Cancers caused by human papillomavirus (HPV) are a significant public health problem in the United States (U.S.). But these cancers are preventable with HPV vaccination. The National Cancer Institute (NCI)-designated cancer centers fully endorse the goal of eliminating cancers caused by HPV through gender-neutral HPV vaccination and evidence-based cancer screening. The COVID-19 pandemic has profoundly interrupted delivery of key preventive services, resulting in many U.S. adolescents missing routine HPV vaccine doses. Even before the pandemic, HPV vaccination uptake in the U.S. lagged far behind several high-income countries and remains well below the Healthy People 2030 goal of vaccinating 80% of boys and girls aged 13-15. To protect adolescents from cancers caused by HPV, it is urgent to act now to get HPV vaccination back on track.

NCI Cancer Centers strongly encourage parents to vaccinate their adolescents as soon as possible. The COVID-19 vaccination presents an opportunity for parents to protect their children by catching up on missed or due routinely recommended vaccines. The U.S. has recommended routine HPV vaccination for females since 2006 and for males since 2011. Current recommendations are for routine vaccination at ages 11 or 12 or starting at age 9. Catch-up HPV vaccination is recommended through age 26. The guidelines recommend that adults ages 27 to 45 talk with a health care provider because some people who have not been vaccinated might benefit. According to the Centers for Disease Control and Prevention (CDC), 54% of boys and girls ages 13–17 completed the HPV vaccination series in 2019, compared to 42% in 2015, with variability by geographic region. The COVID-19 pandemic has jeopardized these modest but positive gains. In spite of more than 15 years of safety and monitoring data and strong evidence showing reduction of HPV vaccine-type infection and cancers, HPV vaccination uptake still isn’t meeting our national goal.

The U.S. is facing a significant vaccination gap, especially for adolescents, due to the pandemic. Well-child visits are down. Usual “back to school” vaccination activity for adolescents has been limited by virtual and hybrid learning. Early in the pandemic, HPV vaccination rates among adolescents fell by 75%, resulting in large numbers of unvaccinated children. It is crucial that the nation gets back on track with adolescent vaccination to ensure protected children and safer communities.

The CDC’s Advisory Committee on Immunization Practices (ACIP) has endorsed the safety and effectiveness of the Pfizer-BioNTech COVID-19 vaccine and its use in 12-15-year-old adolescents. CDC recommends that this vaccine be used among this population, and health care providers may begin vaccinating them right away. In addition, COVID-19 vaccines and other vaccines may now be administered at the same visit. Protecting this vaccine be used among this population, and health care providers may begin vaccinating them right away. In addition, COVID-19 vaccines and other vaccines may now be administered at the same visit. Protecting children and adolescents from cancers caused by HPV through gender-neutral HPV vaccination and evidence-based cancer screening is crucial. The COVID-19 pandemic has jeopardized these modest but positive gains. In spite of more than 15 years of safety and monitoring data and strong evidence showing reduction of HPV vaccine-type infection and cancers, HPV vaccination uptake still isn’t meeting our national goal.

HPV vaccination is cancer prevention. Now is the time to catch up on missed doses of HPV vaccine to prevent future cancers. Contact your local health department or health care provider to schedule an appointment for missed vaccinations today.

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NCI Designated Cancer Centers Call for Urgent Action to Get HPV Vaccination Back on Track

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