Physicians Mull Boosting Teen Vaccine Compliance

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AMELIA ISLAND, Fla. — Recent approval of the first vaccine to prevent human papillomavirus infection underlines the need for physicians to improve immunization of adolescents. Dr. Kenneth Alexander said at a meeting on pediatrics for the primary care physician sponsored by Nemours.

The good news is there are strategies that can optimize routine vaccination of teenagers for human papillomavirus (HPV), meningitis, and pertussis. Vaccine promotion, reminder calls, and mass mailings are among some "tried and true" tactics that office-based physicians can employ. Another idea is to enlist emergency physicians to immunize all adolescent patients. School-based vaccinations are another option, although somewhat controversial with human papillomavirus, said Dr. Alexander, a pediatric infectious disease specialist at the University of Chicago.

The American Academy of Pediatrics is advocating a routine 11- to 12-year-old visit to foster the new shots.

"This is something your whole office should be promoting. Remind your staff to ask the kid who comes in for another reason. Contraindications to immunization are very limited," Dr. Alexander said.

Concerning the parents of every teenager in your practice is another effective approach. However, going through the charts is time consuming and can be very expensive, Dr. Alexander said.

Send a mass mailing to inform parents that a new vaccine is available and how insurance companies are providing reimbursement. Also, schedule all three visits for the HPV vaccine regimen with Dr. Alexander said, and follow up with telephone reminders. "This could also be Done with e-mail — a smart way to go, "

Cook County Hospital in Chicago uses its emergency department to immunize adults, Dr. Alexander said. This tactic could be extrapolated to pediatric patients. "If a kid shows up with a spained ankle in the ER, can we treat it as an opportunity to immunize them? Darn tootin'. Should we look at school-based vaccinations? It will be controversial with HPV vaccine, as you can imagine," he said.

Some fear that a vaccine against HPV will increase sexual activity among teenagers. The vaccine does not obviate the need for a safe sex talk with a teenager, he said. In addition, "it is important to talk about abstinence — I have two teenage daughters. You have to trust and verify, and then immunize them anyway,"

Parents want to hear the vaccine is effective, safe, and recommended by their child’s health care provider, Dr. Alexander said. "But they don’t want to hear about their child being sexually active. You can say the vaccine is for preventing infection in women who are or ever will become sexually active.

Future endeavors related to HPV prevention include longer-term follow-up studies of vaccines, approval of the second HPV vaccine expected later this year, studies in males, and forthcoming recommendations from the American Academy of Pediatrics, American Academy of Family Physicians, and the Society of General Internal Medicine.

Physicians will need to provide education about HPV because "parents wake up when you say meningitis, but they don’t know what HPV is," Dr. Alexander said.