnership with Medical Logix, LLC, we created an HPV toolkit with the following components:
 - o Continuing medical education (CME) certified presentation.
 - o Visual Messaging Tools: customizable brochures, posters, videos, and yard signs.
 - o HPV questionnaire for patient and provider use. (Toolkit available at https://www.hpv-cvc.org/, usage free with registration, scan QR code at right)
- A CME presentation on strategies to improve HPV vaccination rates was presented to health center providers before the study period.
 - o Clinicians were encouraged to give a strong recommendation for the vaccine, focused on prevention of genital warts and cancer.
- Visual messaging on HPV was strategically placed throughout campus.
- An electronic medical record (EMR) form was initiated during selfcheck-in, prompting students and providers to discuss the HPV vaccine.
- Eligibility criteria:
 - o Visited the Student Health & Wellness Center (SHWC) during the study period.
 - o \leq 26 years old.
 - o Had not already completed the HPV vaccination series.
 - Did not have vaccine exemptions.

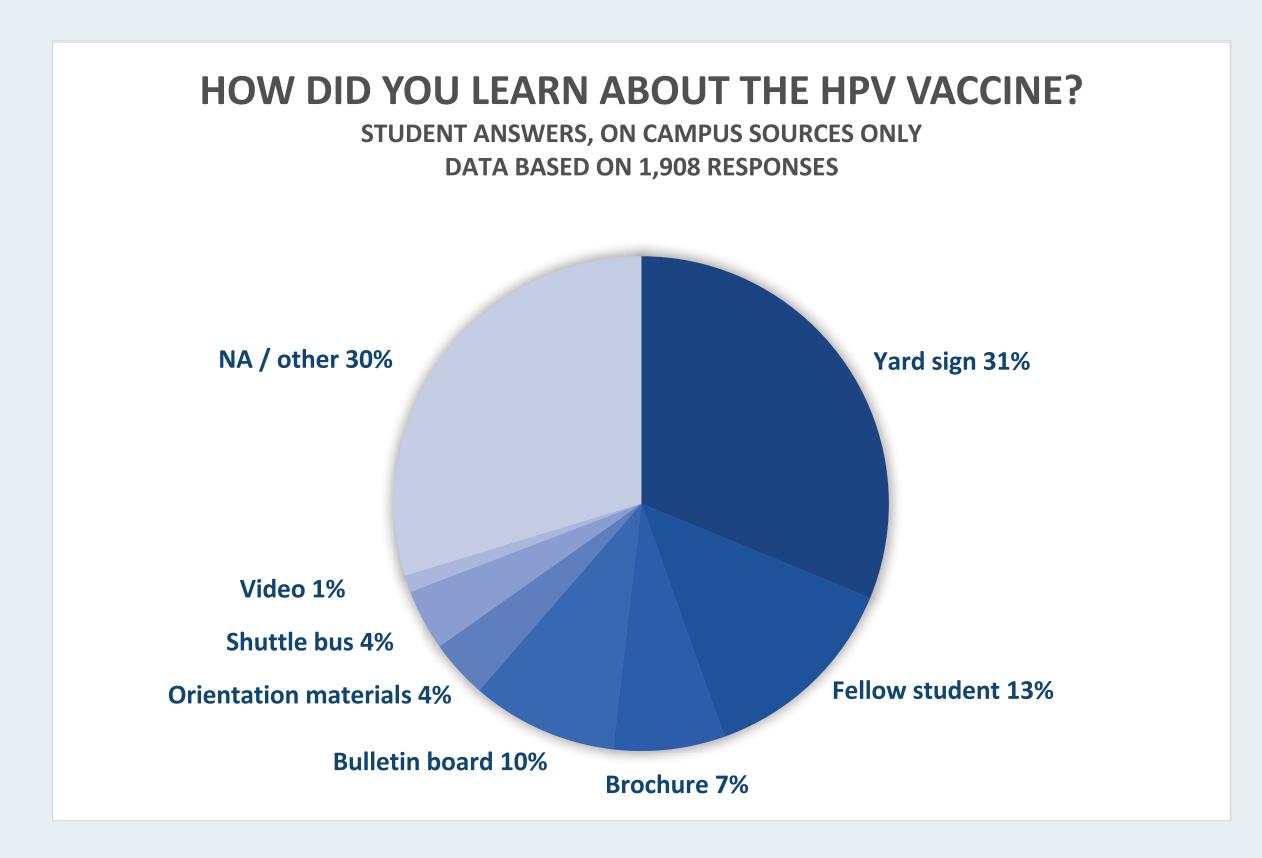
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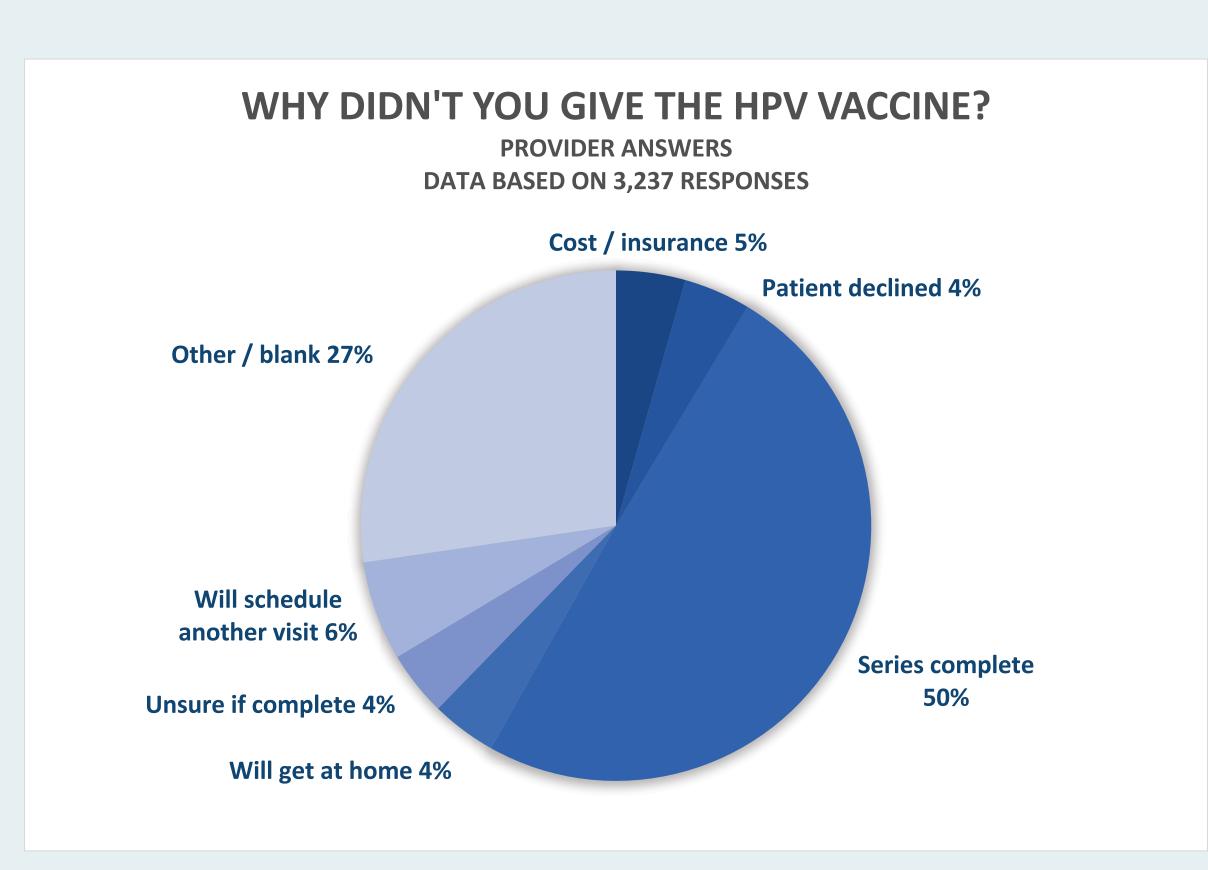


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Results





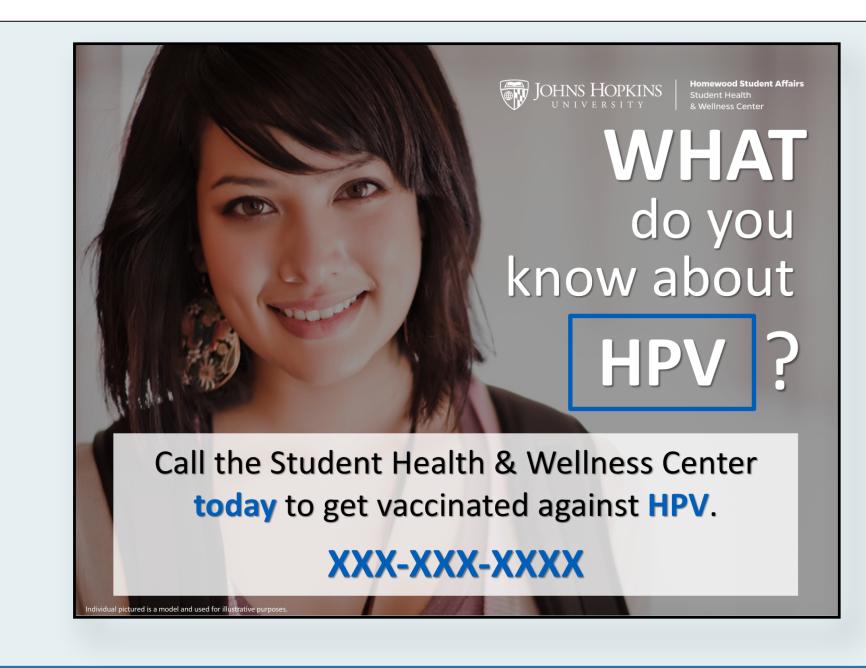


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Results (cont.)

- Study period (8/15/2018 5/31/2019) was compared to prior year as a historical control (8/15/2017 – 5/31/2018).
- During the control period, 12.2% of students who visited the health center received at least one dose of HPV vaccine vs. 20.8% during the intervention year
- o Relative rate of 1.70, [95% CI, 1.47 1.96, p < 0.001]
- o The vaccination rate increase was highest in male students with an almost 3-fold increase, relative rate of 2.93, [95% CI, 2.27 – 3.78, p < 0.001
- About half of the students who completed the EMR form saw the marketing materials on campus: 1,579 out of 3,237 responses.
- Of the marketing materials, the greatest number of students noticed the yard signs (596).
- The most frequently cited reason that providers did not give the HPV vaccine during their visit was that the patient already completed the HPV vaccine series (1,603).



Discussion

- A well-coordinated campaign with extensive awareness efforts and focused clinical interventions can dramatically impact the number of HPV vaccinations on college campuses.
- Impacting HPV vaccine acceptance in college-aged adults could have a downstream effect on HPV vaccination rates for future generations.⁷
- Yard signs were the most noticed marketing materials.
- Prompts to discuss HPV vaccination during visits combined with a strong recommendation increased HPV vaccine administration.
- Limitations:
 - o SHWC does not accept insurance other than the student health benefits plan.
 - o Population-level data on vaccination rates has proved challenging because of incomplete vaccination records.

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