

Ontario's Grade 8 HPV Vaccination Program

Frequently Asked Questions

How serious is the Human Papillomavirus (HPV)?

HPV is a common sexually transmitted disease and causes most cases of cervical cancer.

How big a problem is cervical cancer?

In Ontario, there are approximately 500 females diagnosed with cervical cancer and 140 deaths each year.

How effective is the HPV vaccine in preventing disease?

The HPV vaccine offers protection against the types of HPV that are responsible for 70% of cervical cancers.

What is the vaccine that will be used for the program and what does it do?

The vaccine is called Gardasil, manufactured by Merck Frosst. It provides protection against four strains of HPV, two of which are associated with cervical cancer. This vaccine will protect against HPV types 6, 11, 16 and 18. HPV types 16 and 18 are considered high risk for cervical cancer. HPV types 6 and 11 are considered low risk and are associated with genital warts. This vaccine is currently licensed for use in females aged 9 to 26 years.

Is the HPV vaccine be mandatory for Grade 8 females?

The vaccination is voluntary.

When will the vaccination program start?

The HPV vaccine will be offered to all female students in Grade 8 beginning in the fall.

Why is this program only targeted to females when males can also get HPV?

The vaccine is licensed for administration to females between the ages of 9 to 26 years. It is not currently licensed in Canada for administration to males.

Who is eligible to get the publicly funded HPV vaccine?

The program is for the female Grade 8 cohort in Ontario.

Why only Grade 8 female students? Why don't you offer this vaccine to all young women?

Grade 8 was chosen because the HPV vaccine is most effective if offered to females before they become sexually active. At the same time, females in Grade 8 are aware of sexually transmitted infections and will be better able to understand the benefits of the vaccine

How will females in private schools get the vaccine? What about females who are wards of the Crown or in group homes?

We work closely at both the provincial and local levels to ensure that the vaccine is made available to all females in Grade 8. This means ensuring that the vaccine is available to females in private schools, to those who are home schooled and to those who are wards of the Crown and in group homes.

Will the HPV vaccine be provided to First Nations communities?

Yes. The HPV vaccination program is implemented within First Nations communities in a manner consistent with the other publicly funded school-based vaccination programs that currently exist in Ontario, such as Hepatitis B and Meningococcal vaccines. All females in the Grade 8 cohort will be offered the HPV vaccine.

Why is this vaccine necessary? What are the benefits of an HPV vaccine program?

This program is expected to improve the health of Ontarians by decreasing HPV infections, which cause cervical cancer and subsequently the complications of cervical cancer.

Are physicians involved in providing the vaccine through this program?

The majority of the vaccines are administered in schools by public health unit staff. There may be situations in which it would be appropriate for a physician to obtain the vaccine from the health unit for a specific patient; the need for this would be addressed on a case-by-case basis.

How is the current immunization program administered in schools?

Public health units plan and organize school-based immunization clinics throughout the school year. Each public health unit organizes with local schools a schedule of immunization clinics. The clinic schedule is organized between the public health unit and the school to ensure that the vaccination clinic does not conflict or disrupt other important school activities such as exams, school trips, etc. These clinics can be scheduled in the morning or afternoon, during regular school hours.

The public health unit develops a parental/client consent form with accompanying information. The consent form is typically mailed or faxed for copying to the school with appropriate lead time for distribution

to children and parents. Typically, the school will then send a letter home with the consent form emphasizing the dates of the school immunization clinic. The consent forms are then returned to the school and collected prior to the school immunization clinic date.

The actual clinics are usually held within the school in an area that is safe and appropriate, such as the school gymnasium. The clinics are not held within the classroom in order to ensure a safe environment where there is enough space to administer vaccines and to care for children in the rare case that an adverse event should occur.

Why not vaccinate boys and older teens who are sexually active?

The HPV vaccine is currently not approved for use in males. The vaccine is currently only approved for use in females aged 9 to 26 years. It is recommended that females receive this vaccine prior to becoming sexually active and possibly exposed to HPV, because the effectiveness of the vaccine is unknown when administered to a female who has already been exposed to HPV.

Has MOHLTC done anything to increase/improve overall screening of cervical cancer?

Maintaining and strengthening Ontario's cervical cancer screening program continues to be a priority. The HPV vaccination program is in no way an indication of any intention to relax cervical cancer screening in Ontario. We will continue to work with partners such as Cancer Care Ontario to ensure that women and their health care providers understand the importance of regular cervical cancer screening such as Pap smears. We know that these continuing efforts are particularly important for hard-to-reach groups that are historically under-screened.

There have been concerns about the safety of this vaccine. What assurances are there that this is a safe vaccination?

This vaccine has been approved for use for females ages 9 to 26 years by the Biologics and Genetic Therapies Directorate (BGTD) of Health Canada. The BGTD is the regulatory authority responsible for establishing the safety, efficacy and quality of all biologics, including vaccines, for human use. Before introducing a new vaccine to Ontario's publicly funded immunization program, the province considers the needs of Ontarians, the advice of several immunization expert groups and the safety, efficacy, cost and appropriateness of the specific vaccine for possible administration through Ontario's publicly funded programs.

Completed clinical trials for this vaccine have shown it to be safe and effective. There have been few reported adverse reactions to the vaccine, primarily soreness at the injection site, however, this is a typical reaction to most vaccines. There is not enough research available to indicate whether the HPV vaccine is safe to administer alongside the Conjugate Meningococcal vaccine. Therefore, the HPV vaccine will be administered during the Grade 8 school year, whereas other school-based vaccinations, specifically, Hepatitis B and Conjugate Meningococcal vaccine, will continue to be administered during the Grade 7 school year.

Why is parental consent required? Can a Grade 8 female provide her own consent to be vaccinated? Can she refuse?

The issue of consent for youth is handled in the same way that it is for voluntary vaccines (e.g. Meningococcal vaccine) and consistent with the Health Care Consent Act.

That means that, if she were deemed capable by the health care provider, a Grade 8 female could refuse the vaccine even if her parents had signed a consent form and she could consent to receive the vaccination even if her parents had not signed a consent form.

In the Health Care Consent Act, there is no specific age for consent. Instead, there is a requirement that the health care practitioner who is administering the treatment determine whether the person is capable of consenting. Usually, a 12 to 13 year-old child will be capable of consenting to treatment if he or she is capable of understanding the treatment and the consequences of having or refusing the treatment. Everyone is presumed capable unless the contrary is proven. If a person isn't capable (and many children are not), a parent may consent to treatment on behalf of the child. If you have a parental consent form signed by a parent, and the child refuses the vaccine, the health care practitioner must use his or her professional judgment to determine whether the person is capable.

What happens if I decide not to sign the consent form this fall?

You can have your child vaccinated whenever you feel the time is right. However, if you decide to decline the Grade 8 program this fall and decide to have your Grade 8 daughter vaccinated later, you will have to incur the expense of the vaccination (about \$400).

Are there other ways to prevent cervical cancer?

HPV vaccination and regular cervical screening is the most effective way to prevent cervical cancer. Regular Pap tests and follow-up can prevent most, but not all, cases of cervical cancer. Pap tests can detect cell changes in the cervix before they turn into cancer. Pap tests can also detect most, but not all, cervical cancers at an early, curable stage.