Human Papillomavirus 9-valent Vaccine (HPV 9)
Implementation: July 1, 2020

Rationale for Update:
• Two-dose schedule for immunocompetent individuals ages 9-14 years of age inclusive. (September 2018)
• Expanded age eligibility to include males and females up to and including 26 years of age.

Please consult the Product Monograph\(^1\) for further information about the vaccine.

<table>
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<tr>
<th>Manufacturer</th>
<th>Merck Canada Inc</th>
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| Licensed use | • Females 9 years of age up to and including 45 years of age.  
               • Males 9 years up to and including 26 years of age. |
| Off-license use | None |
| Indications for use of provincially funded vaccine | • Students in Grade 6 – routine immunization program.  
                                                      • Students eligible to receive vaccine in Grade 6 continue to be eligible to receive the vaccine up to and including 26 years of age.  
                                                      • Males and females 17 years up to and including 26 years of age.  
                                                      • Hematopoietic Stem Cell Transplantation (HSCT) recipients: See Immunization for Child Hematopoietic Stem Cell Transplant Recipients.  
                                                      • Solid organ transplant (SOT) candidates and recipients: See Immunization for children Expecting Solid Organ Transplant after 18 Months of Age (Catch-up Schedule) and Immunization for Adult Solid Organ Transplant Candidates and Recipients |
| Dose | 0.5 mL |
| Route | Intramuscular injection |
| Schedule | **Immunocompetent** and non HIV infected individuals ages 9-14 years of age inclusive (2-dose series):\(^2\)  
            Dose 1: day 0  
            Dose 2: six months after dose 1  
**Immunocompromised** and/or HIV infected individuals ages 9-14 years of age inclusive (3-dose series):\(^2\)  
 Dose 1: day 0  
 Dose 2: two months after dose 1  
 Dose 3: six months after dose 1 |
### Individuals 15 years of age and older (3 dose series):\(^2\)
- Dose 1: day 0
- Dose 2: two months after dose 1
- Dose 3: six months after dose 1

**Notes:**
- The number of recommended doses in a series is based on the age at administration of the first dose. In immunocompetent individuals 15 years of age and older who received the first dose between 9 to less than 15 years of age a two-dose schedule can be used, with the second dose administered at least 6 months after the first dose.\(^2,3\)
- In a two-dose schedule the minimum interval is 24 weeks between the first and second dose.\(^2,3\)
- In a three-dose schedule the minimum interval between the first and second doses of vaccine is 4 weeks, the minimum interval between the second and third doses of vaccine is 12 weeks, and the minimum interval between first and last doses is 24 weeks.\(^4\)
- Eligible individuals, who began their series with Gardasil® (HPV4) can complete the series using Gardasil®9.\(^3\) However, they should be advised that protection against HPV types 31, 33, 45, 52, and 58 cannot be ensured.\(^2\)
- There is insufficient evidence at this time to recommend, at a population level, the re-immunization with HPV9 of individuals who have completed an immunization series with another HPV vaccine.\(^2\)

### Contraindications
- Known severe hypersensitivity to any component of Gardasil®9.
- Anaphylactic reactions to a previous dose of vaccine.

### Precautions
- None identified

### Possible reactions
See Product Monograph

### Pregnancy
HPV vaccine is not recommended for use in pregnancy or women who become pregnant before the completion of the three-dose schedule. If pregnant, immunization with the remaining doses of vaccine should be delayed until after delivery.\(^1,2\) If a vaccine dose has been administered during pregnancy, Merck Canada should be contacted to report incident.\(^1\) The effect of Gardasil®9 upon embryonic and fetal development has not been assessed in humans.\(^1\)

### Lactation
Gardasil®9 may be administered to breastfeeding women. It is not known if Gardasil®9 vaccine antigens or antibodies induced by vaccine are excreted in human milk.\(^2\)

### Program Notes
- 2008 September 1 – Gardasil® (Types 6, 11, 16 and 18) for females in Grade 5.
- 2009 September 1- 2013 June 30 – Gardasil® (Types 6, 11, 16 and 18) three year catch-up for females in grade 9.
- 2012 November - Eligibility expanded to male and female recipients of HSCT 9 years up to and including 17 years of age.
- 2014 September 1 – Eligibility expanded to males in Grade 5.
  - Gardasil® four year catch-up program for males in Grade 9 (Until 2018 June 30)
- 2016 September 1 - Gardasil®9 vaccine replaced Gardasil® vaccine for all eligible individuals.
- 2017 October – Gardasil®9 expanded eligibility to include MSM 17 to 26 years of age.
2018 September – Updated to incorporate two-dose scheduling for individuals 9 to 14 years of age who are immunocompetent and non HIV infected.
  - The routine school immunization program for HPV vaccine changed from being offered in Grade 5 to Grade 6.
2020 May – expanded eligibility to include males and females up to and including 26 years of age starting July 1, 2020.

References


