Open consultation

**JCVI call for evidence: list of questions**

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The Joint Committee on Vaccination and Immunisation (JCVI) is calling for evidence to support a review of possible modifications to the human papillomavirus (HPV) immunisation programme.

The programme currently provides the offer of immunisation:

- routinely to girls and boys aged 12 to 13 years, and
- to men who have sex with men (MSM) aged up to 45 years old attending specialist sexual health services

To inform this review, the JCVI, which provides independent expert advice on immunisation to the government, welcomes relevant evidence from interested parties.

If you wish to respond, please submit the necessary evidence relevant to any of the questions outlined below.

You can respond to the call for evidence online (https://consultations.dhsc.gov.uk/JCVI-HPV-Call-for-evidence).

**Questions**

JCVI is interested in relevant evidence to support consideration of the potential to move to a single-dose schedule of HPV vaccine for the routine programme and other alternative dose HPV schedules.

The JCVI aims to consider scientific evidence on the following to inform its considerations:

**Question 1**

What evidence is there from randomised control trials, observational and post licensure studies on vaccine efficacy/effectiveness (VE) against infection and disease for one dose of HPV vaccine, compared with two (0 and 6-12 months) or three doses, (in girls and or boys or young adults) for:

- Cervarix
- Gardasil
- Gardasil 9

**Question 2**

What evidence is there on the immunogenicity of one dose of HPV vaccine, on the magnitude, duration and stability of antibody against HPV vaccine types, compared with two or three doses (in girls and or boys or young adults) for:

- Cervarix
- Gardasil
- Gardasil 9

**Question 3**

What evidence is there of the effect of one dose of HPV vaccine on antibody quality (affinity and avidity) against HPV vaccine types and genotype lineage variants, compared with that of two or three doses of HPV vaccine, (in girls and or boys or young adults) and the potential impact on vaccine effectiveness for:

- Cervarix
- Gardasil
- Gardasil 9
Question 4

What evidence or hypotheses are there on the underlying mechanism(s) and contributory factors as to why HPV vaccines are so highly immunogenic?

Question 5

What impact would reductions from a two-dose to a one-dose schedule have on the benefits of immunisation, in particular:

- the duration of protection
- the cross-protection against non-vaccine types
- the uptake

Question 6

What evidence is there in support of moving from a three-dose schedule to a two-dose schedule for children and adults over the age of 15 years, including men who have sex with men?

Question 7

What other evidence or issues should be considered regarding the potential to move to one-dose schedules for the routine HPV programme?

Question 8

What evidence is there that the time between prime and boost can be extended beyond two years for a two-dose schedule without compromising individual protection against HPV vaccine type infection and disease?

Question 9

How long does memory persist after one dose for a potential boosting effect with a second dose?

Question 10

What evidence is there on the interchangeability of HPV vaccines and their use in mixed schedules of two doses regarding seroconversion rates, VE and antibody kinetics, for vaccine types directly and not directly boosted.

Details of the call

To inform its considerations, the JCVI welcomes submissions from interested parties of good quality scientific, medical, social research or economic evidence relevant to the issues under consideration. Submissions should reference peer-reviewed published material wherever possible.

Exceptions (where there are reasons to withhold particular papers from publication) will be decided in line with exemptions available under the Freedom of Information (FOI) Act. Submissions should indicate where any data should be withheld from publication and the reasons for this in line with exemptions applicable under the FOI Act (see paragraphs 65 to 80 of the JCVI Code of Practice (https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/224864/JCVI_Code_of_Practice_revision_2013_-_final.pdf)).
All submissions will be acknowledged and will be provided to the JCVI to help formulate its advice. The latter will be published in minutes of the JCVI. More information about how JCVI develops and formulates its advice can be found in the JCVI Code of Practice (https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/224864/JCVI_Code_of_Practice_revision_2013_-_final.pdf) available on the JCVI webpage (https://www.gov.uk/government/groups/joint-committee-on-vaccination-and-immunisation).