

Westminster Hall Debate: Case for HPV vaccination for boys

**House of Commons
Wednesday 2 May 2018**

Issue: The Human Papillomavirus Virus (HPV) vaccination programme originally aimed to prevent cervical cancer among women. It has been routinely offered to girls for free since 2008 in the UK, but not to boys.

In July 2017, the Joint Committee on Vaccination and Immunisation¹ (JCVI) acknowledged that the **HPV was associated with a number of cancers such as oropharyngeal cancers, which affect both sexes and that HPV vaccination would provide direct protection against many of these cancers².**

Despite this, the JCVI recommended against extending the HPV vaccination programme to boys because of its cost and because mathematic models show that heterosexual men should indirectly benefit from continuing to restrict the HPV vaccination programme to girls if the uptake continues to be high in the UK - what is commonly referred to as 'Herd Protection'. The JCVI 'recognises arguments made by stakeholders on the issue of equality of access and that there are additional clinical benefits that could be achieved in males with a gender neutral programme'. It has therefore referred the matter to the Department of Health and Social Care (DHSC) for consideration.

¹ Health is a devolved matter; as such the JCVI provided advice to the UK Government on extending the HPV vaccination programme in England only.

² Department of Health and Social Care, 2017. JCVI statement: extending the HPV vaccination programme. Available at <https://www.gov.uk/government/publications/jcvi-statement-extending-the-hpv-vaccination-programme>

Evidence, currently being compiled by doctors,³ shows that the prevalence of oropharyngeal cancers among men has soared and that their rates are now extremely close to overtaking those of cervical cancer.

In February 2018, the UK government⁴ confirmed that the HPV vaccination programme for men who have sex with men (MSM) aged 45 or younger would be rolled-out in sexual health clinics and HIV clinics across England⁵. The UK Government has still, however, not taken a decision on extending the vaccine to all boys nor published any equality and human rights considerations on this matter.

The failure to extend the HPV vaccination programme to all boys could amount to discrimination on the grounds of sex and sexual orientation, as well as raising potential human rights issues (Articles 2 and 8 of the Human Rights Act 1998 and Article 12 of the International Covenant on Economic, Social and Cultural Rights, which protects the right of everyone to enjoy the highest attainable standard of physical and mental health).

Evidence:

- In late March 2018, the Guardian published an article⁶ stating that evidence currently being compiled by doctors showed that the **prevalence of oropharyngeal cancers among men has soared** and that their rates are now **extremely close to overtaking those of cervical cancer**. Health experts think that an increase in oral sex is in part responsible for the spread of HPV and for the dramatic jump in neck and head cancers, which tend to have **poor long-term survival rates (article 2 – right to life)**.
- We know that people get HPV through having intimate contact with people with HPV and that many girls in the world are not vaccinated against HPV. The **mathematical models** used by the JCVI to justify the projected ‘herd protection’ effect are based on the assumptions that:

³ As reported in a recent Guardian article entitled ‘Call to extend HPV vaccine to boys as cancer rates soar’. Available at <https://www.theguardian.com/society/2018/mar/31/hpv-vaccine-boys-cancer-rates>

⁴ Department of Health and Social Care, 2018. HPV vaccination programme for men who have sex with men. Available at <https://www.gov.uk/government/news/hpv-vaccination-programme-for-men-who-have-sex-with-men>

⁵ This aligned with what had already been announced in Wales (April 2017) and in Scotland (July 2017).

⁶ See ‘Call to extend HPV vaccine to boys as cancer rates soar’. Available at <https://www.theguardian.com/society/2018/mar/31/hpv-vaccine-boys-cancer-rates>

- the HPV vaccine uptake among girls in the UK will remain high; and
- **heterosexual English men will have intimate contact solely with women who have had the HPV vaccine which is likely to be unrealistic in the modern global world.**
- The evidence shows that the HPV vaccine is most effective among people who have not yet started their sexual life. Although there is no lower age limit for MSM across Britain to attend sex and HIV clinics to get access to the HPV vaccine, **it seems unreasonable for the UK Government to expect boys who are not sexually active to:**
 - **know and/or to have to disclose their sexuality; and**
 - **have to attend a sexual health clinics and HIV clinics to access this vaccine (article 8 – right to private life).**
- In addition, there is evidence that shows more ‘sexual fluidity’ among ‘modern’ men⁷.
- According to the HPV Action website⁸, **15 countries including the USA, Australia, Canada, Italy and Norway** are now vaccinating boys against HPV or plan to do so.
- As the JCVI acknowledges, ‘there are strongly held views that the HPV vaccination programme should be extended to adolescent males, with many comments focussing on issues around **equality of access**, and the individual level protection such a programme would afford vaccinated boys⁹’.
- The vaccine is available privately and costs between £300 and £450 depending on the age of patients. This is a **considerable cost for many people**. HPV Action estimates that it would cost no more than £22 million per year to provide boys with the HPV vaccine for free in the UK.¹⁰

⁷ A survey of British adults published by YouGov in 2015 found that while 85% of men described themselves as heterosexual, a significantly lower proportion (68%) defined themselves as ‘completely heterosexual’ and 20% disclosed a sexual experience with another man. See .YouGov, 2015. 1 in 2 young people say they are not 100% heterosexual. Available at <https://yougov.co.uk/news/2015/08/16/half-young-not-heterosexual/>

⁸ HPV Action, 2017. 1 in 2 young people say they are not 100% heterosexual. Available at <http://www.hpvaction.org/news/hpv-action-response-to-jcvi-postponed-decision-regarding-boys-receiving-the-human-papillomavirus-hpv-vaccination>

⁹ Department of Health and Social Care, 2017. JCVI statement: extending the HPV vaccination programme. Available at <https://www.gov.uk/government/publications/jcvi-statement-extending-the-hpv-vaccination-programme>

¹⁰ HPV Action, 2015. ‘Not far enough’: HPV Action’s reaction to the JCVI’s announcement today that the anti-cancer jab to prevent HPV will be extended to just MSM and not all boys. Available at <http://www.hpvaction.org/news/previous/2>

- We understand that the JCVI appropriately considers the cost-effectiveness of proposed vaccination and immunisation programmes in the advice it gives to the UK Government to ensure that such programmes use the finite resources of the health service to maximise the health of the population. In this instance, however, the Commission is **not clear on what costs have been included in the analysis used by the JCVI to conclude that extending the HPV vaccination programme to boys was not cost effective**. For instance, did it include the estimated costs of treating genital warts as well as HPV related cancers among heterosexual men? Did it include the costs associated with the loss to the economy?
- Finally, there may be a **moral case** for providing the HPV vaccine to all boys **based on the right of everyone to enjoy the highest attainable standard of physical and mental health**¹¹. Professor Margaret Stanley OBE (Director of Research in the Department of Pathology at Cambridge University) stated in 2012 that vaccination against meningococcal infection in children was not cost-effective but society accepted it because the prevention of such a serious disease was considered a worthwhile public health goal¹².

Recommendations:

The Commission recommends that the UK Government:

- carries out and publishes a robust assessment of the equality implications of not extending the HPV vaccination programme to all boys, in line with the requirement of the Public Sector Equality Duty in the Equality Act 2010; and
- ensure that its decision is compatible with Articles 2 and 8 of the Human Rights Act 1998 and Article 12 of the International Covenant on Economic, Social and Cultural Rights.

¹¹ Article 12 of the United Nations International Covenant on Economic Social and Cultural Rights (ICESCR) requires States parties recognize “the right of everyone to the enjoyment of the highest attainable standard of physical and mental health”. ICESCR is one of the six main binding UN human rights conventions, all of which the UK Government has signed and ratified.

¹² Professor Margaret Stanley, 2012. Perspective: Vaccinate boys too. *In Nature - International Journal of science*, volume 448. Available at <https://www.nature.com/articles/488S10a>

Further information

The Equality and Human Rights Commission is a statutory body established under the Equality Act 2006. Find out more about the Commission's work at: www.equalityhumanrights.com

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