

Rapid Fire Talk:

What we learned from complementary medicine physicians
for a review article on HPV vaccine



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Background

- 25-50% of respondents in Switzerland state that they use complementary and alternative medicine (CAM)
 - However, few studies on vaccine hesitancy have focused on providers of CAM and their patients
 - Our National Research Program (NRP74) on Vaccine Hesitancy, 2017-2021:
 - **Key Hypotheses:**
 - If we want to understand vaccine hesitancy we need to gain access and talk to vaccine-hesitant persons
 - These will cluster around CAM physicians
- We have included 3 Swiss CAM physicians in our study
- They participate in our research meetings
 - They help us recruit additional CAM physicians in Switzerland

Our mixed methods research program:

- 1) qualitative
- 2) quantitative research re: childhood vaccines and HPV vaccine

→ will serve as appropriate background for planning and implementing

3) interventions designed at improving vaccine communication and counseling among physicians, parents, and adolescents in Switzerland.

Key hypotheses:

- 1) In order to improve vaccine communication/counseling we can learn from CAM physicians (because patients who consult them are likely to be happy with their care and their communication style)
- 2) CAM physicians may prefer different information sources and a communication style different from what public health authorities have to offer

Our 2 recent HPV review articles for GPs in Switzerland

Ars Medici, issue 15.6.2018, Léna Dietrich et al

Swiss Medical Forum, in the press, Léna Dietrich et al

→ We included 2 CAM physician practicing anthroposophical medicine as co-authors

Die HPV-Impfung ist wirksam und sicher



Schweizerische Eidgenossenschaft
Confédération suisse
Confederazione Svizzera
Confederaziun svizra

Département fédéral de l'intérieur DFI
Office fédéral de la santé publique OFSP

Anne Spaar¹, Ulrich Heininger², Susanne Stronski
Huwiler^{3, 4}, Virginie Masserey Spicher¹

«HPV vaccine is safe and effective»

- vaccine-hesitant CAM physicians are unlikely to read such articles any more, because this is how vaccine articles have sounded for many years
- they are fed up with such enthusiastic, pro-vaccine «government propaganda»

Recommendations :

- 1) Change title of article: «HPV vaccine: how to counsel patients in a well balanced and individual fashion»
- 2) Consider the following nuance: HPV vaccine „is considered“ to be safe and efficacious
- 3) a plus of our article is that it is not written by government authors

Many physicians are not convinced that HPV vaccine is necessary

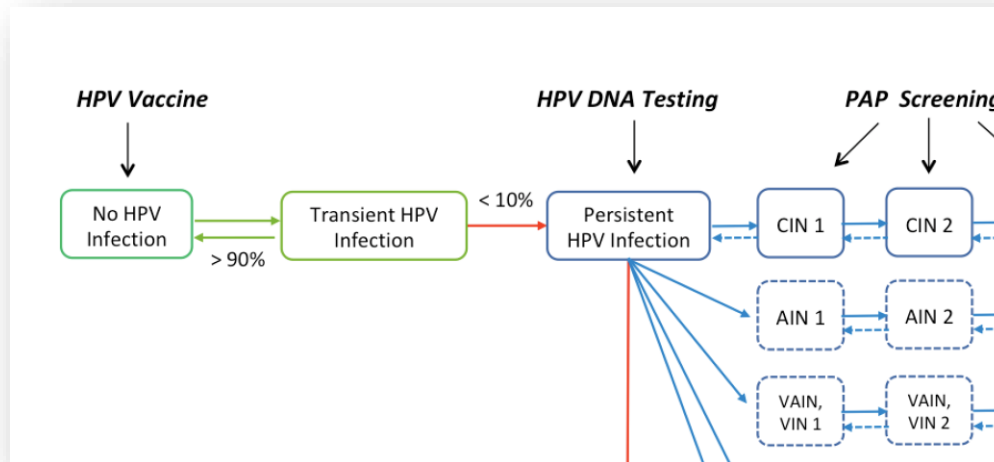
(HPV vaccine coverage is approx. 50% in Switzerland)

Recommendations by CAM physicians:

- 1) It doesn't help to begin article with enthusiastic vaccine efficacy statements
- 2) Don't instill fear to justify HPV vaccination – don't begin article with statements emphasizing the grave consequences of HPV infection (cancer)

Rather, emphasize that

- 1) HPV infection is transient in majority of cases
- 2) cervical dysplasia CIN2/3 spontaneously regresses in >50% of cases
- 3) Emphasize that HPV vaccine is different from other vaccines (emphasize protection against dysplasia/cancer rather than against infectious disease)



„Genital warts have essentially disappeared in countries like Australia where high HPV vaccine coverage was achieved early on“

„Because HPV vaccine prevents dysplasia, don't wait with recommending the vaccine to your patients till 2020, when data on prevention of cancer will be available“

Recommendations by CAM physicians:

- 1) Sorry, this sounds awfully like propaganda – your article contains enough good arguments in favor of HPV vaccine, such statements are not needed

„WHO safety update July 2017: no signal of any association of HPV vaccine with auto-immune diseases after >270 mio administered doses“

1) This may have counterproductive effect – sounds like you're minimizing and belittling case reports suggesting such associations. Such case reports should not be overblown, but it is equally wrong to dismiss them as useless evidence

2) Would not dismiss such case reports as internet „hysteria“ - your article will be more credible if you give them „some space“, i.e. mention these cases as very rare but not impossible and mechanistically plausible (vaccines may, like common infections, trigger pre-existing auto-immunity)

3) It does not hurt mentioning that large phase IV safety studies are financed by pharma

Communication recommendations by CAM physicians re: HPV vaccine safety

1) Consider stating: „The question of safety is key to all prevention measures --- in particular because HPV vaccine will be given to all young and healthy persons, and because only few will actually benefit from vaccination (given the overall rarity of HPV-associated cancers)“

2) Rather than saying: „Large studies show no evidence that the vaccine causes any serious long term harm“ → better would be:

„Case reports suggest possible associations of HPV vaccine with multiple sclerosis, ... , ... , However, large epidemiological studies were unable to confirm these associations“.

Additional recommendations by CAM physicians:

1) Emphasize the need for „safer sex“ measures. Many CAM physicians think HPV vaccine should not be given at 11-14 years because those kids are too young for safer sex counseling

-- at 14-16 years they are ready for safer sex counseling

2) Doctor's reluctance to do safer sex counseling*** is the main reason for poor vaccine counseling and contributes to vaccine hesitancy

*** because it is considered too intimate, too embarrassing, no time for lengthy counseling, inadequately reimbursed etc.

3) Important to include a best assessment of durability of vaccine protection

– hesitancy towards HPV vaccine also has to do with the fact that you vaccinate now, but cancers appear 30+ years later

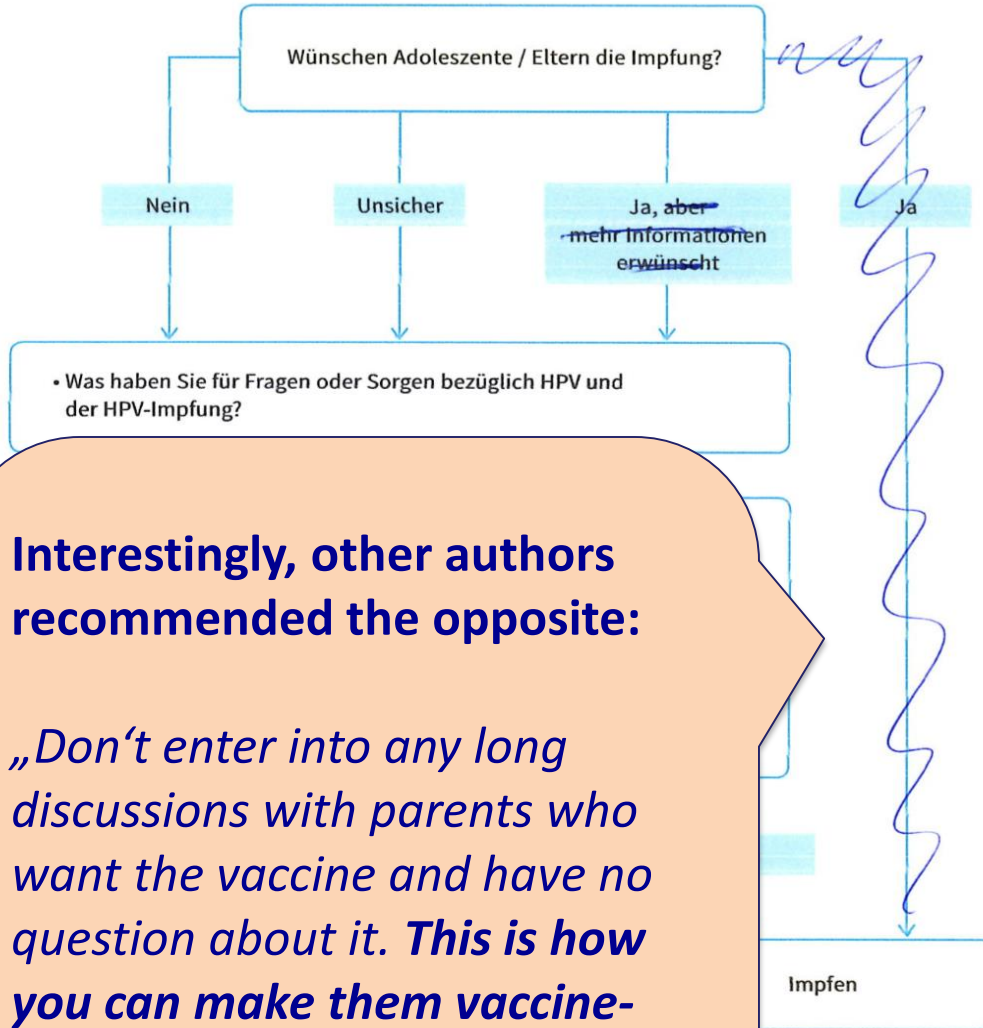
Additional recommendations by CAM physicians:

3) **Emphasize that doctors and patient are free in their decision to vaccinate or not**

„It is important to emphasize that vaccination remains voluntary in Switzerland.“

„Good health and a relation of trust with their physician is possible for parents and adolescents with or without vaccination against HPV “

CAM physicians: Need to discuss the vaccine even if the patient wants it and has no questions about it



Interestingly, other authors recommended the opposite:

*„Don't enter into any long discussions with parents who want the vaccine and have no question about it. **This is how you can make them vaccine-hesitant !**“*

... Same as before any operative procedure

→ Because vaccination represents a breach of bodily integrity

Thank you !

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Smarter Health Care
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