



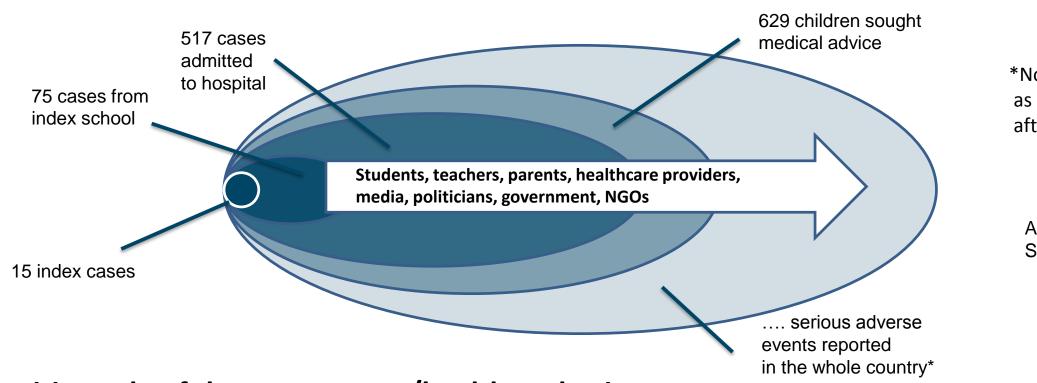
HPV Prevention and Control Board HYGIEN &TROPIC **Colombia:** Decreasing HPV vaccination coverage: mapping roles of different stakeholders and societal-historical factors.

Introduction:

Vaccination coverage is the result of a complex interplay between different stakeholders with a specific societal and cultural background. The goal of this poster is to provide a brief overview of major events/aspects that may have contributed to the current situation in Colombia. By listing the role or potential role of different stake holders or cultural-historical factors we may be able to compare different countries and find common denominators.

Possible event(s) leading to crisis:

• In 2014, a mass psychogenic event in Carmen de Bolivar, a small city in the north of Colombia, was used and continues being used by the media to shake public confidence in HPV immunization despite strong support from the government.



Ripple effect of the outbreak (1)

Position role of the government/health authority

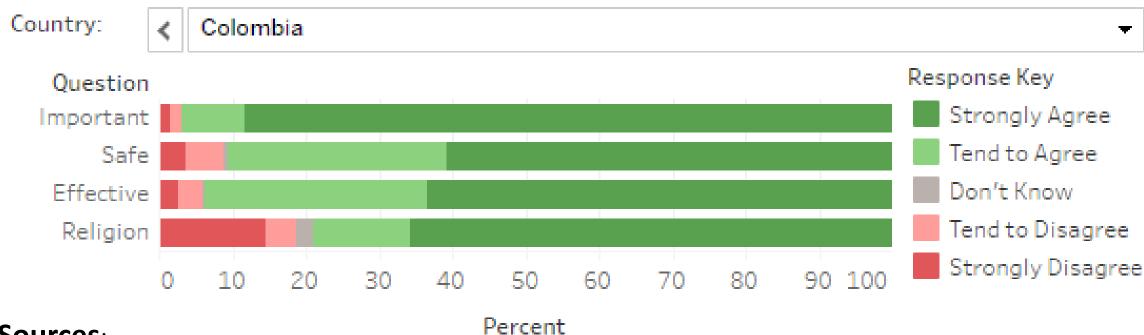
• The Colombian government has stood firmly by the scientific evidence and has maintained the HPV vaccination programme (2)

Other stakeholders

- Instituto Nacional de Salud (INS): Conducted the outbreak study in Carmen de Bolivar leading to the conclusion of mass psychogenic event and it is responsible for monitoring adverse side effects.
- National Cancer Institute of Colombia (NCI) and the Catalan Institute of Oncology have developed a virtual course on HPV vaccine safety for medical and paramedical personnel. The NCI is also planning an intervention study to recuperate confidence on the HPV vaccine.
- Colombian Liga against cancer: is leading a concertation group to increase confidence of the HPV vaccine
- The National Academy of Medicine after an ambivalent report on HPV vaccine safety, is now conducting pro-HPV vaccine activities

Adolescents/parents

• Confidence level based on confidence survey (based on general questions regarding vaccination, not focussed on HPV (3)

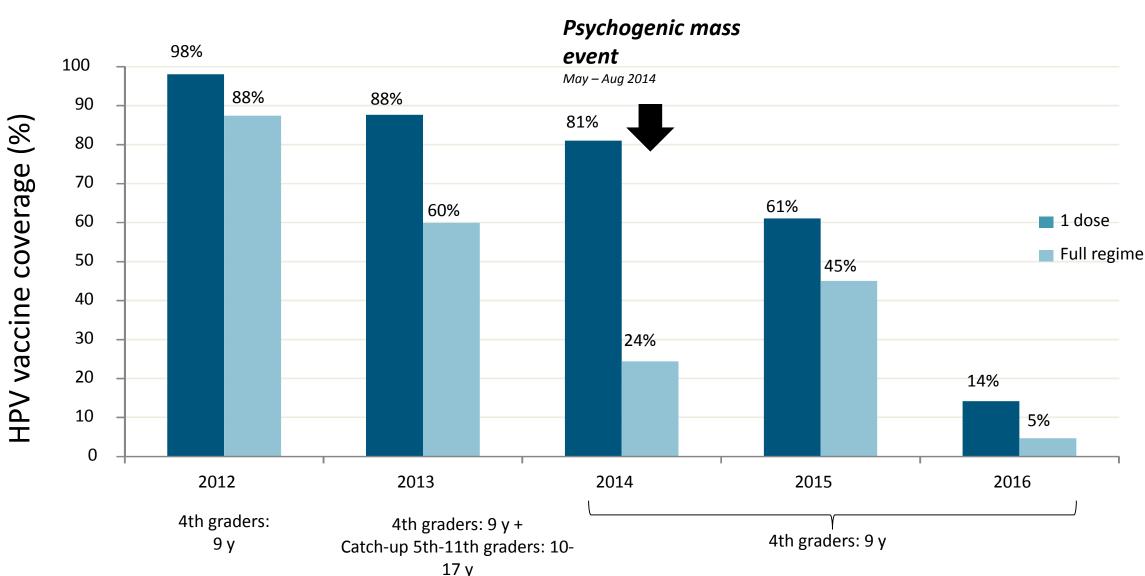


Sources:

- Outbreak report INS Colombia.
- https://www.minsalud.gov.co/salud/publica/Vacunacion/Paginas/ABC-de-la-vacuna-contra-el-cancer-cuello-uterino.aspx
- Available at http://www.vaccineconfidence.org/research/the-state-of-vaccine-confidence-2016
- Personal communication from the ICO HPV Information Centre. Data from Colombia Ministry of Health and Social Protection
- Anaya JM, Reyes B, Perdomo-Arciniegas AM, Camacho-Rodríguez B, Rojas-Villarraga A. Autoimmune/auto-inflammatory 5. syndrome induced by adjuvants (ASIA) after quadrivalent human papillomavirus vaccination in Colombians: a call for personalised medicine. Clin Exp Rheumatol. 2015 Jul-Aug;33(4):545-8. Epub 2015 May 11.
- Encuesta Nacional de demografia y salud, ENDS 2010, Colombia. 6.
- Available at http://apps.who.int/immunization_monitoring/globalsummary/timeseries/tswucoveragepol3.html

Alex Vorsters¹, Nubia Muñoz², Raul Murillo³, Pierre Van Damme¹, Emilie Karafillakis⁴, Silvia de SanJosé⁵, Laia Bruni⁵, Heidi Larson⁴. 1Center for the Evaluation of Vaccination, University of Antwerp, Belgium; 2 Emeritus Professor, National Cancer Institute of Colombia; 3 Cancer Center, Javeriana University, Bogota, Colombia; 4 Vaccine confidence project, London School of Hygiene and Tropical Medicine, UK; 5 Cancer Epidemiology Research Programme at the Catalan Institute of Oncology (ICO), Barcelona, Spain;

Coverage rate HPV vaccination (4)



Position/role of Vaccine providers/HCW

- HPV vaccination programme is school based.
- Some HCW are also fueling the distrust on the HPV vaccine by publishing case reports that suggest that the HPV vaccine is responsible for some autoimmune diseases diagnosed after vaccination. E.g. (Dr. Juan M Anaya) a Colombian immunologist proposes screening for autoimmune diseases before HPV vaccination. (3)

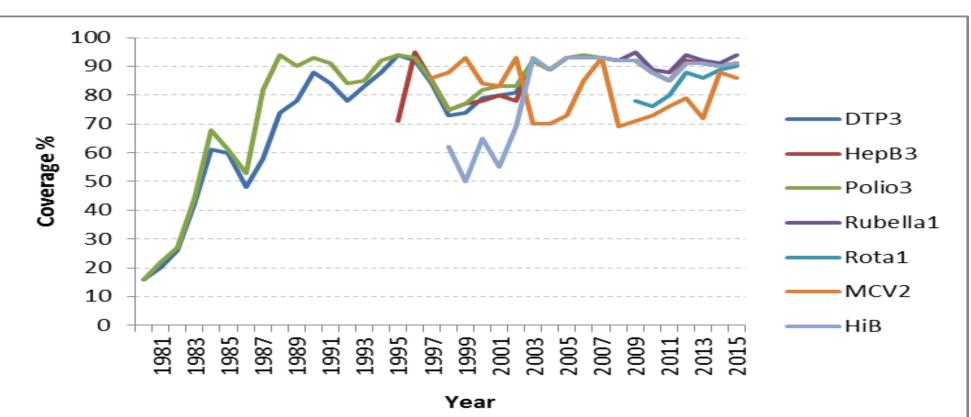
Organized "anti-vaccine" activities

• Girls experiencing alleged adverse effects (50 are represented by Monica Lion Del Rio, attorney and mother of a girl with symptoms of side effects)

Societal-historical factors related to adherence to universal prevention progams

- Cervical cancer screening coverage, % (age and screening interval, reference): 69.9% (All women aged 18-69 screened every 1y. (6)
- Screening ages (years) 25-69 (cytology), 30-50 (VIA), 30-69 (HPV test)
- Good coverage of EPI vaccines

Coverage of the Expanded Immunization Programme in Colombia(7)



*No-associated with HPV vaccines as defined by the National Programme after their analyses

Adapted from Clements CJ. Drug Safety 2003

- >

Poster at HPV symposium: Building Trust, Managing Risk: Vaccine Confidence and Human Papillomavirus Vaccination 7-8 June 2017 at the London school of hygiene & tropical medicine.

