



HPV Vaccination Program

Cross-country learning and best practices.

Cervical cancer epidemiology and HPV vaccination progress in WHO SEA Region

Dr Emmanuel Njambe T. OPUTE

Technical Officer, Immunization (New Vaccine Introduction)

IVD. CDS. WHO SEA Regional Office

Outline

- Cervical cancer burden in South-East Asia (SEA) Region
- Control targets of the Global Strategy to eliminate cervical cancer
- Status of HPV vaccine introduction and schedules in SEA Region
- Access of regional and national targets to HPV vaccine
- HPV vaccine coverages
- Challenges
- Opportunities
- Next steps

Global strategy to accelerate the elimination of cervical cancer

VISION: A world without cervical cancer

THRESHOLD: All countries to reach < 4 cases 100,000 women years

2030 CONTROL TARGETS

90%

of girls fully vaccinated with HPV vaccine by 15 years of age

70%

of women screened with a high precision test at 35 and 45 years of age

90%

of women identified with cervical disease receive treatment and care

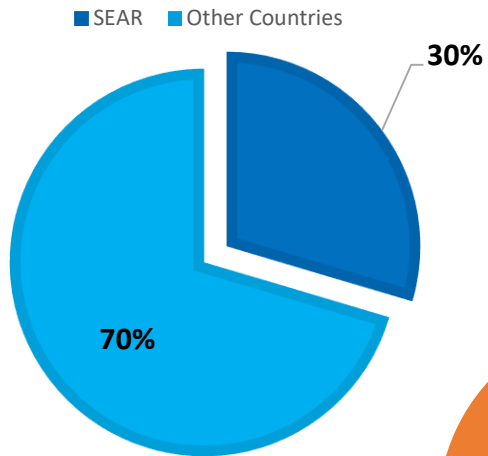
SDG 2030: Target 3.4 – 30% reduction in mortality from cervical cancer

Cervical Cancer burden in the South-East Asia Region

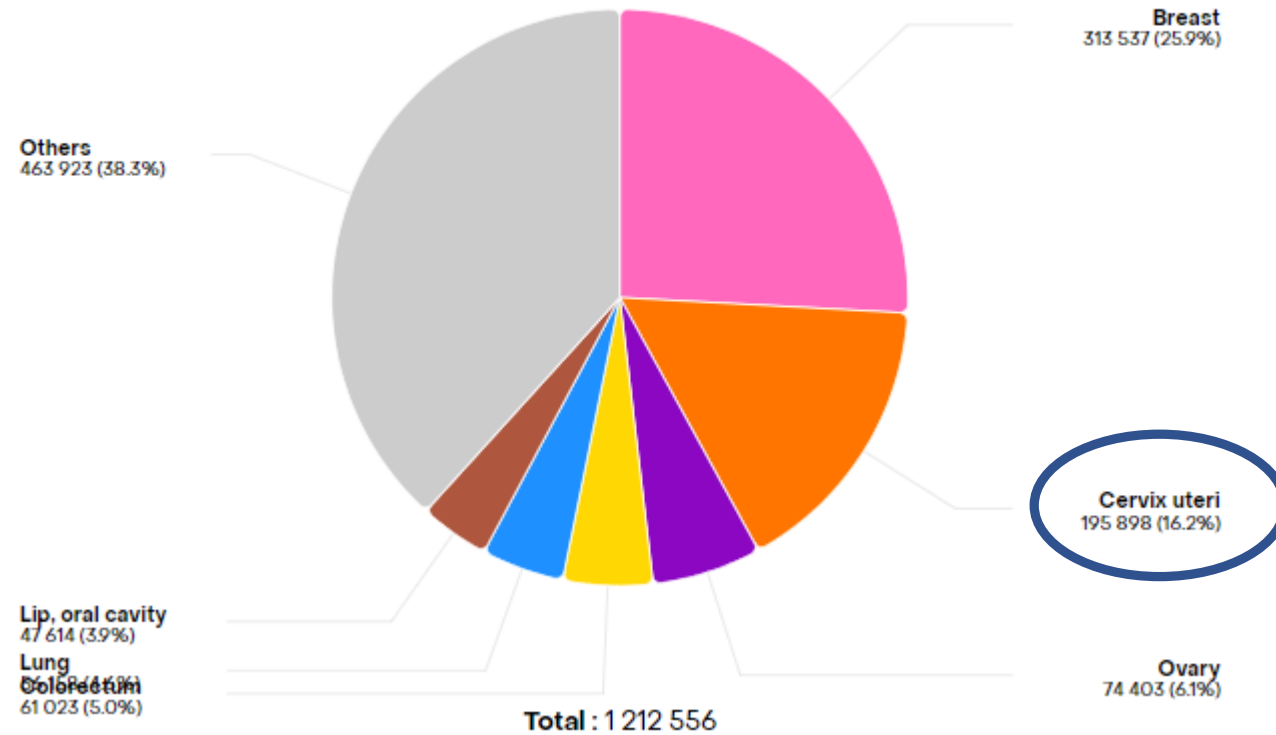
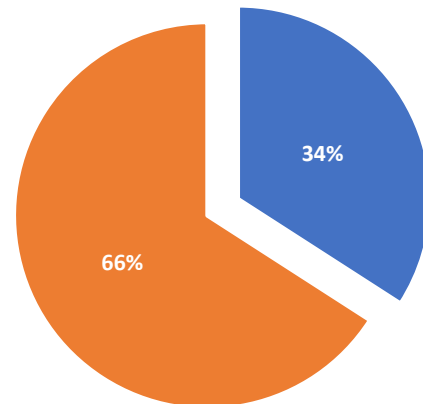
195,898 new cases of Cervical Cancer in 2022 (females of all ages)

118,975 Deaths due to Cervical Cancer in 2022 (females of all ages)

INCIDENCE (F)

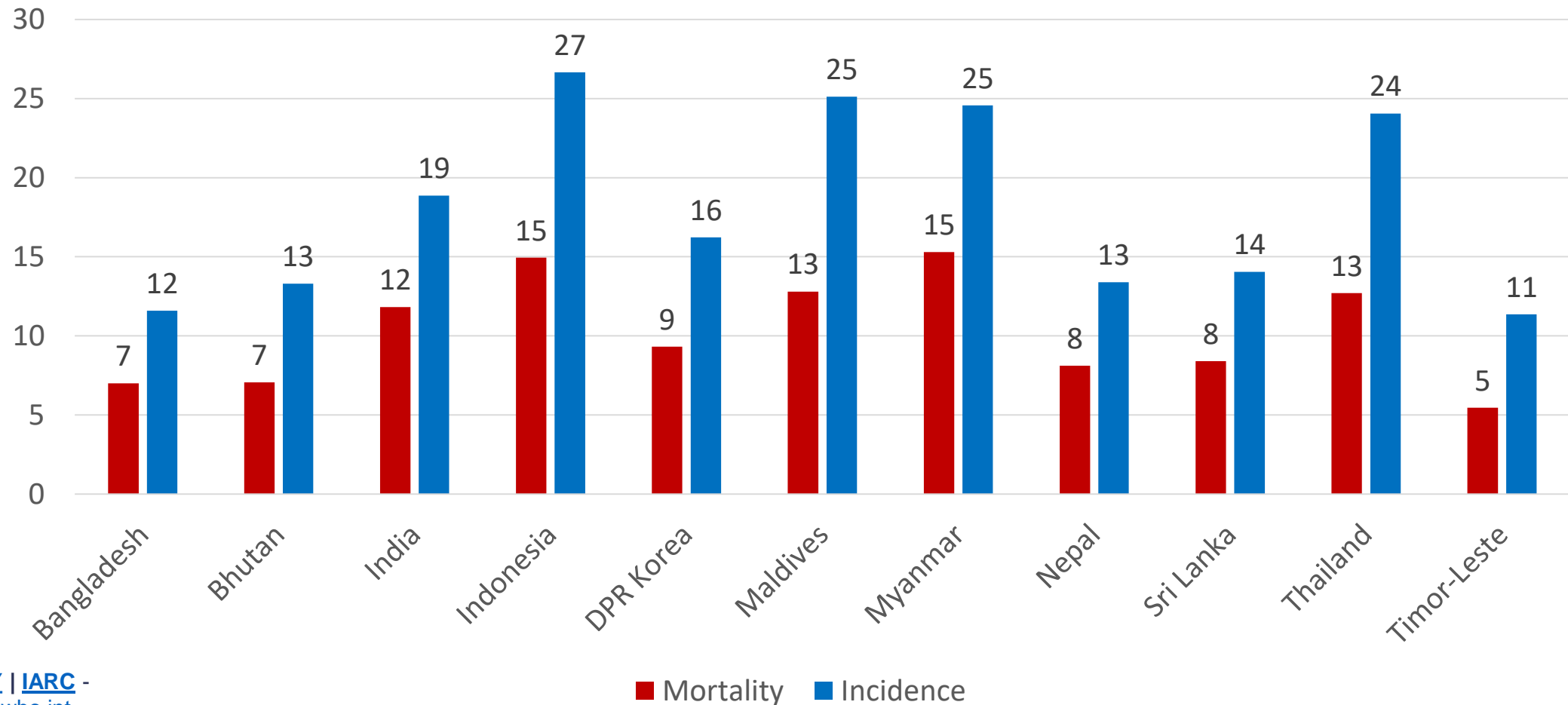


Mortality (F)



Cancer of the cervix incidence and mortality in SEAR Countries

No country is likely to reach the elimination target of <4 cases in 100,000 women-years



December 2022 WHO recommendations* on HPV vaccine schedules can optimize vaccine coverage

Primary target : girls 9 to 14 years of age

2-dose schedule for all ages starting from 9 years old

Option: 1-dose schedule for 9 to 20-year-olds

Prioritize: - Immunocompromised/HIV+ - 2 doses, ideally 3
- Multi-Age-Catchup through 18 years at introduction

Secondary Targets: boys & older women/adults:

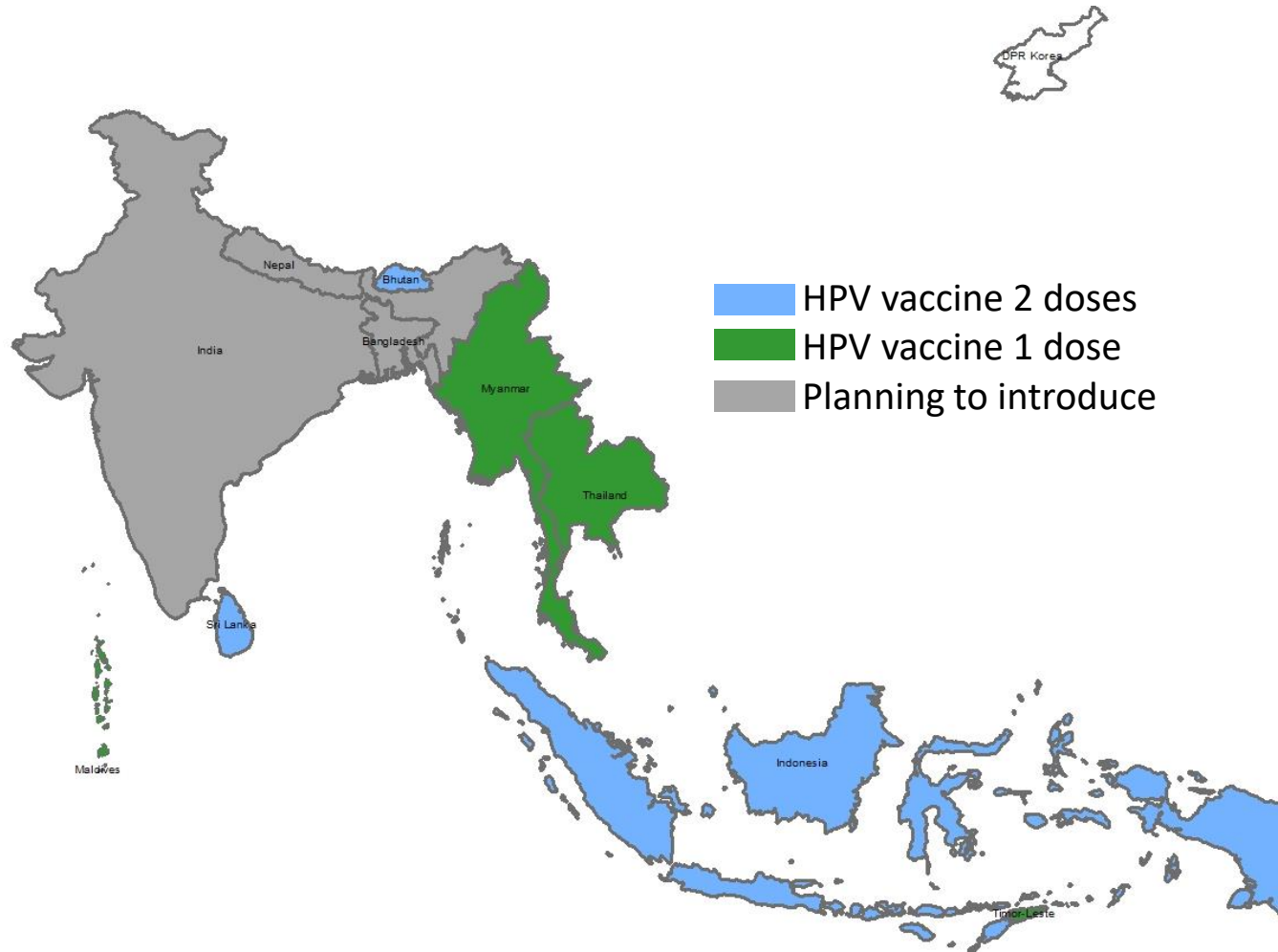
- “Introducing the vaccination of boys and older females should be carefully managed until the global supply situation is fully unconstrained”



* Contains off label recommendations

Status of HPV vaccine introduction and HPV vaccine schedules in 9–14-year-olds.

8/11 countries have introduced HPV as of October 2024



Nationwide: 7 countries

- **2 doses:** Bhutan, Indonesia, Sri Lanka,
- **1 dose:** Maldives[@], Myanmar[@], Thailand[#], Timor-Leste[@]

Subnational : 2 countries

- **1 dose:** Bangladesh[@],
- **2 doses:** Sikkim State, India

Planning to introduce: 2 countries

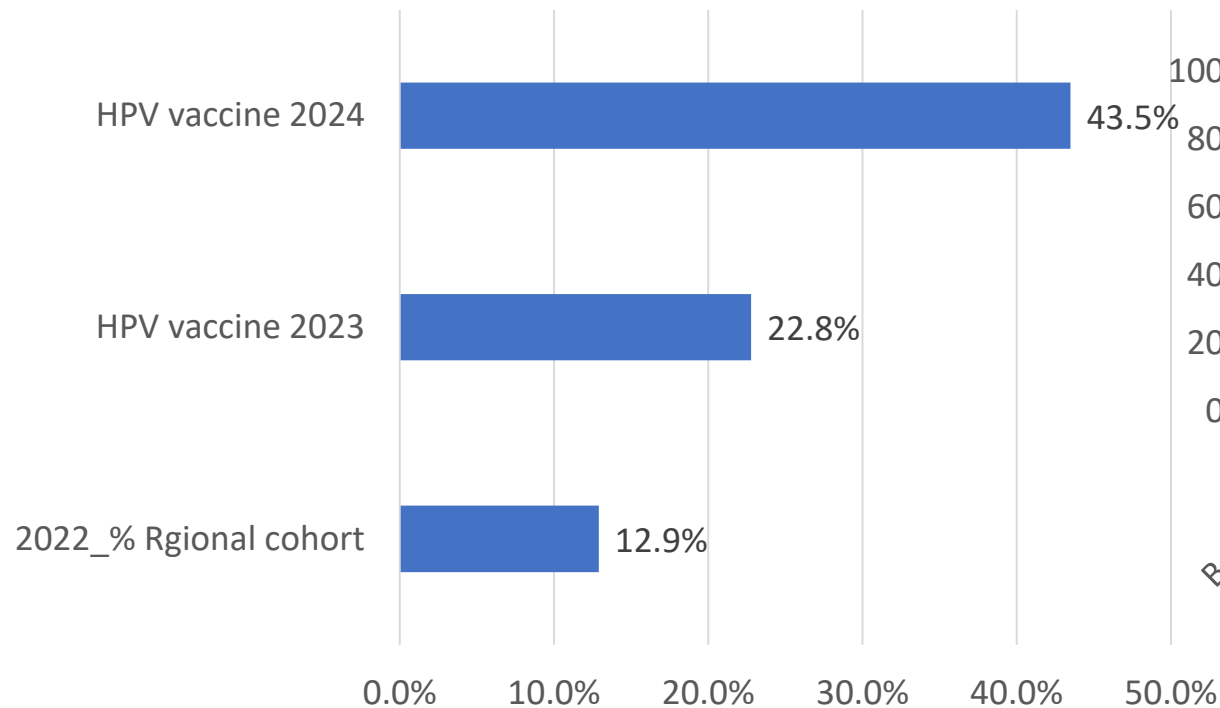
- **India, Nepal**

[@] Started implementing a 1-dose schedule

- [#] [Thailand to introduce more effective and affordable HPV vaccine](#)

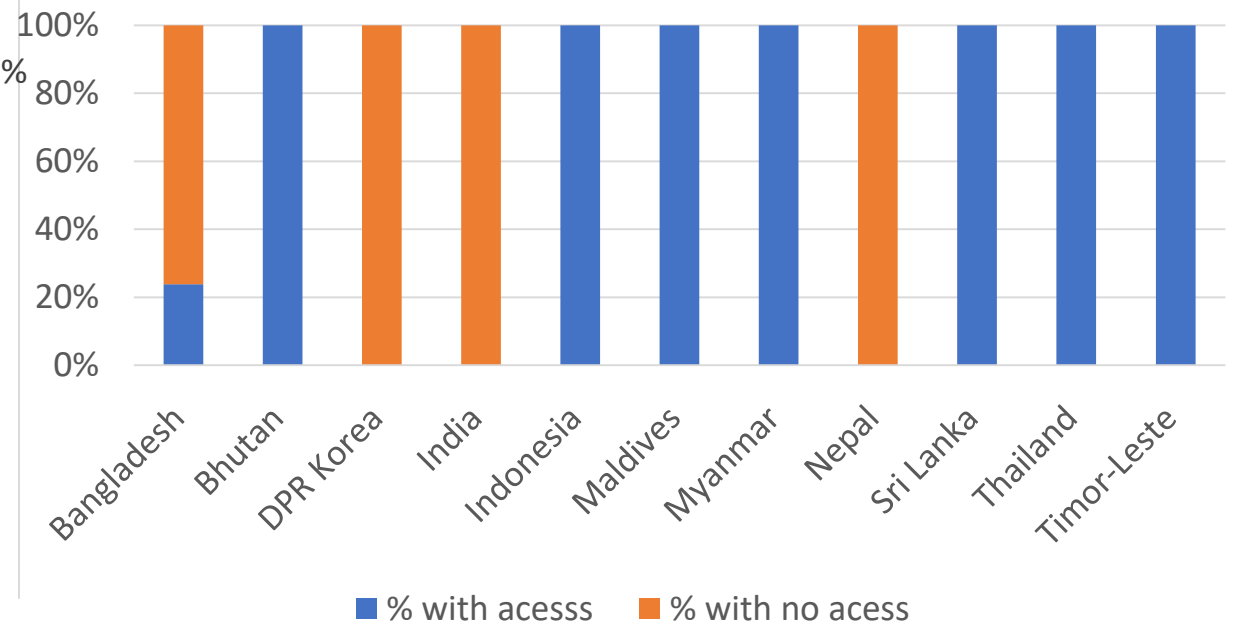
Proportion of regional and national annual cohort of girls with access to HPV vaccines

% SEA Regional single-year cohort of girls with access to HPV vaccines 2022-24



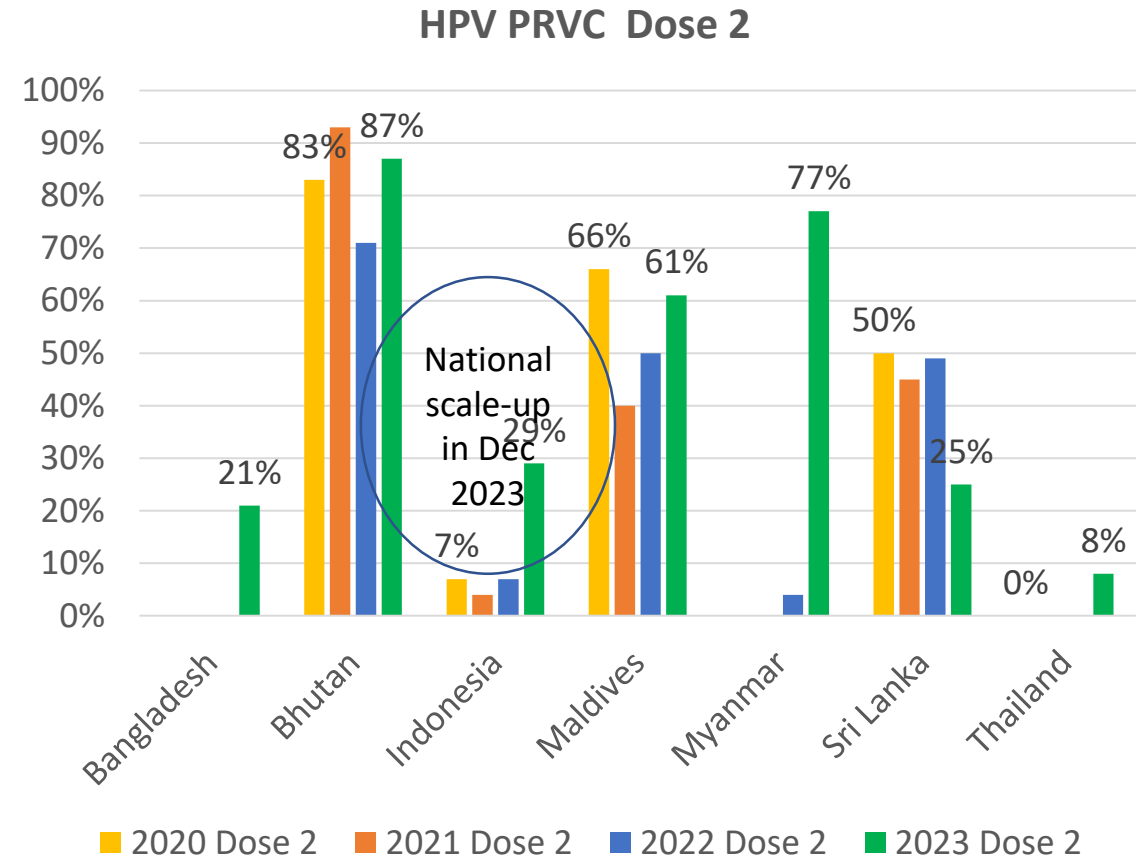
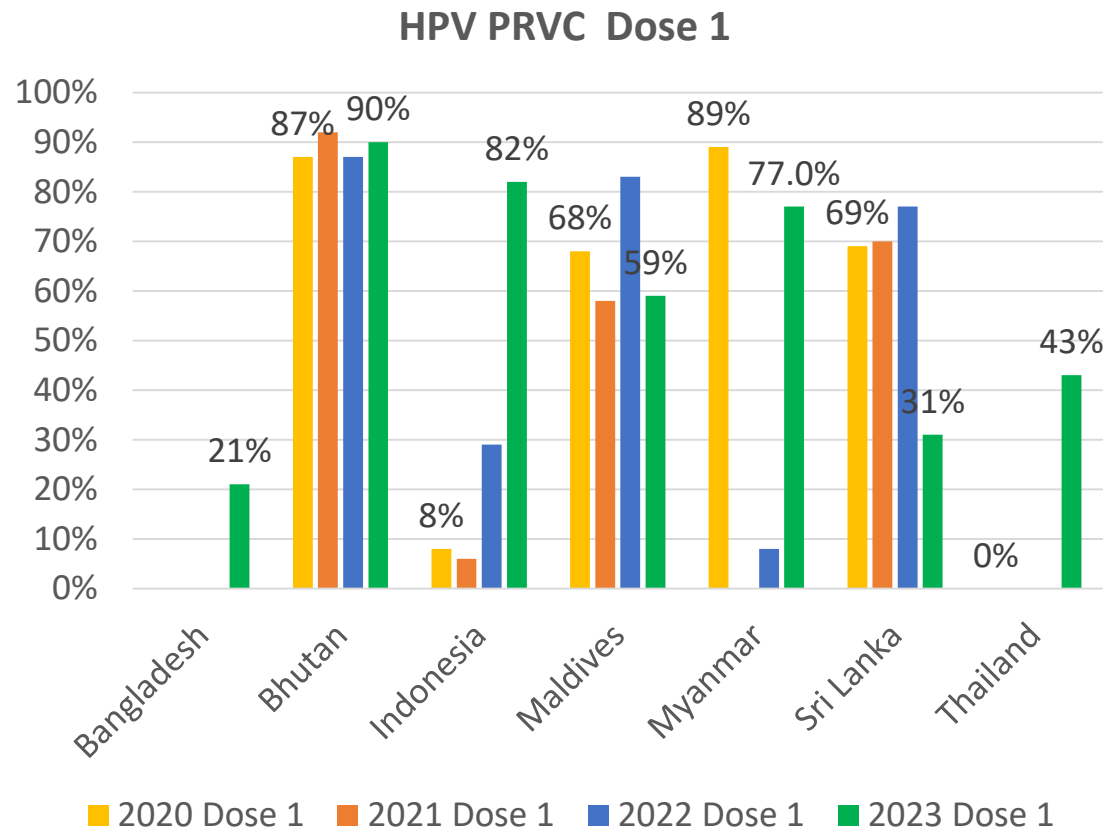
The % of girls with access in the region has been increasing gradually from 2022

% national annual cohort of girls with access to HPV vaccines by October 2024



In 6 countries, 100% of girls have access
At end of 2024, it is expected another 2 countries (Bangladesh and Timor-Leste) will introduce HPV nationwide and India subnational

HPV vaccine programme coverages (PRVC) in SEA countries, 2020-23



- **Bhutan** has maintained high overages and improved HPV2 in 2023 (reporting issues addressed)
- **HPV2 Coverage** increased in all countries. **Procurement challenges** in Thailand and Sri Lanka being addressed/Catch-up

Challenges

- **Vaccine supply constraints.** (Bangladesh , India, Nepal, Sri Lanka, Thailand)
- Affordability/High prices of available HPV vaccines
- **Delivery strategies and costs**
 - Weak school-health programmes
 - Reaching out-of-school (OOS) girls
- **Decision-making** challenges:
 - For funding introduction of HPV vaccine in some countries
 - Regulatory versus public health benefit of 1-dose schedules
- Security and/or technical challenges for HPV vaccine rollout: DPR Korea and Myanmar

The 2024 ITAG noted that “more countries have adopted one-dose HPV vaccination schedule; however, it is concerned at low HPV vaccine introduction and coverage, due to delayed policy decisions, limited vaccine supply, procurement challenges and suboptimal service delivery to eligible targets.”

Opportunities

- **Gavi support** for eligible countries (Bangladesh, India, Nepal), including middle-income support to countries (Indonesia, Timor-Leste)
- **New HPV vaccines with relatively lower prices**
- **WHO SAGE updated recommendations** for 1-dose schedules and explanatory note for countries#
- **Support from partners** for HPV vaccine introduction and coverage improvements
 - **Study tour for HPV vaccine introduction and school-based vaccinations** to Thailand MOH/EPI- Dec 2022 (MOH and WCO Bangladesh and Nepal)
 - **Inter-country exchange visit: Timor-leste HPVV introduction**
 - **UNICEF: Multi-Country Perception Study on Behaviours around HPV Immunization** in Adolescents in South Asia (Nepal, Bangladesh, India, Sri Lanka & Maldives.) in 2023 and 2024.

Next steps and plans for scale up

- **Catch-up vaccinations** of missed cohorts: Maldives, Myanmar, Sri Lanka and Thailand
- **Accelerate expansion:** Bangladesh- need timely delivery of HPVV doses
- **Accelerated plans for HPV vaccine introduction in 2024:** India- high level support announced 2024 (Health budget voted Jan 2024). Timing awaited
- **Coordinated support from partners**
 - **More advocacy** needed FOR 1-dose schedules in remaining countries
 - **Coverage improvements;** applications
 - Advocacy to **develop/strengthen school-health programmes** and school-based vaccination platforms

Cervical Cancer Elimination Initiative (CCEI)



Collaborative effort of three departments –
FGL/MRH, HPN/NCD and IVD/CDS

Thank you