

Prevention Connection

On the Cutting Edge of Cervical Cancer Policy

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NATIONAL BIPARTISAN TASK FORCE MEETS TO UPDATE HPV & CERVICAL CANCER POLICY RECOMMENDATIONS

In late August, Women In Government convened a national, bi-partisan group of women state legislators to advance the organization's efforts in to eliminate cervical cancer. Expert speakers provided the legislators with the most up-to-date information on the current landscape of cervical cancer prevention in the U.S., the HPV vaccine, screening, and experiences of 2007 state legislative session. After the presentations, the women state legislators discussed and came to a consensus on updates to Women In Government's HPV and cervical cancer prevention policy recommendations. The following recommendations were then submitted to and approved by the Board of Directors, and officially released on September 18, 2007.

Statement Re: Role of Statewide Accountable Entities:

States should ensure that statewide cervical cancer task forces or other proactive accountable entities are informed about and address new information and data about cervical cancer/HPV, including opportunities to establish an adolescent "well visit." States should consider legislative action that may be required to update and extend the parameters of task force timeline, members, etc.

Statement Re: Vaccines for Children (VFC) Program and other Federal Funds Available to States:

States should maximize resources and direct dedicated funding streams to support program infrastructure and provide education to policymakers about VFC and 317 funding. State departments of health should develop and implement plans to ensure all girls and women aged 9 through 26 have access to and receive FDA-approved cervical cancer/HPV vaccines, with an emphasis on the routine vaccination of 11 and 12-year-old girls.

Statement Re: Pre-Teen and Adolescent School Entrance Requirements:

Recognizing that requiring vaccines for school entry has helped to provide equal access to critical immunizations throughout history, regardless of one's socioeconomic status, or other factors, states should consider including HPV vaccines for the prevention of cervical cancer, for girls entering middle school, in conjunction with other vaccines required at this time, with the same parental opt out in accordance with states' existing exemption allowances (e.g., medical, religious and/or philosophical).

Statement Re: Insurance Coverage:

States should strongly encourage insurance providers to adequately cover FDA-approved cervical cancer/HPV vaccines, Pap tests and HPV

tests. States should also authorize health departments and other health centers to establish a process to bill private insurance providers for services rendered. States should encourage employers to buy plans with HPV screening and vaccine inclusion.

Statement Re: Special Populations:

States should require Medicaid to cover FDA-approved cervical cancer/HPV vaccines for eligible 19-26 year-old women. States should ensure that public health programs (screening and vaccination) are adequately funded and utilized to ensure that all other uninsured or underinsured females have access to cervical cancer/HPV vaccination and screening, with a goal of eliminating healthcare disparities (based on income, geographic location, country of origin, race/culture or other factors) and reaching these underinsured and uninsured populations.

Statement Re: Education & Awareness:

States should develop awareness campaigns to educate the public about cervical cancer/HPV. Existing statewide entities focused on cancer prevention and/or health should take the lead on developing, partnering with other like-minded organizations and executing programs to educate and involve stakeholders (e.g., policymakers, providers, parents, men, women, school administrators, advocacy groups, etc.) about cervical cancer, HPV, and the role of available preventive technologies. States should help women ages 19-64 identify the questions they should ask regarding their cervical health and inform women who are eligible for Medicare about available screening benefits. Legislators need to be educated to assure already budgeted monies are not supplanted by additional appropriations or donations.

These recommendations were released at the 9th Annual Eastern Regional Conference, which was held in Lake George, NY in mid-September. The first Task Force convened in 2003 and meets annually to discuss the current cervical cancer prevention landscape update to Women In Government's HPV and cervical cancer policy recommendations. ■



Senator Connie Lawson (IN), Chair of Women In Government's Board of Directors, asks a question during the Annual HPV & Cervical Cancer State Legislative Task Force Meeting.

GYNECOLOGIC CANCER AWARENESS MONTH

According to the Gynecologic Cancer Foundation (GCF), in 2007 approximately 78,000 American women will be diagnosed with a gynecologic cancer and 28,000 will die from these diseases. To promote the education and awareness of these cancers, including cervical cancer, September was designated as Gynecologic Cancer Awareness Month.

Gynecologic cancers include cancers of the cervix, ovaries, uterus, fallopian tubes, vagina and vulva. Almost all cancers of the cervix and some of the vagina and the vulva are caused by the human papillomavirus. Regular screening and self examinations can help catch certain gynecologic cancers in their early stages, which significantly

increases chances of successful recovery.

Because of the prominence of these cancers in American women, Women In Government, along with various partner organizations such as the American Medical Women's Association (AMWA) and the GCF, put an emphasis on reducing gynecologic cancer rates by both providing educational materials for women and recommending actions that policymakers can take on the subject. Numerous state legislatures, including in California, Kentucky, Ohio, Pennsylvania, and Wisconsin, have also attempted to designate awareness months for various gynecologic cancers. In previous years, all 50 states have designated September as Gynecologic Cancer Awareness Month. ■



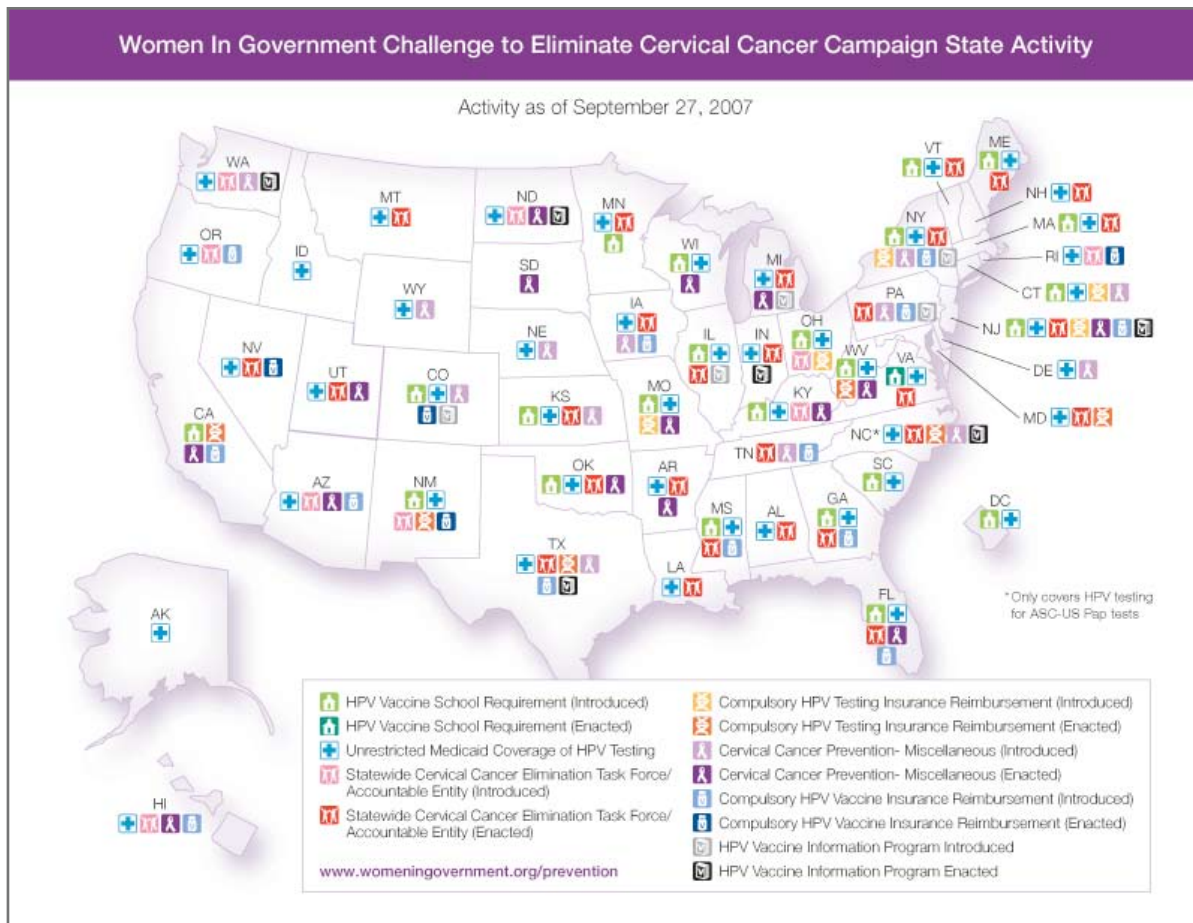
CHALLENGE TO ELIMINATE CERVICAL CANCER CAMPAIGN UPDATE

Although most states' legislative sessions ended, a handful of states continue their governing business. This summer, six states continued to introduce or pass cervical cancer prevention legislation, including Illinois, Maine, Michigan, New Jersey, Rhode Island, and Wisconsin. These states introduced legislation on providing coverage for the HPV vaccine through state departments of health, HPV and cervical cancer information legislation, and HPV vaccine health insurance requirements.

As a result of the efforts of state legislators nationwide, Women In Government is excited to report that all 50 states have introduced and/or enacted legislation relating to the prevention of cervical cancer.

However, more work can always be done to eliminate this disease both in the U.S. and abroad. To accomplish this, Women In Government's HPV & Cervical Cancer Task Force has released policy recommendations, which can be found in this issue of the *Prevention Connection*, or on our website at <http://www.womeningovernment.org/prevention>. Women In Government staff will also be traveling abroad in early October to discuss with other cancer prevention organizations how to eliminate this disease worldwide.

Please visit the *Challenge to Eliminate Cervical Cancer Campaign* website at <http://www.womeningovernment.com/prevention> for more information. ■



NEW DATA SHOWS VACCINE PROTECTS AGAINST MORE STRAINS OF HPV

When the first human papillomavirus (HPV) vaccine became available in June 2006, it was credited with being able to protect women against four HPV strains: 16 and 18, which together cause approximately 70 percent of cervical cancer; and strains 6 and 11, which cause 90 percent of genital warts. On September 19, 2007 new study findings were released that indicate the vaccine offers partial protection against an additional 10 HPV strains, some of which account for 16 percent of cervical cancers in Europe and 22 percent of cervical cancers worldwide. The vaccine reduced the incidence of pre-cancerous lesions caused by HPV by nearly two-thirds for three of the most common HPV strains found in North America after strains 16 and 18. It is now estimated that the HPV vaccine offers partial protection against up to 90 percent of the HPV strains that cause cervical cancer.



Although these additional strains were not included in the vaccine, women are receiving partial protection against them through “cross protection.” This means that while the vaccine was designed to protect against four specific strains of HPV, it has been shown to also offer some protection against other similar HPV strains.

Two large Phase III clinical trials of the HPV vaccine were conducted to find these results. The trials involved administering the three doses of the vaccine or a placebo to girls and women aged 15 to 26. Participants underwent cervical-vaginal sampling and Pap testing at the beginning of the study and at six to 12-month intervals for up to 48 months.

The data collected from the vaccine clinical trials are quite significant for the worldwide fight against cervical cancer. For more information visit http://www.kaisernetwork.org/daily_reports/rep_index.cfm?DR_ID=47621. ■



Miss Staten Island, Elise Rooker, and Senator Diane Savino (NY) at Women In Government's 9th Annual Eastern Regional Conference

Ms. Rooker is a 23 year old student at The New School in Manhattan where she is pursuing a Masters Degree of Musical Theatre Performance.

WOMEN IN GOVERNMENT TRAVELS TO EUROPE TO BUILD PARTNERSHIPS TO ELIMINATE CERVICAL CANCER

In early October, Women In Government members and staff traveled to Europe for the Second Annual Global Partnership Program. Participants met with members of European Parliament, European Cervical Cancer Interest Group, and the European Cancer Patient Coalition.



Furthermore, the group held a meeting with the International Union Against Cervical Cancer (UICC) in Geneva, Switzerland. At that meeting, Women In Government Executive Committee members, including Sec. Gloria Lawlah (MD), Rep. Karen Morgan (UT), Rep. DebraLee Hovey (CT), Rep. Mary Sue McClurkin (AL), and Retired Sen. Beverly Hammerstrom (MI), presented information about initiatives they have taken in their own states around cancer prevention.

Following the Global Partnership Program, Women In Government President Susan Crosby, Board Chair Sen. Connie Lawson (IN), and Immediate Past Chair Sec. Gloria Lawlah (MD) traveled to Monte Carlo, Monaco where they participated in “Eurogin



2007: New Strategies of Cervical Cancer Prevention and The Reality of HPV Vaccines.” Annually, this conference brings together policymakers, clinicians, and health advocates from around the world to discuss the combination of scientific developments and strategic partnerships in the global fight against HPV infection and cervical cancer. Susan Crosby gave a presentation at the conference, which detailed Women In Government's policy and advocacy strategies to eliminate cervical cancer. ■

Women In Government Board of Directors Executive Committee Members, President, Susan Crosby, Associate Director, Sarah Wells, and Manager of Public Policy & PR, Kathryn Guccione, with UICC President, Franco Cavalli, UICC Executive Director, Isabel Mortara, and other staff at the UICC headquarters in Geneva, Switzerland.

Miss Staten Island Educates the Public about HPV

Miss Staten Island, Elise Rooker, spoke at Women In Government's 9th Annual Eastern Regional Conference this September about her dedication to furthering the education and awareness of the human papillomavirus (HPV) and its link to cervical cancer throughout the state of New York. In the last year, she has spoken at schools, community organizations, and civic groups about this connection in order to make more New York women aware of this connection and how they can protect themselves against developing cervical cancer. As the current liaison and spokesperson to the American Social Health Association, she is provided with the most current and up to date information on HPV and cervical cancer.

WOMEN IN GOVERNMENT TO HOST THIRD ANNUAL HPV & CERVICAL CANCER SUMMIT

On November 15-17, 2007 Women In Government will host the *Third Annual HPV & Cervical Cancer Summit* in Washington, DC. The Summit will bring together women state legislators, health advocates, state and federal agency representatives, and other key stakeholders to discuss the newest trends and strategies in cervical cancer prevention. Topics that will be addressed include: A Global Perspective on Cervical Cancer Prevention; Collaboration Strategies for Cervical Cancer Prevention: The Importance of Continued Screening; Cost-Effectiveness of Cervical Cancer Prevention; and Vaccine Financing & Researching Uninsured & Underinsured Populations.

An awards dinner will be held on the evening of the 16th at the John F. Kennedy Center for Performing Arts. Women In Government will honor individuals and organizations that have dedicated their time and efforts to eliminating cervical cancer, with a Presidential Leadership Award.

For more information about attending the Summit, please contact Amalfi Parker, Program Intern, at Women In Government via email at: events@womeningovernment.org or at 202-333-0825 x211.



Cervical cancer survivor and Popsmeat.org founder, Christine Baze, addresses participants at the Second Annual HPV & Cervical Cancer Summit

WIG is a national 501(c)(3), non-profit, bi-partisan organization of women state legislators providing leadership opportunities, networking, expert forums, and educational resources to address and resolve complex public policy issues.

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