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**Behavioral/Social Sciences**

One of the challenges in implementing vaccination programs is the shortage of supply. The recent report by the Centers for Disease Control and Prevention (CDC) highlighted the impact on the supply of vaccines in the United States, as the product would not launch until 2020 and then it would likely be on the market for adults within the next 2 years.

Recognizing that vaccination of children has been largely responsible for the reduction in the prevalence of pertussis (whooping cough) in older adults of 9-fold and 3-fold, respectively (Figure 1). As a result, by the time children get vaccinated, the majority of the population has been protected, and it is possible to achieve herd immunity. The same principle applies to influenza vaccination, where the vaccine is recommended for all age groups to protect the vulnerable populations, including the elderly, pregnant women, and those with underlying medical conditions.

A pneumococcal series was established in 2014 as a result of the introduction of the conjugate vaccine, which primes the immune system for a greater response to PPSV23, a pneumococcal series that is recommended for adults aged 65 years or older. Because the conjugate vaccine primes the immune system for a greater response to PPSV23, a pneumococcal series was established, and it is recommended for adults aged 65 years or older. The concept of shared decision-making, which is supported by evidence, should be integrated into vaccine conversations with adults.

The Preventing Seniors Through Immunization Act of 2019 includes provisions for the purchase of vaccines for low-income individuals, including those served by programs that are administered by state agencies. Vaccines are prophylactic in that they prevent new HPV infections. These vaccines do not prevent progression of HPV infection to cancer. Despite these overarching concerns, ACIP members in the end came back to evidence—effectiveness, safety, and cost effectiveness—when making vaccine recommendations. The PCV13 workgroup noted, “Frequent changes in recommendations may negatively impact the perceived importance of vaccines for the public.”

In patients who did not receive the HPV vaccine as children or adolescents, the HPV vaccine is recommended for those who are at high risk for HPV-related cancers, including oral, anal, and cervical cancers. Studies of use of HPV vaccine in older patients helped to establish the need for vaccination in older adults, including those with underlying medical conditions such as those with HIV infection. The potential benefit to individuals aged 27 to 45 years, the timing of exposure to HPV, and the potential for cervical cancer in older patients are critical factors in the decision to recommend vaccination in this age group.

In the case of HPV vaccine, a worldwide shortage is limiting implementation of vaccination programs targeting both younger patients and older patients. Despite these concerns, ACIP members recommended for two adult vaccines at its Atlanta meeting in 2019, and the recommendations were implemented in 2019. The recommendations were based on evidence where patients are supported to consider options. It rests on the principal that self-determination is the core of evidence-based practice. The recommendation that HPV vaccines should be considered for women aged 26 years or older is supported by evidence that shows that HPV vaccination is effective in preventing HPV-related cancers in older women, despite the lack of data from randomized clinical trials in this age group.

**Conclusion**

The recommendation for HPV vaccination in older women is supported by evidence, and it is recommended for women aged 26 years or older. The recommendation is based on evidence that shows that HPV vaccination is effective in preventing HPV-related cancers in older women, despite the lack of data from randomized clinical trials in this age group. The recommendation is supported by evidence that shows that HPV vaccination is effective in preventing HPV-related cancers in older women, despite the lack of data from randomized clinical trials in this age group.

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