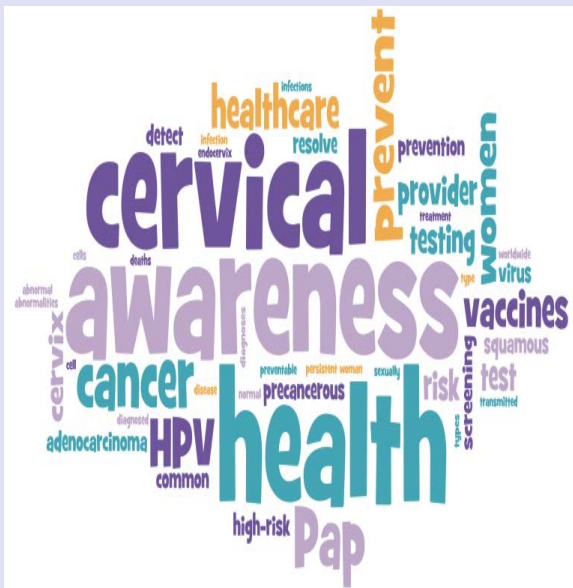


The goal of HPV-IMPACT is to evaluate the impact of human papillomavirus (HPV) vaccines on trends in cervical precancers through population-based surveillance of cervical intraepithelial neoplasia grades 2 and 3 (CIN2+) and adenocarcinoma in situ (AIS). As we approach the end of our 10th year doing this work, we are filled with gratitude for the support we have received from so many partners around the state of Connecticut. We are thankful to all the pathology laboratories that diligently report histologic diagnoses of CIN2+ and AIS to us in accordance with state reporting requirements. We further appreciate the effort that many of you put into providing us with residual diagnostic tissue specimens for HPV typing.

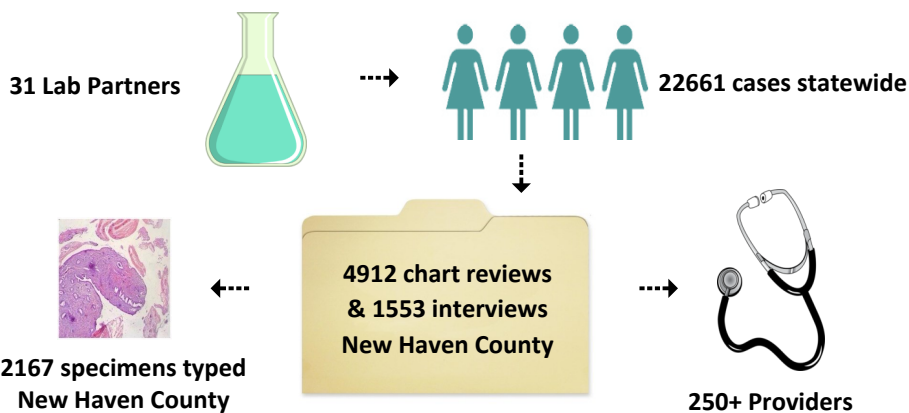


Our success is also due to the hundreds of health care providers around the state who provide us with vaccination histories and other demographic and clinical information on their patients diagnosed with CIN2+/AIS. HPV-IMPACT is an ongoing effort, funded by the Centers for Disease Control and Prevention, that is taking place at five sites around the country. We will continue to work with these partners to conduct one of the most robust HPV vaccination evaluation projects in the country.

In this newsletter, we are sharing with you some of our progress and key findings to date. We hope you enjoy reading about the accomplishments we have achieved together. We welcome any questions or feedback you may have. Please don't hesitate to get in touch.

CT Surveillance

2008-2017



CT HPV-IMPACT TEAM

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Role of Pathology

Laboratories

Report all histologic diagnoses of CIN2+ & AIS. Provide residual cervical tissue specimens upon request for HPV DNA typing



Role of Providers

Provide demographics, cervical cancer screening & HPV vaccination history for reported cases

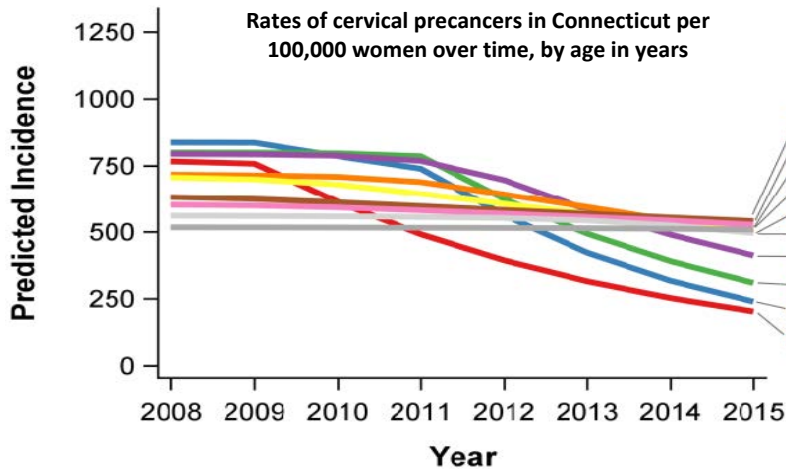


Yale SCHOOL OF PUBLIC HEALTH





HPV in Connecticut



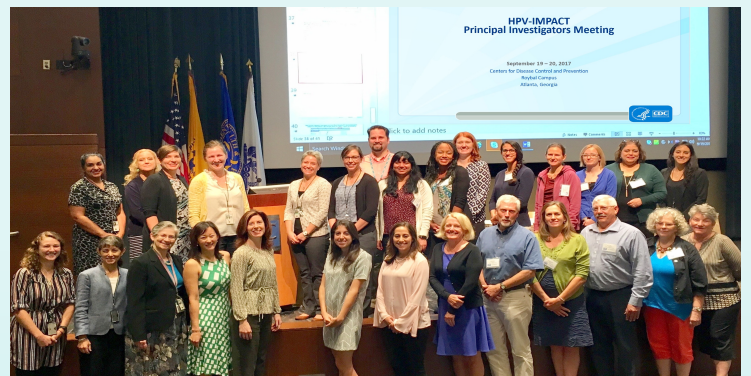
Declines in High-Grade Cervical Lesions
 Rates of high-grade cervical lesions have declined since surveillance began in 2008, particularly among younger women who are most likely to have been vaccinated. Significant declines in CIN2+ after 2008 were observed among women between the ages of 21 and 26 years, while no significant declines were observed among women ages 27 years and older.

Reference: Niccolai LM, Meek JI, Brackney M, Hadler JL, Sosa LE, Weinberger DM. Declines in Human Papillomavirus (HPV)-Associated High-Grade Cervical Lesions After Introduction of HPV Vaccines in Connecticut, United States, 2008-2015. Clin Infect Dis. 2017 Sep 15;65(6):884-889. Please contact us if you would like a copy of the full publication.

HPV-IMPACT Partners

September 2017

Several members of the CT HPV-IMPACT Project Team traveled to the CDC in Atlanta, GA to attend the national HPV-IMPACT Principal Investigators meeting. HPV-IMPACT monitors pre-cancerous cervical lesions (CIN2+) in Connecticut, California, New York, Oregon, and Tennessee as an early indicator of the impact of the Human Papillomavirus vaccine impact since 2008.

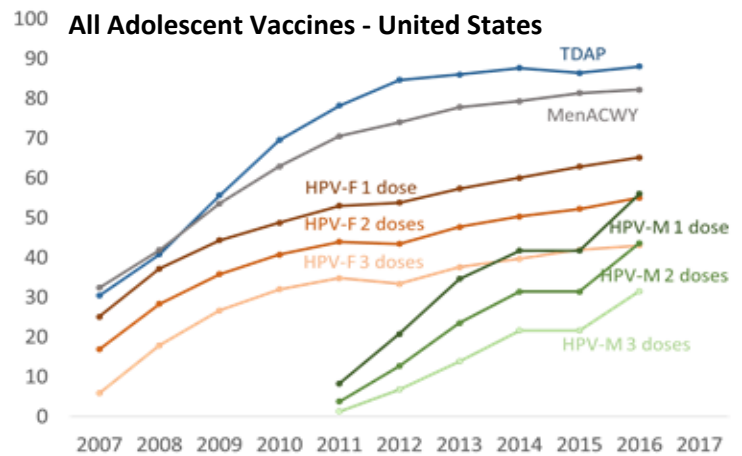
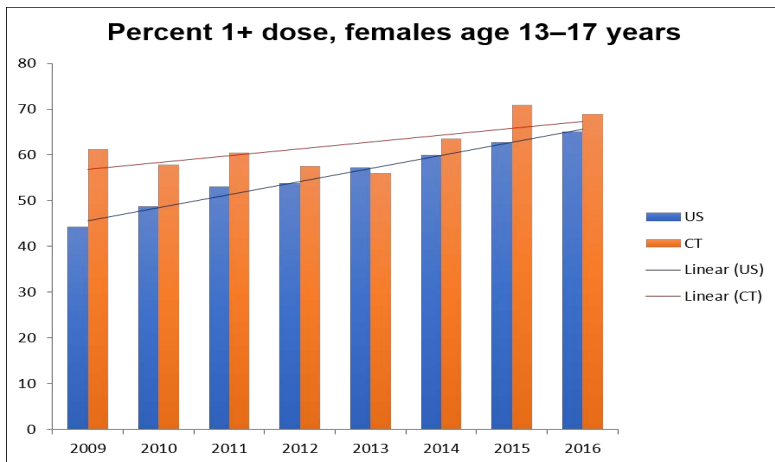


HPV Vaccine Uptake in the US



HPV Vaccination coverage has increased steadily since 2009. CT remains slightly above the national average.

HPV vaccination coverage lags behind the other adolescent vaccines, Tdap and meningococcal.



Questions? Comments? We'd love to hear from you!

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http://publichealth.yale.edu/eip/projects/hpv_impact.aspx

