

National (Australia) HPV 3 dose vaccination coverage for all males turning 15 years of age, 2013 – 17

Graph 1. HPV 3 dose vaccination coverage for all males turning 15 years of age, 2013-17.

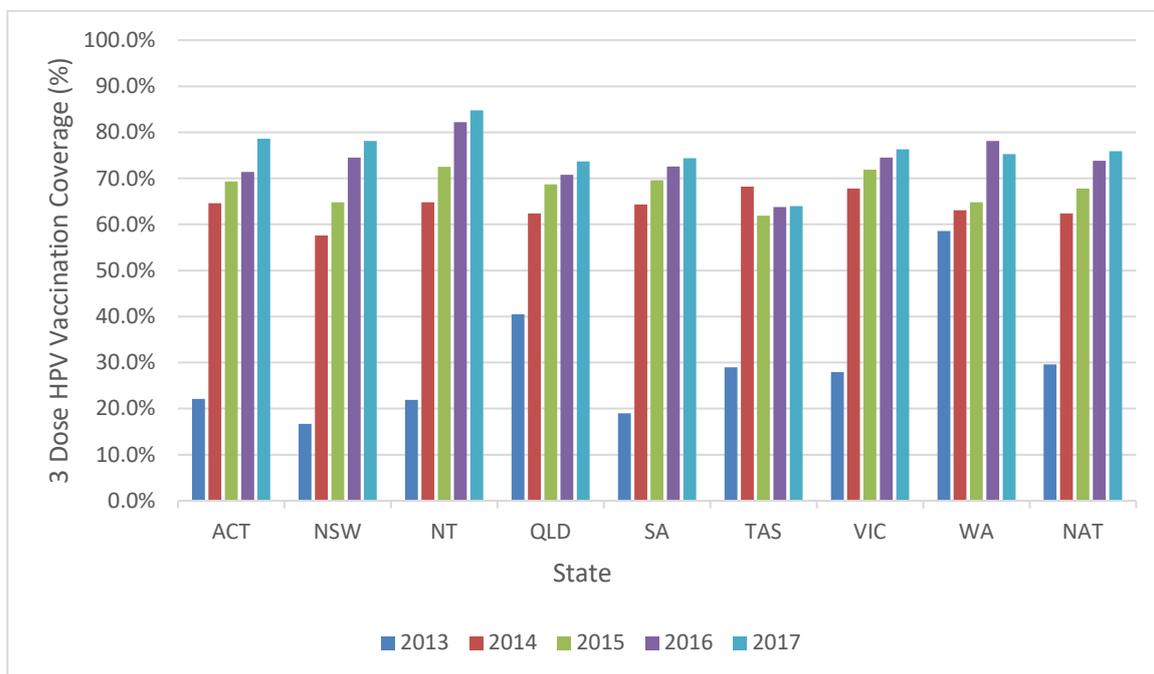


Table 1. HPV 3 dose vaccination coverage for all males turning 15 years of age, 2013-17.

	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	NAT
2013	22.1%	16.7%	21.9%	40.5%	19.0%	29.0%	27.9%	58.6%	29.6%
2014	64.6%	57.6%	64.8%	62.4%	64.3%	58.2%	67.8%	63.1%	62.4%
2015	69.3%	64.8%	72.5%	68.7%	69.6%	61.9%	71.9%	64.8%	67.8%
2016	71.4%	74.5%	82.2%	70.8%	72.6%	63.8%	74.5%	78.1%	73.8%
2017	78.6%	78.1%	84.8%	73.7%	74.4%	64.0%	76.3%	75.3%	75.9%

Notes:

- In 2013 some 15 year olds were eligible for catch-up vaccination as part of the 2013-14 male HPV vaccination catch-up program. Coverage in 15 year old males is progressively increasing over time as boys vaccinated at the routine age of 12 to 13 years reach 15 years of age.
- Both numerator and denominator data are regularly updated using latest Registry data and ABS estimates. This may limit their comparability to earlier published estimates.
- Data extracted from the National HPV Vaccination Program Register (HPV Register) as at 4 July 2018 and includes males vaccinated between April 2007 and June 2018.
- Includes doses that comply with the recommended vaccine dosage and administration as per the Australian Immunisation Handbook (up to 3 doses administered at prescribed intervals).
- Estimated Resident Population 2013 (as at 30/06/2013) is from the Australian Bureau of Statistics - Cat 3101.0 Australian Demographic Statistics, Tables 51 to 58: Estimated Resident Population by Single year of Age by State and Territory, FINAL based on 2016 census data published June 2018.

- Estimated Resident Population 2014 (as at 30/06/2014) is from the Australian Bureau of Statistics - Cat 3101.0 Australian Demographic Statistics, Tables 51 to 58: Estimated Resident Population by Single year of Age by State and Territory, FINAL based on 2016 census data published June 2018.
- Estimated Resident Population 2015 (as at 30/06/2015) is from the Australian Bureau of Statistics - Cat 3101.0 Australian Demographic Statistics, Tables 51 to 58: Estimated Resident Population by Single year of Age by State and Territory, FINAL based on 2016 census data published June 2018.
- Estimated Resident Population 2016 (as at 30/06/2016) is from the Australian Bureau of Statistics - Cat 3101.0 Australian Demographic Statistics, Tables 51 to 58: Estimated Resident Population by Single year of Age by State and Territory, FINAL based on 2016 census data published June 2018.
- Estimated Resident Population 2017 (as at 30/06/2017) is from the Australian Bureau of Statistics - Cat 3010.0 Australian Demographic Statistics, Tables 51 to 58: Estimated Resident Population by Single year of Age by State and Territory, PRELIMINARY based on 2016 census data published June 2018.
- Age is age as at date of ERP estimate (30th June) for the specified year.
- Coverage is calculated as doses administered and reported to the HPV Register/Estimated Resident Population expressed as a percentage.
- Excludes consumers who do not wish their details to be recorded on the HPV Register.
- The National HPV Vaccination Program initially provided quadrivalent HPV vaccine for all females aged 12-26 years as at mid 2007 (school program commenced April 2007 and GP/community program in July 2007) until end December 2009. From 2009 the Program offered HPV vaccination routinely to females in the first year of high school (usually at 12-13 years). From 2013, males were also offered HPV vaccination routinely in the first year of high school (age 12-13 years), with a catch-up program available for males aged 14-15 years in 2013 and 2014.
- As the ages of students in the first year of high school varies between jurisdictions, age 15 is used as the age for routine review of vaccination coverage that provides the best comparison to allow for these varying ages in administration, as per World Health Organization (WHO) recommendations.
- HPV Vaccination doses administered through general practice and in other community settings may be incompletely notified to the HPV Register. The extent of under notification differs by jurisdiction, with the Northern Territory and Queensland expected to have the most complete notification, due to notification of doses via State based immunisation registers.