

Protecting Your Patients' Future From HPV-Related Cancers With the HPV Vaccine

The HPV vaccine protects against human papillomavirus (HPV) and prevents up to 90% of six HPV-related cancers, including cervical, throat, and penile cancers. Below are recommendations, helpful talking points, and messages for those who may be hesitant to vaccinate.

Quick Facts You Can Share With Your Patients and Their Families

- Over 40 million people in the U.S. have an HPV infection.
- Before the HPV vaccine was available, 80% to 90% of people got an HPV infection at some point in their lives.¹ Nearly half of these infections occurred in teens and young adults ages 15 to 24.²
- While most HPV infections clear on their own, some will lead to cancer.



The HPV Vaccine Can Prevent:

91%

of cervical cancers

70%

of oropharyngeal cancers
(back of the throat, including
base of the tongue and tonsils)

91%

of anal cancers

69%

of vulvar cancers

75%

of vaginal cancers

63%

of penile cancers



HPV Vaccination Schedule

The NYC Health Department recommends:

- For people ages 9 to 14, two doses of the HPV vaccine at least five months apart
- For people starting the series at age 15 or older, and for immunocompromised people of any age, three doses:
 - Second dose one to two months after initial dose, third dose six months after initial dose

The NYC Health Department recommends HPV vaccination starting at age 9. The vaccine is most effective against HPV-related disease outcomes when given prior to exposure.³

Suggested Talking Points for Introducing the HPV Vaccine to Patients and Families⁴

Announce

- Note the child's age.
- When discussing vaccines due at their age, if multiple vaccines are due, include the HPV vaccine in the middle of the list.
- Say you can vaccinate their child today.

"I see that Julie is 9 years old. She is due for the HPV vaccine. It prevents six different types of cancers. We'll give it at the end of today's visit."

"I see that Johnny is 11 years old. He is due for three vaccines that will protect against tetanus, whooping cough, human papillomavirus, and meningitis. We'll give them at the end of today's visit."

If a parent or caregiver is hesitant:

Connect

- Ask about their main concern.
- Show you are listening by reflecting their specific concerns.

■ "I hear that you are concerned about your child's fertility."

Counsel

- Address concerns using the suggested messages below.
- Recommend getting the HPV vaccine today.
- If the parent or caregiver still hesitates, schedule a follow-up appointment.
- If the parent or caregiver still declines, say you'll bring up HPV vaccination at the next visit and make a note in the child's chart.

Messages for Counseling Those Who Are Hesitant to Vaccinate

Dosage	Kids produce a stronger immune response to the HPV vaccine at younger ages, which is why only two doses are needed if starting the series before age 15. Starting and completing the series at age 9 reduces the number of shots given at later visits and ensures protection before exposure.
Sex	This really isn't about sex. The HPV vaccine is about preventing cancer.
Safety	The safety of the HPV vaccine has been thoroughly researched and monitored, and millions of doses have been safely administered in the U.S. and worldwide since the vaccine came out in 2006.
Effectiveness	Each year, HPV causes over 37,000 cancers in the U.S., ⁵ most of which are preventable with the HPV vaccine. The vaccine can prevent up to 90% of six HPV-related cancers and is most effective when given before exposure.
Age	The American Academy of Pediatrics, the American Cancer Society, and other health organizations agree that kids should get the HPV vaccine starting at age 9.
Boys	HPV can cause infections and cancers in boys too — including throat and penile cancer.
Requirements	The HPV vaccine is not currently required for school in NYC, but it is an important vaccine that can prevent many cancers.
Fertility	The HPV vaccine does not affect fertility. ^{6,7} However, not getting the HPV vaccine leaves people at risk for HPV-related cancers and precancers that can impact fertility. Treatments for these conditions, like surgery, chemotherapy, or radiation, can sometimes limit the ability to have children, and cervical precancer treatments could cause preterm delivery.

As of June 30, 2025, only 46% of 13-year-olds in NYC had completed their HPV vaccine series by their 13th birthday. For the most up-to-date citywide HPV vaccination coverage, visit the Childhood Vaccination Data Explorer at nyc.gov/childhoodvaccinationdata.



A strong professional recommendation has been shown to increase rates of HPV vaccination. For more resources for health care providers, visit nyc.gov/hpvresources.

- 1 Chesson HW, Dunne EF, Hariri S, Markowitz LE. The estimated lifetime probability of acquiring human papillomavirus in the United States. *Sex Transm Dis*. 2014;41(11):660-664.
- 2 Lewis RM, Laprise JF, Gargano JW, et al. Estimated prevalence and incidence of disease-associated human papillomavirus types among 15- to 59-year-olds in the United States. *Sex Transm Dis*. 2021;48(4):273-277.
- 3 Ellingson MK, Sheikha H, Nyhan K, Oliveira CR, Niccolai LM. Human papillomavirus vaccine effectiveness by age at vaccination: a systematic review. *Hum Vaccin Immunother*. 2023;19(2):2239085.
- 4 Adapted from the Announcement Approach training. UNC Gillings School of Global Public Health. <https://www.hpvig.org/train/the-announcement-approach-training>
- 5 Saraiya M, Unger ER, Thompson TD, et al. US assessment of HPV types in cancers: implications for current and 9-valent HPV vaccines. *J Natl Cancer Inst*. 2015;107(6):djv086.
- 6 Hviid A, Myrup Thiesen E. Association between human papillomavirus vaccination and primary ovarian insufficiency in a nationwide cohort. *JAMA Netw Open*. 2021;4(8):e2120391.
- 7 Schmulh NB, Mooney KE, Zhang X, Cooney LG, Conway JH, LoConte NK. No association between HPV vaccination and infertility in U.S. females 18-33 years old. *Vaccine*. 2020;38(24):4038-4043.