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Getting back on track with HPV vaccination to prevent cancer

A joint statement by the American Society of Clinical Oncology (ASCO), other American oncology organisations, and around 80 National Cancer Institute (NCI)-designated cancer centres has recommended to parents, children, young adults, physicians, and the American health-care systems that human papillomavirus (HPV) vaccination should get back on track.

The statement was released due to the fact that many adolescents in the USA have not be inoculated with routine HPV vaccine doses owing to the COVID-19 pandemic, which severely disrupted the delivery of major preventive services in the country.

According to the joint statement, the NCI-designated cancer centres (such as Moffitt Cancer Center and Albert Einstein Cancer Center) completely support the goal of eliminating the malignancies caused by HPV through "gender-neutral HPV vaccination" and evidence-based cancer screening.

A representative of ASCO told *The Lancet Oncology* that it had signed the joint statement on HPV vaccination to help raise awareness of the negative impact that the COVID-19 pandemic has had on vaccination rates and to encourage efforts to increase those rates overall. "ASCO will continue to advocate for parent and patient education on the benefits of HPV vaccination in addition to the need to boost vaccination rates above prepandemic levels", the organisation said.

Approximately 36 000 people in the USA would be diagnosed with a HPV-related cancer this year, noted ASCO in a statement made on June 8, 2021. However, even before the COVID-19 pandemic, HPV vaccination rates in the USA were lower than those in various other high-income countries. In 2019, only 54% of 13–17-year-old boys and girls in the USA completed an HPV vaccination series (compared with 42% in 2015), and during the early part of the COVID-19 pandemic, the vaccination rates among adolescents decreased by 75%, yielding a large number of unvaccinated young people.

"Rather than focusing on the lifethreatening illness prevented by vaccination, much of the conversation around the HPV vaccine has focused on the behaviour associated with HPV infection (ie, sexual activity), which has led to misplaced parental attitudes toward and understanding of the vaccine", explained the ASCO representative.

Regarding the lower HPV vaccination rates in the USA, Susan Vadaparampil (Moffitt Cancer Center, Tampa, FL, USA) suggests that the reasons are multifactorial and include parental vaccine hesitancy and a lack of strong and consistent provider recommendation, accessibility, and policies that support adolescent vaccination. "Thus, the solutions require a deep understanding of our community, innovation, and multilevel strategies", she told *The Lancet Oncology*.

According to Rachel Kupets (University of Toronto, Toronto, ON, Canada), it is worrying that, despite a safe and effective HPV vaccine being available, many students are not receiving it and the school shutdowns due to COVID-19 have made getting the vaccine more difficult. "One of the most common reasons students do not get the vaccine is because parents are concerned that the vaccine is not safe", she told The Lancet Oncology. According to Kupets, a joint statement by many experts in cancer care underscoring the safety and benefit of the HPV vaccine should reassure parents, and indicate that the best time for their children to get vaccinated is before they are exposed to HPV. Routine HPV vaccination in the USA is currently recommended at the age of 11 or 12 years, or starting at the age of 9 years. Apart from that, catch-up HPV vaccination is advocated up to the age of 26 years.

In the joint statement, the NCIdesignated cancer centres strongly encourage parents to arrange for their adolescents to be inoculated with the HPV vaccine as early as possible. Vaccination for COVID-19 provides a chance for the parents to safeguard their children by catching up on missed or due routinely recommended vaccines, such as the HPV vaccine, as noted in the statement. It urges parents and other concerned people to contact their local health department or health-care provider to arrange an appointment urgently for missed HPV vaccinations.

Roanna Kessler (Johns Hopkins University, Baltimore, MD, USA) told *The Lancet Oncology*: "I recommend that providers use every opportunity to offer HPV vaccination, and not wait for routine [or] preventive care visits to offer the vaccine. We have found that if the HPV vaccine is discussed during non-preventive care visits (eg, problem-focused visits for illness or injury) patients are very likely to accept vaccination at that time."

"I hope the implications [of the joint statement] would be that more adolescents get caught up with the HPV vaccine at the same time as getting the [COVID-19] vaccine", Kessler explained. As Vadaparampil pointed out, "We recommend that all health-care providers and health systems remain vigilant in monitoring HPV vaccination rates and use evidence-based strategies to improve them."

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For more on the **joint statement by ASCO and other cancer organisations and centres** see https://www.asco.org/sites/newwww.asco.org/files/NCI-CC-Statement-HPV-2021.pdf

For more on ASCO's statement on HPV vaccination rates in the USA see https://www.asco.org/ practice-policy/policy-issuesstatements/asco-in-action/ parents-and-patients-urgedcatch-missed-hpv