

## JCVI submission of 25 November 2022

### PE1939/B: Amend the date of birth to allow wider accessibility to the HPV vaccination programme for boys

Thank you for this opportunity to respond to this petition and the official report of the discussions that took place at the meeting of the Citizen Participation and Public Petitions Committee. I understand that the question you have raised is if there are plans for JCVI to review the need for, and value of, a catch-up HPV immunisation programme for males aged 25 and younger.

As a result of JCVI's advice in 2018 the Government announced that the HPV programme would be extended to include adolescent boys. However, it was also decided by DHSC that there would not be a time limited catch up for older boys as there had been when the girls' programme was first introduced in 2008. The Committee noted this at the February 2019 JCVI meeting under matters arising. The Committee noted the reasons behind the policy, which were also supported by Public Health England, for not having a catch up in older cohorts of boys which included:

- the epidemiological situation was very different now compared with when the programme first started for adolescent girls in 2008, which had included a time limited catch up;
- the success of 10 years of the girls' programme had established good levels of herd protection which meant that there would be limited additional benefits to be gained from a catch-up programme in boys;
- the priority was establishing the extension of the routine adolescent programme to adolescent boys and ensuring high uptake in boys whilst maintaining the high uptake in the girls; and
- under standard economic methodology, a catch up in older boys was not cost effective.

Furthermore, it was also noted that the selective MSM programme offers direct protection to those older males who are at particularly high risk from HPV infection and disease and who benefit very little from the herd protection afforded by the adolescent girls programme.

The Committee was therefore sympathetic to the policy and accepted the rationale for not having a catch-up and understood that it was important to focus efforts on the successful implementation of the routine universal programme.

There are currently no plans for JCVI to review the need for, and value of, a catch-up HPV immunisation programme for males aged 25 and younger which would not be cost effective under the standard methodology that JCVI follows based on the modelling work by Warwick university (Datta et al.,2019).

Males and females in cohorts eligible for vaccination in the national programme remain so until their 25th birthday. Females and males in those cohorts who were eligible for the routine programme (i.e. for England, females born after 01/09/1991 and males born after 01/09/2006) coming to the UK from overseas and registered with a GP practice may not have been offered protection against HPV in their country of origin and should be offered vaccination if they are aged under 25 years. For Scotland, Wales and Northern Ireland dates of birth for eligible cohorts may vary due to the different ages at which the HPV vaccine is first offered.

## References

Joint Committee on Vaccination and Immunisation. Statement on Human papillomavirus vaccines to protect against cervical cancer. July 2008. Available at:

[https://webarchive.nationalarchives.gov.uk/ukgwa/20120907095410/http://www.dh.gov.uk/ab/JCVI/DH\\_094744](https://webarchive.nationalarchives.gov.uk/ukgwa/20120907095410/http://www.dh.gov.uk/ab/JCVI/DH_094744)

Joint Committee on Vaccination and Immunisation statement: extending the HPV vaccination programme –conclusions. 18 July 2018. available at: <https://www.gov.uk/government/groups/joint-committee-onvaccination-and-immunisation> .

Joint Committee on Vaccination and Immunisation (2019). Minute of the meeting on 6 February 2019 available at:

<https://www.gov.uk/government/groups/joint-committee-on-vaccination-and-immunisation> .

Datta S, Pink J, Medley GF *et al.* Assessing the cost-effectiveness of HPV vaccination strategies for adolescent girls and boys in the UK. BMC Infect Dis. 2019 Jun 24;19(1):552. doi: 10.1186/s12879-019-4108-y.

