Canadian Society of Otolaryngology-Head and Neck Surgery

CSOHNS Calls for a National HPV Program for Males

Background

Human Papillomavirus (HPV) is one of the most common sexually transmitted infections and it is estimated that more than 70 per cent of sexually active Canadian men and women will have an HPV infection at some point in their lives. In men, HPV causes a broad spectrum of diseases including external genital warts as well as HPV-associated cancers such as anal, penile, and oropharyngeal.

In February 2010, Health Canada approved the quadrivalent HPV vaccine in boys and men aged 9-26 years of age, for the prevention of infection caused by HPV types 6, 11, 16 and 18 and genital warts caused by HPV types 6 and 11. Following this approval, the National Advisory Committee on Immunization (NACI) issued a strong recommendation for males between 9 and 26 years of age to receive the quadrivalent human papillomavirus (HPV) vaccine for the prevention of anal intraepithelial neoplasia (AIN) of all grades, anal cancer and anogenital warts (AGWs).

Recent studies on head and neck cancer have shown direct evidence that HPV-related oropharyngeal cancer is increasing in incidence in the Canadian population. HPV-related oral cancers have been on the rise since 1998 with the largest increase observed in men age 55 to 64. HPV-related head and neck cancer incidence in the USA is already higher in men, and should no action be taken, is expected to exceed that of cervical cancer by 2020.

Although studies with HPV vaccines have not been conducted for prevention of oropharyngeal cancers or recurrent respiratory papillomatosis (RRP) and therefore prevention of these conditions are not included within the licensed indications, it is important to note that it is biologically plausible that HPV vaccines will offer protection against other disease outcomes associated with types contained in the vaccines. As well, previous experience in gender-restricted vaccination programs has demonstrated a substantially lower effectiveness than universal vaccination and limiting vaccination to women might increase the psychological burden on women by confirming a perceived inequality of the sexes. Most importantly, current female-based programs prohibit direct protection of men and even if all women were immunized, the HPV chain of transmission would still be maintained through the MSM population. As in the property of the sexes where immunized is the property of the sexes where the propert

Despite all the evidence and National approvals and recommendations, the only provinces to have extended their programs to include males are Alberta and PEI. Inclusion of males in routine programs facilitates vaccination of males at a young age when the potential benefit of the vaccine is greatest.

Issue

Recent discussions regarding the value of funding the HPV vaccine for boys as a National immunization strategy has prompted the CSOHNS to consider the issue and put forward a position on behalf of the Canadian Society of Otolaryngology-Head and Neck Surgery.

CSOHNS Position Statement

Recognizing that human papillomavirus (HPV) is the most common sexually transmitted infection in men and women and that males suffer from the consequences of being infected with HPV, the CSOHNS call on the Canadian Government to fund HPV vaccination programs for boys and men.

ⁱ PHAC. Accessed November 19, 2014. http://www.phac-aspc.gc.ca/std-mts/hpv-vph/fact-faits-eng.php

ⁱⁱ MMWR. Vol. 60 / No. 50. December 23, 2011.

iii Accessed November 19, 2014. http://webprod5.hc-sc.gc.ca/noc-ac/info.do?no=11080&lang=eng

^{iv} Update On Human Papillomavirus (HPV) Vaccines. Canada Communicable Disease Report. Volume 38. ACS-1 January 2012

^v Johnson-Obaseki S. et al. Head and Neck Cancer in Canada: Trends 1992 to 2007. Otolaryngology-Head and Neck Surgery. 2012

vi Nichols AC et al. The epidemic of human papillomavirus and oropharyngeal cancer in a Canadian population. Curr Oncol, Vol. 20, pp. 212-219

vii Shack L et al. Trends in the incidence of human papillomavirus-related noncervical and cervical cancers in Alberta, Canada:a population-based study. CMAJ. 2014

viii Cancer Care Ontario. Cancer Fact: HPV-related oral cancers increasing among Ontario men. July 2011. Available at https://www.cancercare.on.ca/cancer-facts.

ix Morbidity and Mortality Weekly Reports. MMWR.2012, 61(No.15:258-261. http://www.cdc.gov/mmwr/pdf/wk/mm6115.pdf.

^x Recommendations for Human Papillomavirus Vaccination. Provincial Infectious Diseases Advisory Committee on Immunization. Public Health Ontario. June 2012.

xi Crosignani et al. BMC Public Health 2013, 13:642