

FOGSI GCPR: HPV Vaccination

	FOGSI RECOMMENDATION	STRENGTH OF RECOMMENDATION
Types of vaccines	Bivalent (Cervarix, GSK) Quadrivalent (Gardasil, Merck)	NA
License to use in India	9 - 45 years	NA
Preferred target age group	9 - 14 years	Grade A
Number of doses for girls aged < 15 years, not immunocompromised or HIV infected	2 doses	Grade A
Number of doses for girls aged ≥ 15 years or immunocompromised and/or HIV infected girls	3 doses	Grade A

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Interval	Two doses: 0 & 6 months (second dose may be given at 5-15 months) Three doses: 0, 1, 6 months (Bivalent) 0, 2, 6 months (Quadrivalent)	Grade A
Catch-up vaccination (15-26 years)	<ul style="list-style-type: none"> 3 doses Girls/ women who have been sexually active should be counselled regarding reduced efficacy and importance of screening from the age of 25-30 years (Not to be considered in public programs unless resources are available after vaccinating and screening the respective target age groups)	Grade B
Older age groups (> 26 years)	<ul style="list-style-type: none"> 3 doses Women aged > 26 years who have been sexually active should be counselled regarding reduced efficacy in older age group and the importance of screening In limited-resource settings, women in this age group should first invest in screening 	Grade B

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HIV positive or immunocompromised girls	<ul style="list-style-type: none"> • Same age recommendation • Three doses 	Grade A
Interrupted doses	<ul style="list-style-type: none"> • Continue with the remaining doses as per age-based recommendation, vaccination series need not be restarted 	Grade B
Pregnancy and Lactation	<ul style="list-style-type: none"> • Not recommended in pregnancy (if inadvertently given, no need for MTP) • Can be given during lactation 	Grade B
Victims of sexual abuse	<ul style="list-style-type: none"> • Same age recommendation • Three doses • Initiate preferably at the time of examination at health care facility 	Grade B
Women with history of abnormal screening reports	<ul style="list-style-type: none"> • Same age recommendation • Women should be counselled regarding reduced efficacy in older age group and the importance of regular follow-up 	Grade B

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