

Selling Vaccines: Deciding on Who Can Afford HPV

Himanshu Aneja and Jacob Puliye
*Department of Pediatrics,
 St Stephens Hospital, Delhi, India.
 puliyel@gmail.com*

Dr Panna Choudhury has dedicated his President's Page to advocacy for preventing cervical cancer(1). He makes a passing reference to the prohibitive costs of the vaccine but he reiterates the Indian Academy of Pediatrics (IAP) recommendation to offer HPV vaccine to 'all appropriate females who can afford the vaccine'. The vaccine costs Rs 18750 per person (Conversion rate \$1 = Rs 50)(2). According to the article, although there are no recommendations about the need for booster doses and efficacy for 5 years is all that is known.

The answer to the question of how to decide who can afford the vaccine is not explicit. For example, can we assume that parents, who have only one girl child and earn Rs 20,000 per month, will afford the vaccine? Intuitively one feels that the question of affordability will relate to costs and benefits, besides earnings every month. Persons may afford heavy costs if the benefits are commensurate.

We have done a quick calculation of the cost of preventing cancer by this vaccine. In a recent study from India published in the NEJM, 31,488 women (30 to 59 years old), were followed up over 8 years with no intervention (in the control group)(3). 64 died of cervical cancer. The absolute risk of cervical cancer was 2.5/10,000/year. If we optimistically assume that every case of cervical cancer will be prevented by the vaccine, the absolute risk reduction is 0.00025 and the numbers needed to vaccinate to prevent one death is 4000. The cost per life saved is Rs 75 million. We wonder how many members of the IAP work in areas where the people can afford this vaccine.

The article suggests that the vaccine should be introduced to parents as a cervical cancer preventing vaccine and not as a vaccine against sexually transmitted infections. In this and numerous other subtle ways, we as doctors and trusted advisors can sell the vaccine. The question we need to ask is – should we? Individual doctors will need to wrestle with this, as the IAP has left the choice of whom to advise, to individual judgment.

REFERENCES

1. Choudhury P. Preventing cervical cancer: Pediatrician's role. *Indian Pediatr* 2009; 46: 201-203.
2. Centers for Disease Control and Prevention. HPV vaccine information for young women. Available from: <http://www.cdc.gov/std/hpv/STDFact-HPV-vaccine-young-women.htm#hpvvac4>. Accessed on April 4, 2009.
3. Sankaranarayanan R, Nene BM, Shastri SS, Jayant K, Muwonge R, Budukh AM, *et al*. HPV screening for cervical cancer in rural India. *N Engl J Med* 2009; 360: 1385-1394.

REPLY

I wish to thank Aneja and Puliye for their interest in the article advocating prevention of cervical cancer(1). Pediatricians generally are not sensitized to this dreaded disease as cervical cancer and screening program for detecting the disease are in adulthood. HPV vaccine, which has proved to be highly effective in preventing cervical cancer has recently been licensed in India. Since the vaccine is considered most effective in preventing the disease if given in adolescent period, role of pediatrician has become relevant. As mortality due to various communicable diseases is high in our country, prevention of cancer cases may not be perceived as a priority. Cost effectiveness of vaccine, which can prevent cancer effectively is a relative issue, especially at individual level. Cost of a vaccine is also known to come down over a period of time.

Panna Choudhury,
*National IAP President 2009 and
 Consultant Pediatrician,
 DII/M 2753, Netaji Nagar,
 New Delhi 110 023, India.
 pannachoudhury@gmail.com*

REFERENCE

1. Choudhury P. Preventing cervical cancer: Pediatrician' role. *Indian Pediatr* 2009; 46: 201-203.