

5 - HPV prophylactic vaccines

UNDERSTANDING CONFIDENCE IN HUMAN PAPILLOMAVIRUS VACCINE IN JAPAN: A WEB-BASED QUESTIONNAIRE SURVEY OF MOTHERS, FEMALE ADOLESCENTS, AND HEALTH CARE PROFESSIONALS

Shuto M¹, Kim Y², Fujimoto G³, Ouchi K⁴, Ueichi H⁵, Nnadi C⁶, Perez G⁷, Larson H⁸, Sasaki S⁹

¹Medical Affairs, MSD K.K., Tokyo, Japan

²Medical Affairs, MSD K.K., Tokyo, Japan

³Medical Affairs, MSD K.K., Tokyo, Japan

⁴Department of Pediatrics, Kawasaki Medical University, Kurashiki, Japan

⁵Faculty of Engineering, Information and Systems, University of Tsukuba, Tsukuba, Japan

⁶Global Vaccine Medical Affairs, Merck & Co., Inc., Pennsylvania, United States

⁷Global Vaccine Medical Affairs, Merck & Co., Inc., Pennsylvania, United States

⁸Anthropology, Risk and Decision Science, Department of Infectious Disease Epidemiology, LSHTM, London, United Kingdom

⁹Medical Affairs, MSD K.K., Tokyo, Japan

Background/Objectives: Vaccine hesitancy refers to the delayed acceptance or refusal of vaccines despite availability of vaccination services, which is an outcome from loss of vaccine confidence. Confidence is defined as trust in effectiveness and safety of vaccines and the health system in which those are approved and delivered. Successful national immunization program (NIP) is, therefore, supported by solid vaccine confidence. In Japan, HPV vaccines have been commercially available since the end of 2009 and were introduced into the NIP in Apr 2013 to address increased cervical cancer among young women. However, active recommendation for the vaccine was stopped shortly after that. Although age-eligible girls can receive the vaccine at no cost if they voluntarily visit doctors seeking vaccination, the vaccine coverage rate has sharply declined from approximately 70% to less than 1%. It means that young women still have been exposed to the risk of HPV-related cancers that could be prevented. To build an appropriate strategy for improving vaccine confidence and acceptance in Japan, we conducted a survey to assess levels of HPV vaccine confidence and identify the contextual reasons behind vaccine hesitancy in Japan.

Methods: This is a nation-wide cross-sectional web-based survey of 1,600 mothers of HPV-vaccination eligible young girls, 800 female adolescents aged 15 to 19 years, and 860 health care providers (HCPs), including internists, pediatricians and obstetrician/gynecologists.

Results: The survey was conducted in September 2019 and captured data on key elements of vaccine confidence including perception on importance, effectiveness and safety of HPV vaccines, trust of government and reliable sources of information about health issues. Additionally, the target cohorts were assessed as to their motivation and willingness to receive or recommend HPV vaccination together with determinant factors of their intentions and behaviors. For exploratory statistical comparisons across groups, Pearson's Chi-square or Fisher's exact test will be used to test for statistical differences in categorical variables.

Conclusions: Findings from this study may help shaping public policy and communication strategies to improve future vaccine confidence. Additionally, this study may provide clues for the development of effective public health education, communication and advocacy campaigns towards increasing confidence and acceptance of HPV vaccines.

