

Effectiveness of a school- and primary care-based HPV vaccination intervention (the PrevHPV study)

Aurélie Bocquier, M Michel, Karine Chevreul, S Gilberg, Aurélie Gauchet, A S Leduc-Banaszuk, A Gagneux-Brunon, Judith E. Mueller, Bruno Giraudeau,

N Thilly

▶ To cite this version:

Aurélie Bocquier, M Michel, Karine Chevreul, S Gilberg, Aurélie Gauchet, et al.. Effectiveness of a school- and primary care-based HPV vaccination intervention (the PrevHPV study). 17th European Public Health Conference 2024 Sailing the Waves of European Public Health: Exploring a Sea of Innovation, Nov 2024, Lisbonne, Portugal. pp.ckae144.039, 10.1093/eurpub/ckae144.039. hal-04785035v2

HAL Id: hal-04785035 https://hal.science/hal-04785035v2

Submitted on 15 Nov 2024

HAL is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers. L'archive ouverte pluridisciplinaire **HAL**, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d'enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.



Distributed under a Creative Commons Attribution - NonCommercial 4.0 International License

1.I. Oral presentations: Tackling infectious diseases

Abstract citation ID: ckae144.039

Effectiveness of a school- and primary care-based HPV vaccination intervention (the PrevHPV study)

Aurélie Bocquier

A Bocquier¹, M Michel^{2,3}, K Chevreul^{2,3}, S Gilberg⁴, A Gauchet⁵, AS LeDuc-Banaszuk⁶, A Gagneux-Brunon⁷, JE Mueller^{8,9}, B Giraudeau^{10,11}, N Thilly^{1,12} ¹INSPIIRE, Université de Lorraine, Inserm, Nancy, France

²ECEVE, UMR 1123, Université Paris Cité, Inserm, Paris, France

³Unité d'épidémiologie Clinique, Assistance Publique-Hôpitaux de Paris, Hôpital Robert Debré, Paris, France

⁴Department of General Practice, Université Paris Cité, Paris, France

⁵LIP/PC2S, Université Savoie Mont Blanc, Université Grenoble Alpes, Grenoble, France

⁶CRCDC Pays de la Loire, Angers, France

⁷CIC-1408 Vaccinologie, CHU de Saint-Etienne, Saint-Etienne, France

⁸Emerging Disease Epidemiology Unit, Institut Pasteur, Université Paris Cité,

Paris, France

⁹Arènes - UMR 6051, RSMS - U 1309, Université de Rennes, EHESP, CNRS, Inserm, Rennes, France

¹⁰SPHERE U1246, Université de Tours, Université de Nantes, Inserm, Tours, France
¹¹Inserm CIC 1415, CHRU de Tours, Tours, France

¹²Department of Méthodologie Promotion Investigation, Université de Lorraine, CHRU-Nancy, Nancy, France

Contact: aurelie.bocquier@univ-lorraine.fr

Background: HPV vaccine coverage (VC) remains lower than expected in many countries, particularly France. We developed and evaluated the PrevHPV multicomponent intervention to

improve HPV VC among French adolescents. The components were 'education and motivation' of adolescents in schools, 'at-school vaccination', and 'general practitioners' (GPs) training'. We evaluated the effectiveness of the intervention two months after it ended. Methods: We carried out a pragmatic cluster randomized controlled trial with incomplete factorial design in 14/25 French school districts (July 2021-April 2022). The cluster was the municipality (n = 91). The outcome was HPV VC (≥ 1 dose) two months after the intervention ended among 11-14-year-olds living in participating municipalities (data from the French national reimbursement database and from the trial). We performed two types of analyses: (1) without considering the dose of intervention received, using a linear model with one fixed effect per component, adjusted for baseline HPV VC; (2) a post hoc on-treatment analysis, rerunning the linear model by replacing the fixed effects with a quantitative 'dose of intervention' variable calculated for each component using data collected during the trial. Results: For the three intervention components, estimates of the effect on VC at two months were greater for the on-treatment analyses than for the analysis that did not consider the intervention dose. For the 'at-school vaccination' component, the estimate increased from 5.50 percentage points (pp; p < 0.001) to 11.25 pp (p < 0.001). The 'GPs' training' component reached significance (from -1.46 pp, p = 0.150 to 3.56 pp, p = 0.049). In both types of analyses, no significant effect was observed for 'education and motivation' (from -0.08 pp, p = 0.950 to 2.58 pp, p = 0.241).

Conclusions: Increasing HPV VC among adolescents requires the involvement of various stakeholders and could be achieved by combining interventions in both schools and primary care settings. **Key messages:**

- The PrevHPV study is supported by the French health authorities and conducted by a multidisciplinary consortium to tackle a long-lasting public health concern in France.
- Offering free HPV vaccination at school significantly increased HPV VC; providing GPs with training and a dcision-aid tool helped increase HPV VC if the GPs completed the training.