



Tuusula

# HPV VACCINATION PROGRAM IN FINLAND, LESSONS LEARNT AND THE WAY FORWARD

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# Overview of the HPV vaccination program (1)

- Before the decision for introduction could be made, National Institute for Health and Welfare (THL) formed a work group to survey the disease burden caused by HPV, in spring 2008. WHY?
  - Diminish cervical cancer and other HPV disease
  - Most efficient screening methods for cervical cancer
  - Propose a plan for including HPV vaccination into National Immunization Program (NIP)
  - HPV vaccines: effectivity, safety and cost-effectivity

# Overview of the HPV vaccination program (2)

- Work group report in 2011
  - Recommendations regarding HPV vaccination program, organized screening (cervical cancer), Cervical smear outside screening
  - Expenses caused by HPV-diseases can be reduced to half (benefits from the vaccination program after >10 years)
- The HPV program was prepared with
  - Information provided
  - Schooling
- Start date of the program 11/2013

# Overview of the HPV vaccination program (3)

- Target groups:
  - Girls of 11—12 years, 6th grade
    - During 5th grade health examination information given, permission from parents asked
    - During 7th—9th grade health examinations checked whether HPV vaccines have been given
      - Discussion, if not (Note! Voluntary)
      - Supplemented when necessary
      - Whole immunization series (the girl wants, parents resist)
  - Catch-up groups in 2013—2015: Girls in 7th—9th grade (12—16 years)

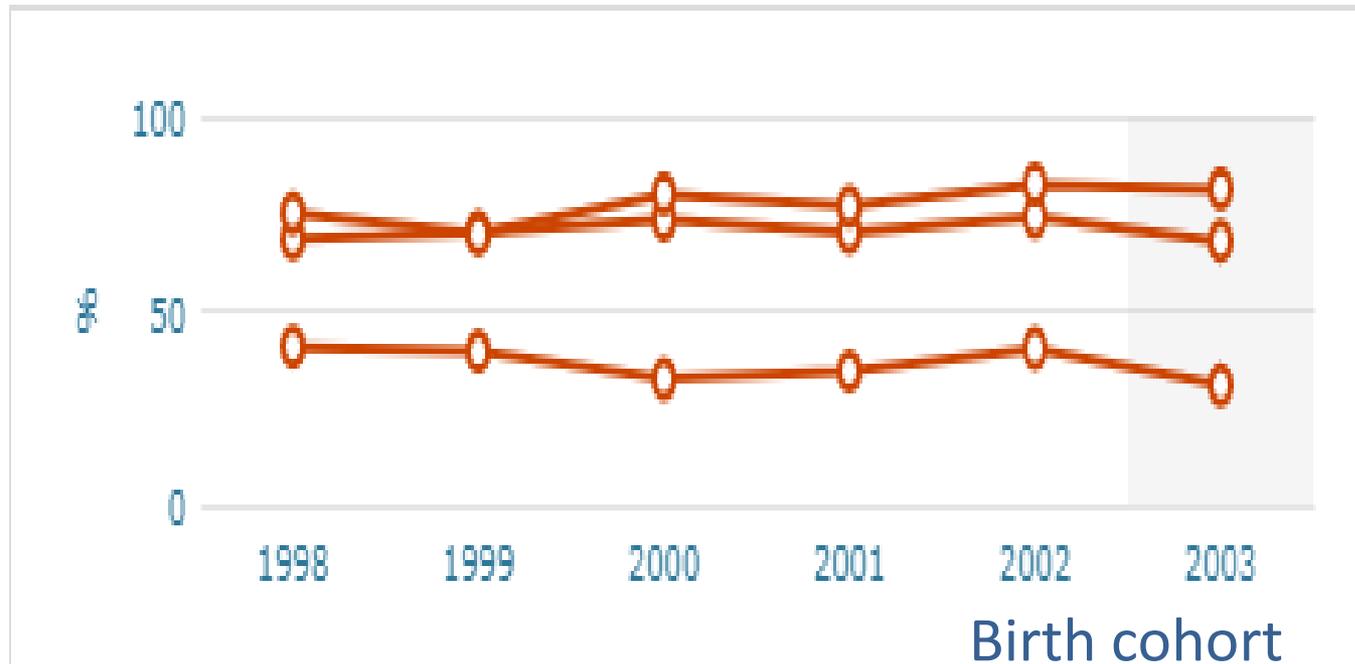
# Overview of the HPV vaccination program (4)

- Implementation: School health care based
- Training and information sources for general public and vaccinators: based on research, special links
- Information about individual vaccination is collected from patient health records
  - Combined to registry office (e.g. mother tongue), disease registry (efficiency, safety)
  - Keeping statistics is crucial!
  - Vaccination coverage nationally and locally is provided by National Institute for Health and Welfare

# Vaccination coverage in whole Finland by birth cohort (6/2016)

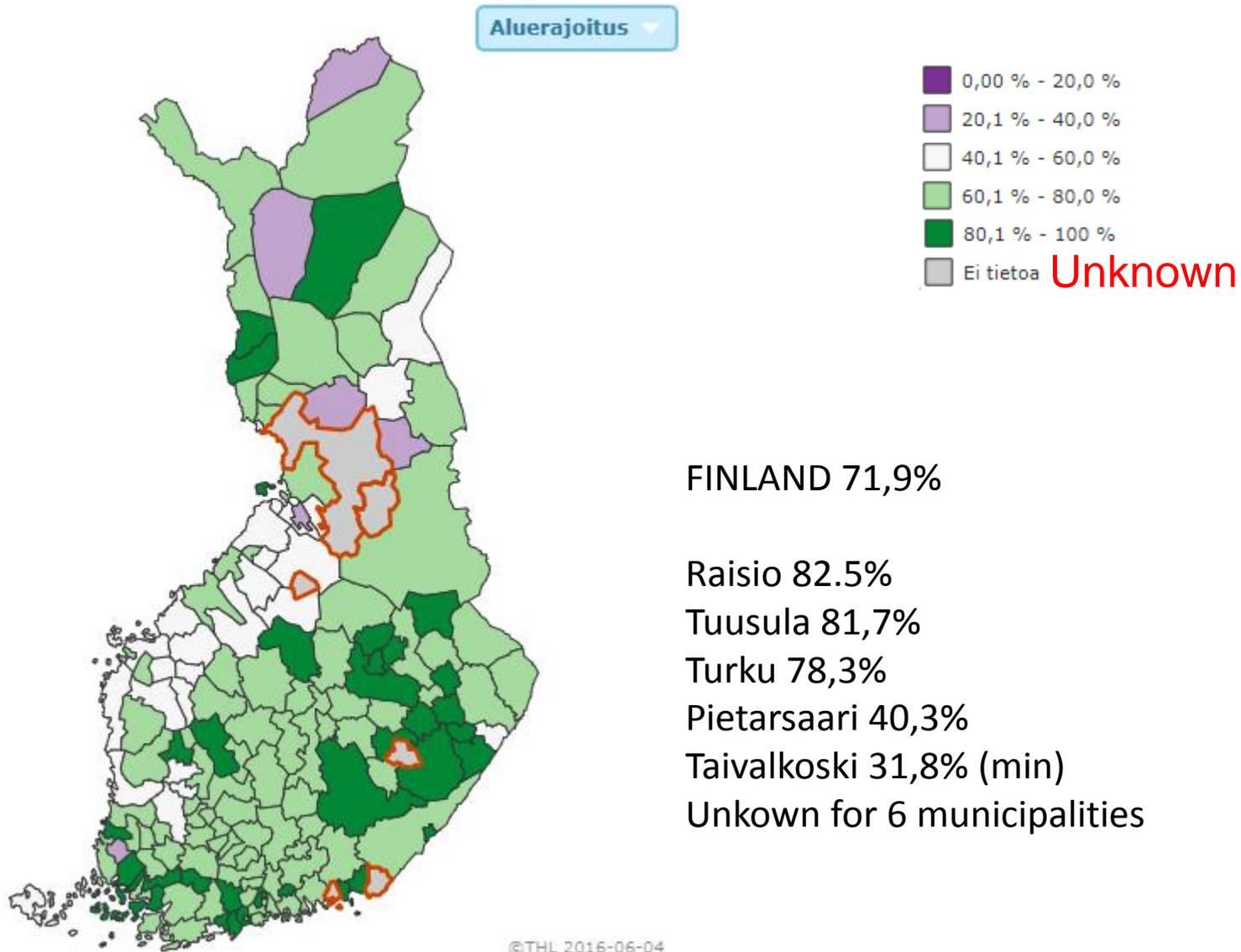
- 2003 66,0%
- 2002 71,9%
- 2001 66,9%
- 2000 67,8%
- 1999 65,8%
- 1998 65,3%

# Vaccination coverage by birth cohort in Helsinki and in two cities with high and low coverage



Raisio  
Helsinki  
Pietarsaari

# HPV Vaccination coverage of birth cohort 2002 in Finland (6/2016)



# Major stakeholders or societal-historical factors with role and impact on the program

- Adolescents
- School nurses
  - Most central part, supported by THL
  - School doctors
- Parents
- National Institute for Health and Welfare (THL)
- Medical industry, Centre for Medicine Information
- Previous vaccine crisis's: Pandemic A (H1N1) 2009 influenza (75% of children vaccinated; Narcolepsy)

# SWOT “analysis” of the program (1)

- SWOT = **S**trengths, **W**eakness, **O**pportunities, **T**hreats
- **Strengths**
  - Well developed and universal health care with special emphasis on preventive medicine
  - School health care is comprehensive and reaches every child in the country
  - Specialized training for school nurses (vocational and well baby clinic nurses)

# SWOT “analysis” of the program (2)

- **Weakness**

- Fairly large, sparsely populated country

- **Opportunities**

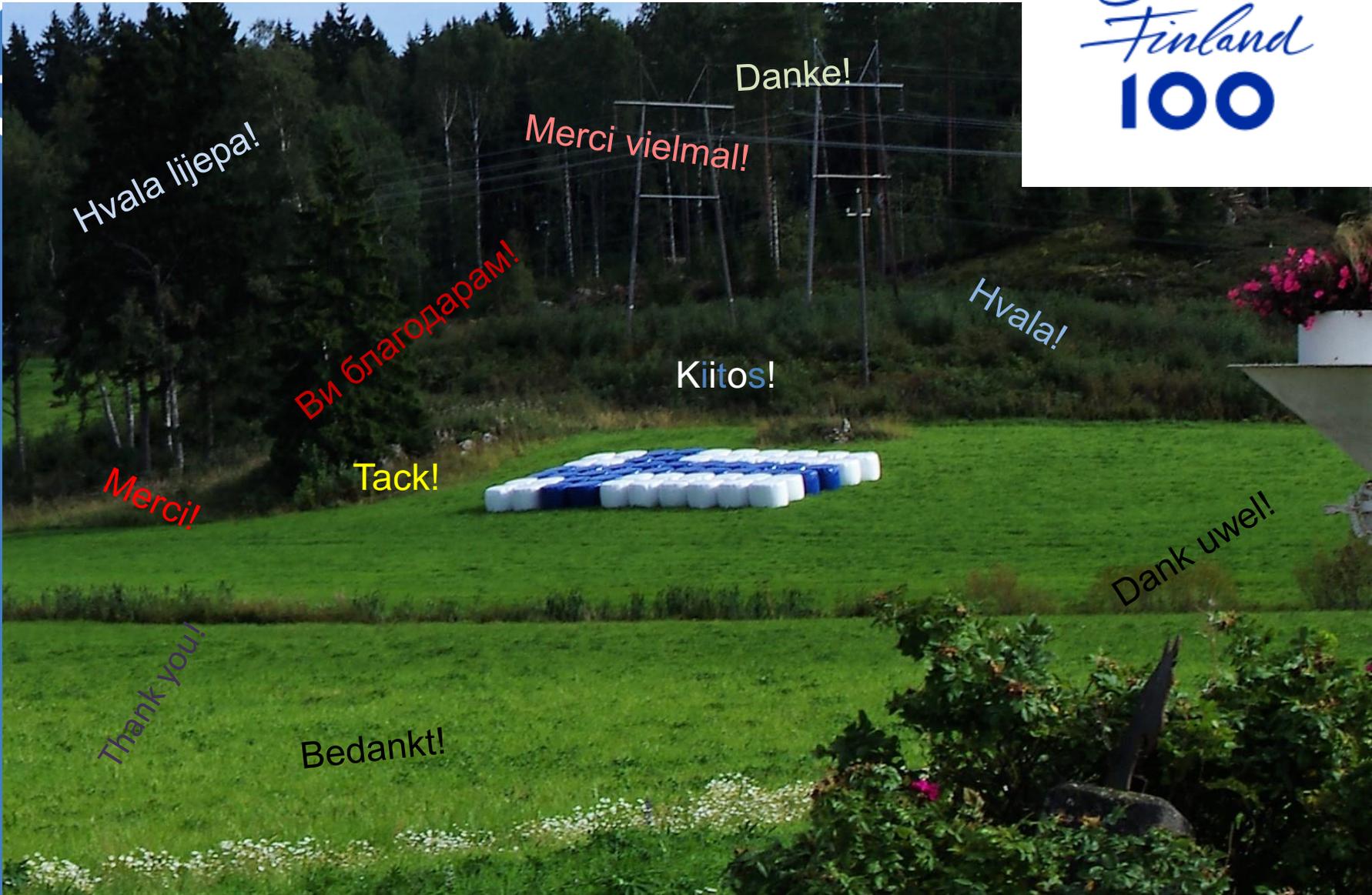
- Research based on comprehensive national health care records
  - From birth, for all Finns
  - E.g. cancer and vaccination registries
- Women’s issues at the forefront in Finnish society

# SWOT “analysis” of the program (3)

- **Threats**

- The spread of false information in social media
- The trend in society to isolate parents from the decision making regarding their childrens’ health care
- Resistance to vaccinations in general in some segments of the population
- Recent influx of immigrants of which we are not so familiar





Hvala lijepa!

Danke!

Merci vielmal!

Ви благодарам!

Hvala!

Kiitos!

Tack!

Mercij!

Dank uweel!

Thank you!

Bedankt!



## National Immunization Programme NIP in Finland (1)

Table 1. Children and adolescents

Vaccine	Age	Since
*Before that separate DTwP, Hib and Polio vaccines.		
RV	2 mo	9/2009
DTaP-IPV-Hib +RV + PCV	3 mo	DTaP-IPV-Hib 2005* PCV 9/2010
DTaP-IPV-Hib + RV + PCV	5 mo	
DTaP-IPV-Hib + PCV	12 mo	
MMR	12–18 mo	1982
Seasonal influenza	6–35 mo (annually)	2007
DTaP-IPV	4 y	2005
MMR	6 y	
HPV	girls 11–12 y	11/2013
dtap		

## National Immunization Programme NIP in Finland (2)

Table 2. Adults	
<b>dT-booster</b>	every 10 yrs
<b>Polio</b>	All ages, if travelling to risk area over 4 weeks and previous vaccination > 12 months ago.
<b>MMR</b>	if no protection by disease or 2 doses of vaccination

Traveller's Health Guide, 30.6.2017, Ulpu Elonsalo

## National Immunization Programme NIP in Finland (3)

Table 3. Additional vaccinations for special risk groups

Vaccine	Age	Since
BCG	children under 7 yrs at risk	until 9/2006 all infants
PCV + PPV	children under 5 yrs	2010
Seasonal influenza	all at medical risk for severe influenza	
	all 65 yrs or older	
	all pregnant	
Hepatitis A and B	part of health care and social professionals	
TBE	3 yrs and older living in spesified risk areas.	
RV = rotavirus		MMR = measles, mumps, rubella
DTaP = difteria, tetanus, acellular pertussis		HPV = human papillomavirus vaccine
IPV = inactivated polio vaccine		dtap = difteria, tetanus, acellular pertussis