



**GLOBAL ACTION ON
MEN'S HEALTH**

**Global Action on Men's Health
c/o Men's Health Forum
49-51 East Road
London N1 6AH
United Kingdom**

Reply to: peter.baker@gamh.org

Dr. Alejandro Cravioto
SAGE Chair
c/o SAGE Executive Secretary
Immunization, Vaccines and Biologicals
World Health Organization
Avenue Appia 20
1211 Geneva 27
Switzerland

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Dear Dr Cravioto

HPV vaccination programme

Global Action on Men's Health (GAMH) is a coalition of men's health organisations from around the world. We work to improve the health of men and boys by encouraging international agencies to include and involve men and boys' in their policy, research and strategies. GAMH is a charitable organisation based in the United Kingdom.

We were very concerned to note that, at the SAGE meeting on 8-10 October 2019, it was agreed to recommend a temporary pause in the implementation of HPV vaccination programmes for boys by all countries.

We fully appreciate that there is a significant global vaccine supply problem that, in all likelihood, will not be resolved until 2023. We also accept that the vaccination of girls in countries with high rates of cervical cancer is vital, especially where there are no or poor screening programmes and inadequate treatment and care for women with the disease.

Global Action on Men's Health wishes to raise the following points for your consideration:

1. The SAGE recommendation is not clear. Is it recommending that existing, established vaccination programmes for boys should be suspended or does the recommendation apply only to programmes that are in the pipeline but have not yet been implemented? Clarification of this point would be very helpful.
2. It is well-established that boys' programmes protect the health of males and females by reducing the risk of a range of cancers as well as anogenital warts and recurrent respiratory papillomatosis. Most cases, possibly three-quarters, of oropharyngeal cancer cases are caused by HPV and, globally, men are five times more likely to develop this cancer than women.¹ It is also well-established that the incidence of oropharyngeal cancer is rising rapidly, largely as a result of HPV infection. Reducing boys' access to HPV vaccination will leave many more exposed to the risk of developing oropharyngeal cancer as well as cancers of the anus, penis and elsewhere.
3. Men who have sex with men (MSM) will be at particular risk from any suspension of boys' programmes as they are completely unprotected by girls' programmes and disproportionately at risk of anal cancer. We also note that the SAGE recommendation will impact on those countries with HPV vaccination programmes specifically targeted at adult MSM.
4. If boys' programmes are suspended, this will provide great encouragement to anti-vaccination campaigners who will not hesitate to use the opportunity to spread 'fake news' about the rationale for the decision. It is not difficult to imagine that they will claim that there is 'secret evidence' showing that the vaccine is dangerous and there could well be knock-on effects on HPV vaccination uptake in girls and potentially also on vaccine uptake generally. You will of course be aware that WHO has declared vaccine hesitancy to be one of the top 10 threats to global health so it would be paradoxical to take action that could well exacerbate this problem.
5. The proposed action, if implemented, is highly likely to be confusing as well as an understandable cause of anxiety and anger for boys and their parents. They have been encouraged to take up the offer of vaccination because males are at risk of potentially fatal diseases. They would now be told that, even though they are evidently still at risk of those diseases, they cannot be protected. This could have an adverse impact on confidence in vaccines and the health system generally as well as political consequences for governments.
6. The suspension of boys' vaccination would be hugely disruptive and demoralising for the immunisation workforce.
7. Once boys' programmes have been suspended for several years it will be difficult and costly to reinstate them.
8. Vaccinating boys is central to the effort to eliminate HPV-related diseases. The goal of elimination cannot be achieved without universal vaccination.

9. There have recently been calls for the vaccination of boys in countries with a high burden of cervical cancer.²
10. Suspending programmes on the basis of sex would be discriminatory. In some countries, such action might represent a breach of sex discrimination law and leave governments vulnerable to legal action.

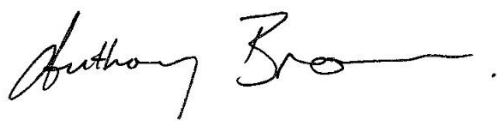
In light of this, Global Action on Men's Health encourages SAGE to consider alternatives to its recommendation. Prioritising supply to government programmes and restricting or suspending supply to private providers would be one acceptable alternative. We also recommend the acceleration of research into the option of a one-dose schedule.

We propose, too, that SAGE re-considers its overall position on single-sex HPV vaccination. Well over 30 countries now vaccinate both sexes and others are planning to. The evidence of the efficacy and cost-effectiveness of universal (or 'gender-neutral') vaccination is now overwhelming. This is clearly the case when vaccination uptake in girls is low but modelling by United Kingdom government's vaccination advisory committee (JCVI) demonstrates that universal vaccination is also cost-effective when over 80% of girls are vaccinated.

We would welcome your comments on the points made in this letter and hope that they can be considered at the next SAGE meeting in March/April. In the meantime, we have advised our member organisations in countries with boys' vaccination programmes to do everything they can to ensure that those programmes continue normally.

Please reply to GAMH's Director, Peter Baker, at peter.baker@gamh.org.

Kind regards



Dr Anthony Brown
Chair, Global Action on Men's Health.

¹ Shield, K.D., Ferlay, J., Jemal, A., Sankaranarayanan, R., Chaturvedi, A.K., Bray, F. and Soerjomataram, I. (2017), The global incidence of lip, oral cavity, and pharyngeal cancers by subsite in 2012. *CA: A Cancer Journal for Clinicians*, 67: 51-64. doi:10.3322/caac.21384

² Chido-Amajuoyi OG, Domgue JF, Obi-Jeff C, Schmeler K, Shete S. A call for the introduction of gender-neutral HPV vaccination to national immunisation programmes in Africa. *The Lancet Global Health*. 2019 Jan 1;7(1):e20-1.