

HPV Administration Information



- Ideally the HPV vaccine should be administered prior to sexual initiation, because once a female has been infected, the vaccine is ineffective at protecting her against that HPV type.
- Females who are sexually active still may benefit from vaccination if they have not been exposed to all the HPV subtypes covered by the vaccine. However, this potential benefit may be very limited because the HPV type that women often acquire soon after the onset of sexual activity is HPV type 16. It is the HPV 16 component of the vaccine that provides the majority of protection against HPV-associated pre-cancers, and this component is ineffective in women who have already acquired HPV type 16 infections. Therefore, it is important to emphasize that the vaccine is highly effective in preventing HPV-associated pre-cancers in women who have not initiated sexual activity and who have not acquired HPV type 16 infections, and the vaccine is significantly less beneficial in women who have initiated sexual activity and who have already acquired HPV type 16 infections.
- Per ACIP guidelines, it is recommended that all girls in New Mexico ages 11-12 receive HPV vaccine. A decision to vaccinate 13-to-18 year old girls should be based upon careful evaluation of sexual HPV exposure risks, the possibility of pre-existing HPV infection and the potential of pregnancy. While the vaccine is not required for school entry, pediatricians and family practice physicians should discuss the value of getting the HPV vaccine with patients and parents and encourage routine vaccination for 11-12 year old girls.
- The HPV series could conveniently and safely be initiated in tandem with the two other vaccines recommended for the 11-12 year old age group – the Meningococcal Conjugate (MCV4) and the Tetanus, Diphtheria & Pertussis (Tdap) booster.