"HPV-IMPACT"

Human Papillomavirus Vaccine Impact Monitoring:
Surveillance of Cervical Precancerous Lesions in Alameda County

Rationale:

The introduction of the first human papillomavirus (HPV) vaccine in 2006 exposed a need for population-based surveillance of HPV-related cancer. Surveillance is important to monitor long-term efficacy of the HPV vaccines in the population. While it would take decades to evaluate the vaccine's impact on cervical cancer, the shorter term impact can be assessed through surveillance of cervical pre-cancer lesions.* These lesions:

- Peak in a woman's late 20's and early 30's
- Occur with greater frequency than cancer
- Are detectable much earlier than invasive cancer

*Also known as cervical intraepithelial neoplasia (CIN) grades 2, 2/3, 3 and adenocarcinoma in situ (AIS)

Objectives:

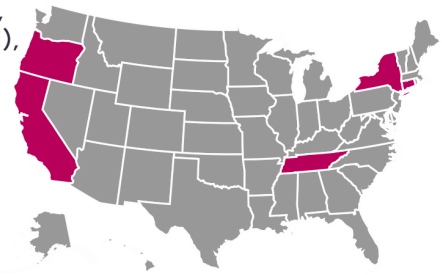
Evaluate the impact of the HPV vaccines by monitoring:

1. Trends in the incidence of cervical pre-cancer lesions (CIN2, CIN2/3, CIN3, and AIS)
2. The circulating HPV types found in cervical pre-cancer
3. Trends in cervical cancer screening (Pap and HPV tests) to assist in interpretation of disease trends

Patterns of disease over time and across populations are analyzed using standard epidemiologic methods. Robust electronic reporting has been integrated into the system.

HPV-IMPACT Sites:

California Emerging Infections Program (CEIP),
California Department of Public Health (CDPH),
Alameda County Department of Public Health



Connecticut Emerging Infections Program and Yale University
Tennessee Dept of Health, Tennessee Emerging Infections Program & Vanderbilt University
New York Emerging Infections Program and University of Rochester
Oregon Emerging Infections Program and State of Oregon Department of Human Services

Funded by the Centers for Disease Prevention and Control (CDC)

FIND OUT MORE : http://ceip.us/projects/hpv-impact

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CALIFORNIA EMERGING INFECTIONS PROGRAM

Human Papillomavirus Vaccine IMPACT

2006

HPV Vaccine Introduced

June 8th 2006: protects against HPV types 6, 11, 16, 18

2008

Surveillance Begins

January 1st 2008: Adult females 18+ in Alameda County

2013

Precancer Made Reportable

September 23rd 2013: Cervical pre-cancer becomes reportable in Alameda County

2014

Nonavalent HPV Vaccine Approved

December 11th 2014: Adds protection against 5 additional oncogenic types

2016

2 Dose Schedule Approved

October 19th 2016: CDC approves a reduced 2-dose HPV vaccine schedule in adolescents <15 years of age

NOW

Laboratory Collaboration

Local, statewide, and national histopathology labs report cases to HPV-Impact

Data Monitoring

HPV-Impact team monitors and evaluates case reporting and specimen data

Provider Collaboration

Over 200 bay area medical providers are partnering with HPV-Impact

ROLE OF LABORATORIES

- Collaborate with CDPH to identify a sustainable reporting mechanism
- Identify cases of CIN 2, CIN2/3, CIN3, and AIS
- Provide a subset of tissue specimens to CDPH for HPV typing

ROLE OF PROVIDERS

- Complete case report forms to report demographic and clinical data
- Document history of HPV vaccination
- Encourage age-based HPV vaccination