Missed Opportunities for HPV Vaccination Discussion Among Medical Trainees

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Introduction

- Human papillomavirus (HPV) is the most common sexually transmitted infection in the United States, with over 79 million Americans infected today.1
- The majority of the people infected with the virus are in their late teens or early 20s.1
- Although HPV often goes away on its own, it has the potential to cause serious health problems such as genital warts and cancers.1,2
- Vaccination can decrease infections of certain high-risk HPV strains.3
- Vaccination was discussed 96% of the time
- Vaccine discussion was prompted by the patient 64% of the time, while the student prompted the discussion only 32% of the time
- From the encounters that had a vaccine discussion, 14.8% of students discussed the HPV vaccine.

Table 1. Frequency of HPV vaccination recommendation as a factor of SP SAAB

<table>
<thead>
<tr>
<th>Patient’s Sex Assigned at Birth (SAAB)</th>
<th>HPV vaccine recommended</th>
<th>HPV vaccine not recommended</th>
<th>HPV vaccine not discussed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female SAAB</td>
<td>4</td>
<td>2</td>
<td>14</td>
</tr>
<tr>
<td>Male SAAB</td>
<td>0</td>
<td>0</td>
<td>8</td>
</tr>
</tbody>
</table>

- Of the 24 students who did not recommend the HPV vaccine, 71% said that there was not enough vaccination records, 21% had no vaccination discussion or did not provide any recommendations, and 8% said that the SP was out of the recommendation range.

Purpose

The purpose of this study was to investigate:
- The frequency of general and HPV vaccination discussion in a primary care setting
- The rationale for recommending or not recommending the HPV vaccine
- Who prompted the vaccination discussion

Methods

- Standardized patient (SP) encounters (n=28) were randomly sampled from 134 video recordings of rising third-year medical student trainees from 2017.
- Students were prompted to take a patient history for a 32-year-old establishing care in a primary care setting who had not seen a physician in over a decade.
- If the student did not cover vaccinations, the SP prompted a general vaccine discussion at the end of the encounter by asking “what shots do I need?”
- Encounter content of general and HPV vaccination discussions were coded for recommendation(s), rationale, and who prompted the discussion.
- The UofL IRB approved this study

Results

- GAPS IN HPV AND GENERAL VACCINATION DISCUSSION
- MISSED OPPORTUNITIES TO DISCUSS HPV VACCINE WITH MALE SAAB PATIENTS
- ROUTINE VACCINE DISCUSSION SHOULD INCLUDE HPV VACCINE

Discussion

- These data illustrated gaps in HPV and general vaccination discussion among medical trainees.
- HPV vaccination discussion was limited to patients with a cervical, which is a prominent missed opportunity to discuss HPV vaccination with patients who were assigned male at birth since males also can contract and spread the virus.
- Additionally, the SPs in these encounters had not received vaccinations for over a decade so there was also a missed opportunity in catching patients that had not received care since before the vaccine’s debut.
- These trends may be reflected in primary care settings, and we thus recommend that routine vaccination history/discussion include the HPV vaccine for new patients establishing care.

Future Study

Future studies will examine additional encounters to compare HPV vaccination discussion and recommendations through:
- Connections between LGBT+ patient identity
- Comparing trends among student gender identity and patient identity

Acknowledgements

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Bibliography