

FAQs HPV and HPV Vaccination

1. Why should you get your vaccination now?

With the collaboration between National Cancer Society Malaysia (NCSM) and Merck Sharp & Dohme Corp. (MSD), we are able to offer a cheaper price (RM 299 for a 3-dose series) for the Gardasil-4 quadrivalent vaccine in view of the near expiry date of the vaccine in mid-2020.

2. Is the vaccine in this promotion safe?

These HPV vaccines are safe to use as they have not passed the expiry date. Their efficacy and safety is assured and quality control is maintained by MSD, the manufacturer.

3. How can I register for the vaccination?

You may refer to the web link provided in the poster.

4. Why are we asked to pay upfront?

Upfront payment is needed as these vaccines are purchased on a per order basis from the suppliers, MSD.

5. What is the Human Papillomavirus (HPV)?

Human Papillomavirus (HPV) is the most common sexually transmitted infection (STI) and it is reported that over 80% of people is expected to get infected with any HPV subtype in their lifetime.

HPV is mainly transmitted through sexual contact which includes oral, vaginal or anal sex as well as close skin to skin contact.

Both men and women should get vaccinated against HPV. This is simply because certain strains of the HPV virus can cause cancers of the cervix, vulva and vagina in women while in men, it causes cancer of the penis, anus and throat. Some of these strains also cause genital warts among both men and women.

6. What is the HPV vaccine?

HPV vaccines are vaccines that can protect you against infection by different HPV subtypes which are most commonly linked to various cancers and genital warts.

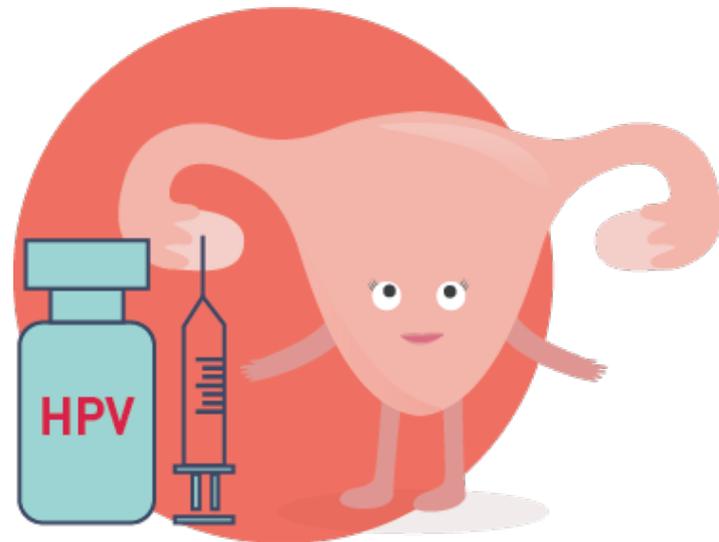
To date, there are three HPV vaccines that are being marketed in many countries throughout the world: these are Cervarix (bivalent), Gardasil-4 (quadrivalent) and Gardasil-9 (nonavalent vaccines).

7. What is the difference between these different types of HPV vaccine?

- The vaccines differ by the number of HPV subtypes that they protect against.
- Bivalent (Cervarix) protects against 2 subtypes of HPV (16 and 18)
- Quadrivalent (Gardasil 4) protects against 4 subtypes of HPV (6, 11, 16 and 18)
- Nonavalent (Gardasil 9) protects against 9 subtypes of HPV (6, 11, 16, 18, 31, 33, 45, 52 and 58)
- Both Gardasil 4 & 9 however still protect against the four most common viruses - HPV 16 & 18 that causes 70% of all cervical cancer cases and HPV 6 & 11 that causes 90% of all genital warts.

8. Who should be vaccinated against HPV?

- Both men and women should be vaccinated.
- Children and adults (9 to 26 years old) - If the vaccination were given before 15 years old, 2 doses will be sufficient (6-12 months after the first dose)
- Adult (27 to 45 years old) - HPV vaccination in this age range provides less benefit because most people would have already been exposed to the virus by this time.





Further questions you may have on the HPV Vaccine (Gardasil 4)

1. Why do I need to get the HPV vaccine?

The Gardasil-4 HPV vaccine can protect you from being infected by 4 different subtypes of HPV – HPV 6 & 11 which causes over 90% of all genital warts and HPV 16 & 18 which have caused over 70% of all cervical cancers.

By being vaccinated, it protects and prevent you from infecting or being infected by the virus from your sexual partner(s).

2. Can I not take the 3rd dose of HPV vaccine?

It is highly recommended to complete the 3-dose vaccination schedule for adults to ensure optimal immune response against the virus.

3. I'm sexually active, should I get the HPV vaccine?

Yes, you should! This is because while you may have been infected with one strain of the HPV virus, the vaccine can still protect you against other strains for the virus and this will reduce your ultimate risk of getting genital warts and cancers in the long run.

4. Is HPV vaccination safe?

Yes, they are. According to the Center of Disease Control (CDC), the HPV vaccine have been proven to be very safe and effective, after 10 years of continuous monitoring and research.

5. Do I need to be closely monitored after the vaccination?

No, there is no need for a special health check or close monitoring after vaccination, other than having to complete the 3-dose vaccination schedule.

However, those who have received the vaccine are highly advised to continue with routine cancer screenings as recommended by their medical doctors.

6. Will I experience any side effects from getting HPV vaccine?

You may experience mild side effects, including redness, swelling or soreness in the injected area, which is common. Besides that, no other serious side effects have been reported.

7. Are HPV vaccines safe for expecting or pregnant women?

The HPV vaccine is not recommended for pregnant women as more research is needed to confirm if the vaccine is safe for babies whose mothers were vaccinated during pregnancy.

8. Should children get the HPV vaccine?

Yes. As recommended by the World Health Organization, children should get vaccinated against HPV and the best time for them to be vaccinated is between 9 – 14 years old.

This is because the immune response is stronger during this time and the vaccine is most effective if given before a person comes in contact with the targeted HPV viruses.

9. What is the dosage of Gardasil 4?

The recommended HPV vaccine dose is 0.5 mL via an intramuscular injection, given in a 3-dose or 2-dose series depending on the age range.

A 2-dose HPV vaccine series is given to adolescents aged 9–14 years old while the 3-dose HPV vaccine series is given to adults aged 15 years old and above.

10. How is the scheduling of the HPV vaccination like?

- For children aged 9 – 14 years old, a 2-dose series is given with the minimum interval of at least 5 months between the 1st and 2nd doses.
- For those who aged 15 years old and above, a 3-dose series is given with the minimum interval of 4 weeks between 1st and 2nd dose & 12 weeks between the 2nd and 3rd dose or 5 months between the 1st and 3rd dose.
- As stated above, the 3-dose series of the Gardasil-4 HPV vaccine in this campaign is scheduled in November 2019, December 2019 and March 2020.

References

1. Gardasil Package Insert [Internet]. Fda.gov. 2019 [cited 6 November 2019]. Available from: <https://www.fda.gov/files/vaccines,%20blood%20&%20biologics/published/Package-Insert--Gardasil.pdf>
2. Gardasil [Internet]. Ema.europa.eu. 2019 [cited 6 November 2019]. Available from: https://www.ema.europa.eu/en/documents/product-information/gardasil-epar-product-information_en.pdf
3. HPV | For Clinicians | Vaccination Schedules and Recommendations | CDC [Internet]. Cdc.gov. 2019 [cited 6 November 2019]. Available from: <https://www.cdc.gov/hpv/hcp/schedules-recommendations.html>
4. Human Papillomavirus (HPV) Vaccines [Internet]. National Cancer Institute. 2019 [cited 6 November 2019]. Available from: <https://www.cancer.gov/about-cancer/causes-prevention/risk/infectious-agents/hpv-vaccine-fact-sheet>
5. Lockett R, Feldman S. Impact of 2-, 4-and 9-valent HPV vaccines on morbidity and mortality from cervical cancer. *Human vaccines & immunotherapeutics*. 2016 Jun 2;12(6):1332-42.
6. Markowitz LE, Dunne EF, Saraiya M, Chesson HW, Curtis CR, Gee J, Bocchini Jr JA, Unger ER. Human papillomavirus vaccination: recommendations of the Advisory Committee on Immunization Practices (ACIP). *Morbidity and Mortality Weekly Report: Recommendations and Reports*. 2014 Aug 29;63(5):1-30.
7. Meites E, Kempe A, Markowitz LE. Use of a 2-dose schedule for human papillomavirus vaccination—updated recommendations of the Advisory Committee on Immunization Practices. *American Journal of Transplantation*. 2017 Mar;17(3):834-7.
8. Stanley M, Wheeler C. . HPV VLP vaccines—alternative dosage schedules and immunization in immunosuppressed subjects. In *Primary End-points for Prophylactic HPV Vaccine Trials* 2014. International Agency for Research on Cancer.