

## Background

Over the last few years, several new vaccine recommendations have been developed that target adolescents. Delivery of vaccines to this population is challenging because many adolescents seek medical services in settings not traditionally associated with vaccination (ie gynecology clinics, school clinics) and because adolescents seek preventive care services (the types of visits where vaccines are typically provided) less frequently than any other childhood age group.

The human papillomavirus (HPV) vaccine is a unique among adolescent-targeted vaccines for two reasons – 1) more emphasis is given to gynecologists as providers of this vaccine given this medical specialty's inherent interest in preventing this infection and 2) HPV vaccination requires more visits to a medical provider than other adolescent vaccines. Because of these factors, HPV vaccination represents a unique paradigm to identify specialty-specific or infrastructural barriers that could have significant implications for adolescent vaccination more broadly.

## Objectives

This project has two objectives:

- 1) To determine if differences in HPV vaccine uptake among eligible females exists between providers in gynecology, family medicine and pediatrics
- 2) To identify visit, practice and patient characteristics associated receiving HPV vaccination among eligible women.

## Methods

This study will use data derived from the University of Michigan's Health System Data Warehouse. These data are comprised of medical record information for all outpatient visits among females ages 9-26 years old seen in outpatient pediatric, family medicine and gynecology clinics between January-December 2007. Data will be analyzed to determine rates of HPV vaccine uptake by medical provider type, types of visits (well child exam versus illness visit), visit diagnoses, and other patient and provider demographic characteristics. Timeliness of vaccination (3 doses within a 6 or 12 month period) will also be assessed for associations with patient and provider characteristics.

## Implications

Understanding the patterns of HPV vaccine utilization among different medical specialties, and how these uptake patterns are related to patient, provider and practice-level characteristics will identify potential areas of weakness in vaccine delivery infrastructure. Identifying these weaknesses is a necessary first step before improvements in vaccine delivery can be achieved. These barriers will take on increasing importance as the list of adolescent-specific vaccines continues to grow.

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