



**PREVENT
GLOBAL
HPV CANCERS**

Cervical Cancer Prevention through HPV Vaccination

An Action Guide for Medical Societies in India



17 March 2023

Dear Colleagues/Physician Leaders/Medical Society Leaders

The International Federation of Gynecology and Obstetrics (FIGO) and the Federation of Obstetric and Gynecological Societies of India (FOGSI) are committed to placing a priority on saving the lives of women through cervical cancer prevention. This Action Guide for Medical Societies in India compiles the evidence and messaging, along with the Action Steps that can easily be followed. FIGO is the global voice for women's health, and our Women's Health agenda addresses women's health across her lifespan from adolescence through maturity. We know that 1000 women are dying every day from cervical cancer. It is a silent killer, disproportionately impacting the poor, the immunocompromised and those from low-income countries.

Cervical cancer is the fourth most common cancer among women globally with over 600,000 new cases each year, and the second-leading cause of cancer deaths among women. Yet, cervical cancer is preventable with a vaccination program. It is preventable with a screening program, and lives are saved with a treatment program. Effective primary prevention with HPV vaccination and secondary prevention with screening for and treating precancerous lesions will prevent most cervical cancer cases.

It is not the science that is lacking, it is not the willingness of physicians that is lacking, but it is the lack of funding to provide relatable and evidence-based preventive medicine that is lacking around the world. Here, in this compendium, we have the evidence. Now, it is up to the physicians across India to step forward, to educate and to lead. Physicians need to educate one another, patients and government representatives from across the country. Physicians need to be the leaders who will end cervical cancer by advocating effectively for prevention with HPV vaccination of early adolescents. Physicians need to advocate for universal screening, and they need to advocate for treatment. Physicians are respected leaders, and physicians need to lead the global efforts to eradicate cervical cancer.

Yours sincerely



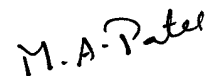
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Dear Colleagues/Physician Leaders/Medical Society Leaders –

Now is a moment for celebration and action for physicians. We can help usher in the first generation of women free of cervical cancer in India! Two doses of the HPV vaccine, when given to girls aged 9 to 14 years, can prevent HPV infection and protect against the development of most cervical cancers and four additional cancers in women: vulvar, anal, vaginal, and throat. In countries like Australia, UK, and Sweden where adolescents have been receiving the HPV vaccine since its release, there are already dramatic reductions in new cases of cervical precancer and cancer.

HPV vaccination works. It is safe and provides long-lasting protection. Hundreds of millions of girls and boys in over 100 countries have safely received the HPV vaccine since it became available in 2006. In 2020, the World Health Organization's (WHO) Strategy for Cervical Cancer Elimination set a target to fully vaccinate 90% of all eligible girls before their 15th birthday. Today, the majority of girls in India are not benefiting from this cancer prevention vaccine largely because it is not being recommended by their physicians, or they lack access to the vaccine.

A strong recommendation from a physician is the most important factor in determining whether a girl receives the HPV vaccine. In addition to strongly recommending HPV vaccination to parents, it is our responsibility as physicians to advocate for the HPV vaccine to be made available—free of charge—to all girls through its inclusion in the Universal Immunization Programme.

Today in India, over 77,000 women die of cervical cancer and over 120,000 new cases are diagnosed each year. Without action, these numbers will rise significantly in future decades. We must not miss this opportunity to prevent cancer. As physicians, we must commit to prioritizing HPV vaccine in our clinics, hospitals, and medical societies. This guide offers evidence-based actions and resources to help us take the critical first steps in that direction.

Let's create a future India where cervical cancer has been eliminated and girls grow up with one less cancer threatening their lives.

Sincerely,

HDPai

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February 3, 2023

Dear Colleagues,

It is an exciting moment in adolescent health! The HPV vaccine, recommended for ages 9- 14 years, starting with girls, can now protect adolescents from cervical cancer and potentially five additional cancers. Collective action, led by national paediatric societies, can help countries usher in a generation of women free from cervical cancer.

India's first indigenous HPV vaccine, Cervavac, is expected to soon be available at an affordable cost. Additionally, the Government of India recently announced the inclusion of this locally manufactured vaccine in the national immunization program. These positive developments promise to increase the access and availability of the HPV vaccine in all urban and rural communities.

As the President-Elect of International Paediatrics Association, I applaud the Indian Academy of Pediatrics for its efforts to prioritize HPV vaccination and ensure that every parent/guardian of adolescents in our practice choose to protect their daughter with this cancer prevention vaccine.

Pediatricians remain the most trusted source of health-related information for adolescent and children in communities globally. It is our responsibility to recommend the HPV vaccine strongly and repeatedly; and explain why it is essential that all girls to receive it. This Action Guide and its accompanying resources can help support the efforts of medical societies and physicians to:

- Voice strong public statements in support of cervical cancer elimination,
- Routinely and confidently recommend that all parents of 9–14-year-old girls protect their daughters from cervical cancer with the HPV vaccine, and
- Have clear and effective conversations about HPV vaccination and cancer prevention with parents.

Let's end cervical cancer and save lives!

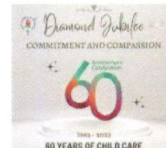
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Dear Colleagues,

Greetings from Indian Academy of Pediatrics!

We have reached a very exciting and critical time in our country's efforts to bring life-saving protection against cervical cancer to millions of adolescent girls. Caused by the human papillomavirus (HPV), cervical cancer takes the lives of more than 77,000 Indian women every year and is the second leading cause of cancer deaths among women in our country. However, we are on the cusp of changes that will help to usher in a generation of women free from cervical cancer.

India's first indigenously manufactured HPV vaccine that can prevent five HPV cancers among women including most cervical cancers is expected to soon be available at an affordable cost. The vaccine is also being introduced in the Universal Immunization Programme (UIP). With these positive developments, the access and availability of the HPV vaccine will be greatly increased in all communities.

Now, more than ever, we must educate each other and parents/guardians of our adolescent patients about the cancer prevention benefits of the HPV vaccine.

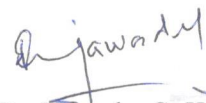
As respected leaders and the most trusted sources of health-related information, it is our responsibility as physicians to recommend the HPV vaccine and explain why it is essential that all young girls receive it. The HPV vaccine is safe, effective, and provides long-lasting protection. It is most effective when administered between the ages of 9 and 14 years.

This Action Guide and its accompanying resources can help support the efforts of medical societies and physicians to:

- Voice strong public statements in support of cervical cancer elimination,
- Routinely and confidently recommend that all parents of 9–14-year-old girls protect their daughters from cervical cancer with the HPV vaccine, and
- Have clear and effective conversations about HPV vaccination with every parent.

Join in to stop cervical cancer before it starts. Together, we can make sure that no daughter in India grows up unprotected from cervical cancer.

Let's end cervical cancer and save lives!


Dr. Upendra S. Kinjawadekar,
President, 2023
Indian Academy of Pediatrics



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About this Guide

This guide is designed for medical society board, committee, and volunteer leaders seeking to take action to prevent cervical cancer in India through increased rates of HPV vaccination for girls ages 9 to 14 years, the only vaccine approved that can prevent cervical cancer.

Medical societies can use action steps and accompanying resources either as individual efforts or as part of a comprehensive education and awareness initiative to support member physicians with recommending the HPV vaccine as cervical cancer prevention in their practices, routinely and with confidence.

The development of this guide and its resources were informed by research with physicians conducted by the Center for Social and Behavioral Change, Ashoka University, and Cancer Foundation of India and supported by a grant from the American Cancer Society's Global HPV Cancer Free initiative. [Learn more](#) about the research that contributed to the development of this guide. For questions about this guide or Prevent Global HPV Cancers, contact globalcancerprevention@cancer.org.

An action plan template is included in the [resource](#) section of this guide to help prioritise activities.

Cervical cancer is
the **second-leading**
cause of cancer deaths
among women

Every 8 minutes,
a woman in India
dies of cervical
cancer

123,907

new cases

est. **77,348**
deaths annually

An estimated

1 in 153

women in India will develop
cervical cancer in their lifetime

8 out of 10

women globally will get infected with
HPV at some point in their lifetime

More than

**480
million**

women in India are at risk for
cervical cancer

You Have the Power
to Help Create Generations of
Women Free from Cervical Cancer



Elimination is Possible

Cervical cancer, caused by HPV, is an urgent public health problem that can be solved. In 2020, the World Health Organization (WHO) launched a global initiative to eliminate cervical cancer which set targets for three important strategies: HPV vaccination, cervical cancer screening, and treatment. Currently 193 countries, including India, are committed to eliminating cervical cancer. To achieve elimination, 90% of girls between 9 and 14 years of age need to be vaccinated by 2030. The strategies also call to focus on high-quality health services and equitable access to care. [Get more facts on the elimination strategy here.](#)

WORLD HEALTH ORGANIZATION

Achieving Elimination

Vision: A world free of cervical cancer

90%

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

70%

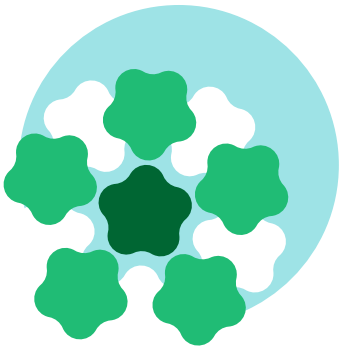
of women screened with
an HPV test at 35 and 45
years of age

90%

of women identified
with cervical disease
receive treatment for
precancerous lesions or
invasive cancer

Elimination threshold: < 4 cases of cervical cancer per 100,000 women per year

Why Prioritise HPV Vaccination?



HPV VACCINATION HELPS PREVENT CERVICAL CANCER.

HPV is very common. HPV infection cannot be treated, but there is a vaccine that can prevent it. The HPV vaccine helps prevent infection with the HPV serotypes that most commonly cause cervical cancer. An estimated 1 in 53 women in India will develop cervical cancer in their lifetime [10]. Over eighty percent of cervical cancers in India are caused by HPV serotypes that can be prevented by HPV vaccination [12].



AGE MATTERS. HPV VACCINATION WORKS BEST WHEN GIVEN ON TIME BETWEEN THE AGES OF 9 AND 14.

Several studies have shown the importance of vaccinating against HPV at younger ages. A longitudinal study published in 2021 reported that England's National Health Service (NHS) vaccination programme was able to prevent cervical cancer, reducing cases by 87% in women who received at least one HPV vaccine before their 14th birthday. Cervical cancer cases prevented among women who received the HPV vaccine between 14-16 years dropped to 62% and those vaccinated between 16-18 years only reduced cancer cases by 34% [13, 14].



THE HPV VACCINE IS SAFE AND EFFECTIVE AND OFFERS LONG LASTING PROTECTION.

The HPV vaccine is not new. Since its debut in 2006, it has been introduced in the national immunisation programmes of more than 100 countries and millions of girls and boys have been vaccinated [3, 15]. The Global Advisory Committee on Vaccine Safety (GACVS) has found no adverse events of concern based on several large, high quality studies [3].

Challenges to HPV Vaccination in India

- HPV vaccines are not widely accessible to all girls across India. The vaccine was introduced in India in 2008 [16] and has been recommended for inclusion in the Universal Immunization Programme (UIP) in 2023. As of now, it is primarily available through the private market at additional out-of-pocket cost.
- Many physicians underestimate the incidence and risk of cervical cancer and HPV infection leading them to not recommend the vaccine.
- Many physicians underestimate the HPV vaccine's safety and effectiveness. This leads to hesitation to recommend the vaccine.
- Physicians may hesitate to recommend HPV vaccination because HPV infections are primarily transmitted sexually or they feel it will be time consuming to counsel parents.

For more details about the challenges to HPV vaccination, read the [research conducted with Indian physicians](#) that informed the development of this guide.

THE ROLE OF MEDICAL SOCIETIES IN INCREASING HPV VACCINATION AMONG ADOLESCENT GIRLS

Medical societies have a strong presence at national, state, and local levels. They are respected public health leaders in the physician community and valued partners to policy makers.

Professional organizations are recognised to be primary sources of the latest information on scientific research and guidelines, providers of continuing medical education, and authorities on standards of excellence for clinical practice.

Medical societies can create a much-needed sense of urgency among physicians and policy makers by voicing a strong position in support of cervical cancer elimination and including HPV vaccination as its priority initiative. This can help catalyse a) physicians across the country to strongly recommend the vaccine to parents and caregivers, and b) policy makers at national and state levels to support HPV vaccination catch-up for all girls ages 9 to 14 years old.



Take Action

Prioritising
HPV Vaccination
in Practice

Actions At a Glance

To address current challenges to HPV vaccination uptake, this guide suggests three actions your medical society can take to motivate and support physicians to recommend the HPV vaccine routinely and confidently.



Alert physicians of their pivotal role in preventing cervical cancer through HPV vaccination of adolescent girls.



Cultivate physician champions who will advocate for increased administration of the HPV vaccine among both peers and parents.



Recognise and share successes in increasing HPV vaccination.

SPECIAL NOTE ABOUT THE REFERENCE TO PHYSICIANS

The term 'physicians' as used in this guide refers to a range of doctors for whom HPV vaccination is relevant. This includes:

General Physicians

usually the first point of contact for healthcare needs.

Pediatricians

who are closely associated with vaccination programmes for children/adolescents.

Gynaecologists

most often screen for and diagnose cervical cancer.



ACTION 1

Alert physicians of high risk of cervical cancer and their pivotal role in preventing it.

Physicians are viewed as the most trusted source of medical information by parents and caregivers. A strong physician recommendation increases the likelihood of HPV vaccination, yet research has found that physicians underestimate the availability of a safe and effective modality to prevent it: the HPV vaccine [7, 17, 18]. This misperception contributes to them not actively recommending the HPV vaccine to parents or caregivers of adolescent girls.

Medical societies should consider undertaking multiple activities to increase member physicians' education and awareness of: (a) the extent and severity of cervical cancer in India, and (b) the impact of their recommendation in addressing it.

Actions to consider



Publish a letter to members describing the magnitude of the cervical cancer problem and urging them to follow recommended HPV vaccination guidelines with all 9 to 14-year-old girls in their practice.



Share key cervical cancer and HPV vaccination facts, statistics, and messages with members through frequent distribution of information, education, and communication (IEC) materials.



Remind physicians of the incidence and seriousness of cervical cancer and the HPV vaccine as a primary prevention tool through the medical society's regular communication channels. Examples include: newsletters, websites, emails, social media platforms, conferences, podcasts, and webinars.

- Include oncologists as speakers during education opportunities such as HPV presentations, medical conference webinars, and continuing medical education courses. ([see Resources](#))
- Host a live or recorded video or audio story with an expert(s) in cervical cancer prevention and disseminate it through channels such as Facebook Live, WhatsApp, YouTube, Instagram, and LinkedIn.
- Leverage cervical cancer awareness events to promote facts about cervical cancer and the life-saving benefits of HPV vaccination. Examples include Cervical Cancer Awareness Month (January), World Cancer Day (February 4), International HPV Day (March 4), and International Women's Day (March 8).



Promote the use of in-clinic visual reminders that can serve as conversation starters with parents and caregivers. These could be in the form of posters depicting the risk and burden of cervical cancer, recommended ages for HPV vaccination, and/or facts about the HPV vaccine. ([see Resources](#))



collaborate with other national medical societies and cancer centres on HPV vaccination activities to show broad support and increase impact.

KEY MESSAGES

As physicians, it is our responsibility to recommend the HPV vaccine and explain to people why it is essential that all young girls receive it. Use these messages to guide conversation.

- HPV, or human papillomavirus, is a common virus that causes almost all cervical cancer.
- HPV vaccination is cervical cancer prevention.
- The HPV vaccine is safe and provides long lasting protection against cervical cancer.
- HPV vaccination works best when given to girls on-time, between ages 9 and 14.



ACTION 2

Cultivate HPV vaccination physician champions.

Physician champions supporting a health issue or clinical approach have been found to be highly effective in facilitating implementation and adoption of evidence-based practices [19]. Endorsement of the HPV vaccine's safety and effectiveness by well-known, respected physician leaders (referred to as champions) significantly increases physician trust in the vaccine and motivates physicians to recommend the vaccine to their patients [20]. HPV vaccination champions model strong prevention behaviour in their practices. They act as mentors to peers and endorse HPV vaccination as cancer prevention at every opportunity.

Actions to consider



Identify Champions

- Champion characteristics include being widely known and well-respected, having personal interest and commitment to cervical cancer prevention, fluency in local language(s), and good communication skills.
- Recruit champions who will have influence with your target physician group taking into account geography, patient population, and languages spoken.



Engage Champions

- Train champions on using key messages when communicating about the HPV vaccine. ([see Resources](#))
- Identify and plan opportunities for champions to promote the HPV vaccine. Examples include: videos on medical society's website, participation in cervical cancer awareness events, educational webinars and conferences, and inclusion in newsletter articles.
- Provide champions with resources to help them reach their target audiences. ([see Resources](#))
- Use medical society or partner communication platforms (videos, Facebook Live recordings, podcasts, blog posts, e-mail blasts, op-eds, and newsletter articles) to help champions conduct their HPV vaccination education and outreach.



Support Champions

- Regularly check-in with champions to track their efforts and provide additional support as needed.
- Reinforce continual use of HPV vaccination key messages for physicians.
- Report back to champions on the impact of their efforts such as the number of views their video received or number of participants who attended a webinar.
- Recognise the work of champions. For example, highlight them with photos and quotes on why they think advocating for the HPV vaccine is important. Acknowledge their contributions and efforts during association member meetings and webinars.

IDEAS FOR CHAMPION ACTIVITIES

- Raise awareness about HPV vaccination at local medical society events and through medical society's digital communication platforms (i.e., website, social media, email blasts, podcast, newsletter, etc.).
- Deliver HPV vaccination presentations to physicians at local and national medical conferences and webinars.
- Represent the medical society as a spokesperson for cervical cancer prevention and HPV vaccination in traditional media (TV, radio, and print) and social media channels using key messages.
- Promote HPV vaccination on personal social media platforms.



ACTION 3

Recognise and share successes in increasing HPV vaccination.

Increases in HPV vaccination will take time, effort, and commitment from your medical society's leadership and its members. Identifying and acknowledging progress will encourage continued change and re-energise member engagement along the way [21].

Actions to Consider



Recognise early adopters. Identify individual physicians and clinics who are changing their behaviour and attitudes towards HPV vaccination. Simple ways to identify early adopters include peer nominations and member surveys. Provide a certificate of recognition for display in clinics. ([see Resources](#))



Create an award to be presented at the medical society's annual conference for physicians or clinics that have shown extraordinary leadership in HPV vaccination and cancer prevention activities.



Feature successes through multiple communication channels like newsletters, e-mails, conferences, and videos.

Resources

Resources in this guide incorporate HPV vaccination messages tested in India. As you use these resources keep in mind that advocacy letters and training materials can be used as-is or customised with additional logos, local statistics, or photos to best resonate with your targeted physician community.

MATERIALS FOR PHYSICIANS

- [Key Messages for Physicians on HPV Vaccination](#)
- [Fact Sheet for Physicians on HPV Vaccination](#)
- [Physician Handout: HPV Vaccine Dosing Schedule and FAQ](#)
- [Physician Handout: Counselling Parents about the HPV Vaccine](#)
- [Video: HPV Vaccination Physician Champion](#)

MATERIALS FOR PATIENTS

- [Parent Handout: Don't Wait to Vaccinate](#)
- [In-Clinic Poster](#)

ADVOCACY LETTERS

- [Sample Letter: Engaging HPV Vaccine Physician Champions](#)
- [Sample Letter: To Medical Society Members in Support of HPV Vaccination](#)
- [Sample Op-Ed: Support of HPV Vaccination](#)
- [Sample Letter to Policymakers](#)

TRAININGS

- [Contact us](#) for presentations to help train physicians on HPV vaccination and counselling parents about HPV vaccination

PLANNING, MONITORING PROGRESS, AND RECOGNITION

- [Action Plan Template](#)
- [Sample Certificate of Recognition](#)

LINKS TO GUIDELINES FOR HPV VACCINATION

- [IAP Immunization Schedule 2021](#) (Tabular Form), Advisory Committee on Vaccines and Immunization Practices
 - [FOGSI Good Clinical Practice Recommendation for Cervical Cancer Prevention](#)
 - [Human papillomavirus vaccination: Good clinical practice recommendations from the Federation of Obstetric and Gynecological Societies of India](#)
 - [Asia Oceania Guidelines for the Implementation of Programs for Cervical Cancer Prevention and Control](#)
-

Acknowledgments

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References

Special Note: Formative and audience research with physicians on their perceptions and knowledge about cervical cancer and HPV vaccination informed the development of this action guide and its resources. The research was conducted by Diksha Radhakrishnan (MSc Development Studies, SOAS, University of London) and Pavan Mamidi (LL.M. from Harvard Law School and a Doctorate (D.Phil) in Sociology from the University of Oxford) of Center for Social and Behaviour Change at Ashoka University. To learn more about this research and its findings, read [Overcoming Barriers to HPV Vaccination Among Physicians in India: A Research Report](#).

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