

## Comment

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# Human papillomavirus vaccination for boys in Brazil

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Last year, the Brazilian Ministry of Health announced the decision to start as of 2017 the quadrivalent vaccination against human papillomavirus for boys aged 12 to 13 years [1]. Such vaccine protects against infection by human papillomavirus subtypes 6, 11, 16 and 18 (in the same way as for girls) [2],[3].

Brazil is, therefore, the first country in South America that has protected boys against human papillomavirus infection through mass vaccination as part of the national immunization program [1],[4]. In this context, it should be noted that the human papillomavirus vaccination can result in a considerable reduction of new cases of cancer of the penis, anus and oropharynx [2],[4].

However, no data about the human papillomavirus vaccination campaigns for boys in Brazil, their consequences, as well as the corresponding impacts for the public health system have been published in the scientific literature. This article, then, discusses the more recent information about this subject matter.

In March 2017, surprisingly, the government has signed a partnership between the Ministries of Health and Education. Its objective has been to increase immunization coverage of children and adolescents against human papillomavirus. Thus, one of the proposals for the human papillomavirus vaccination in schools requires, for example, that students present their vaccination booklet at the time of school enrollment. Once this is done, the health system must be communicated about the priority doses [2],[5].

This action has been a very important advance, since for achieving a successful outcome in the human papillomavirus vaccination, the implementation of integrated public policies is required.

Nevertheless, according to the Brazilian Minister of Health more than two thousand vaccine doses have already

surpassed expiration date. Moreover, there is a stock of 231,000 human papillomavirus vaccines with expiration dates in the month of August [2],[6].

This large surplus of human papillomavirus vaccine is, in turn, due to the low adhesion rate to the vaccination campaign by the target public [2],[6]. Anti-vaccination movements (that disseminate information against the practice of vaccination) and fear of the vaccine might be the main reasons for this low current demand [3],[7].

In view of that, in June 2017 the Brazilian Ministry of Health has extended the age range of boys for human papillomavirus vaccination, by reducing the lower age limit to 11 and increasing the upper limit to 15 years incomplete. Such expansion of the age range is aimed at using human papillomavirus vaccines before the expiration date, while at the same time a greater number of boys are protected against this infection. Thereby, around seven million boys can be immunized through human papillomavirus vaccination campaign, which can also contribute to greater protection for girls [2],[6].

Therefore, it seems prudent for the Ministry of Health to implement new integrated public policies aimed at improvements in this issue. Health education in schools and adequate training of health professionals to assist the target public should be priority [1]. Nevertheless, completing these tasks can be very difficult, since there are serious weaknesses in the public management of a great number of Brazilian municipalities [8],[9].

In conclusion, although human papillomavirus vaccination is a very important preventive measure, it does not protect against all subtypes of this virus [3] and it has had low demand by the Brazilian population [2], [6]. In this sense, a complementary option would be the establishment of adjustments in the Brazilian public health system for the provision of effective cancer screening programs (resulting

from human papillomavirus infection) for pre-adolescents and adolescents [3]. At least for the moment, to promote this additional action would be a great help.

## Notes

### From the editor

The authors originally submitted this article in Spanish and subsequently translated it into English. The *Journal* has not copyedited this version.

### Declaration of conflicts of interest

The author has completed the ICMJE's conflict of interest declaration form translated into Spanish by *Medwave*, and declares he has not received funding for the report; has no financial relationships with organizations that might have an interest in the published article in the last three years; and has no other relationships or activities that could influence the published article. Forms can be requested by contacting the author responsible or the editorial management of the *Journal*.

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