

LIZ KRUEGER
SENATOR, 28TH DISTRICT

ALBANY OFFICE
LEGISLATIVE OFFICE BUILDING
ROOM 905
ALBANY, NEW YORK 12247
(518) 455-2297
FAX (518) 426-6874

DISTRICT OFFICE
1850 SECOND AVE.
GROUND FLOOR
NEW YORK, NEW YORK 10128
(212) 490-9535
FAX (212) 490-2151
E-MAIL
LKRUEGER@NYSenate.GOV

NEW YORK
STATE
SENATE

ALBANY, NEW YORK 12247



RANKING MINORITY MEMBER
FINANCE

COMMITTEES:

CODES
ELECTIONS
HIGHER EDUCATION
HOUSING, CONSTRUCTION
& COMMUNITY DEVELOPMENT
MENTAL HEALTH &
DEVELOPMENTAL DISABILITIES
RULES

Testimony of State Senator Liz Krueger
Before the New York City Council Committee on Health and Women's Issues
Regarding Efforts to Prevent the Human Papillomavirus
and Decrease Risk for Cancer

January 8, 2015

My name is Liz Krueger and I represent the 28th Senate District, which includes the East Side and Midtown areas of Manhattan. I want to thank City Council Speaker Melissa Mark-Viverito, Chairperson Laurie Cumbo, Chairperson Corey Johnson, and the members of the City Council Committees on Health and Women's Issues for providing me with the opportunity to testify on the importance of preventing the Human Papillomavirus (HPV) and decreasing the risk of cancer for both women and men.

I am extremely pleased that the City Council has introduced a resolution to recognize January as Cervical Health Awareness Month in New York City and a resolution to call upon the New York State Legislature to pass legislation that I sponsor, which would permit health care practitioners to provide treatment to young people for the prevention of HPV. Currently, **doctors can screen and treat young people for sexually transmitted infections without the consent of their parent or guardian, but they cannot prevent these infections and administer the HPV vaccine without parental consent.** As a result, young people may miss the optimal age range to access a vaccine that can protect their health and save their lives. This bill closes this troubling gap in the law.

1. Incidence of HPV and HPV-Associated Cancer

HPV is the most common sexually transmitted infection (STI) in the US, according to the Centers for Disease Control and Prevention (CDC). HPV is so widespread that the CDC reports that 14 million people will become newly infected in 2015. While most people who are infected will not develop HPV-related health problems, some types of HPV can cause genital warts and certain cancers. Each year, over 17,000 women and over 9,000 men are diagnosed with HPV-related cancers.¹ Nearly all cervical cancers are caused by HPV, which results in 4,000 deaths each year in the US.² HPV is also reported to cause over 90 percent of anal cancers, and a significant portion of vaginal, vulvar, and penile cancers.³ Misinformation has suggested that HPV causes cancer only in

¹ CDC, accessed at <http://www.cdc.gov/cancer/hpv/statistics/cases.htm>.

² Ibid.

³ Ibid.

women. However, oral cancers caused by HPV have drastically increased in the past 15 years, with men accounting for over 75% of all cases.^{4,5}

2. Barriers to HPV Vaccination

There are two vaccines that the CDC has determined are safe, effective, and can protect people from most of the cancers caused by HPV. The HPV vaccines, which have been approved by the U. S. Food and Drug Administration, are most effective when administered before a person becomes sexually active and before potential exposure to HPV. Generally, this means administering the vaccine to persons under the age of eighteen. While the CDC recommends that males and females receive the vaccine by age 12 to be most effective, the vaccine can be administered up to the age of 25 or 26.

While HPV vaccination rates are increasing, there is significant room for improvement. Though New York State fares better than most states in vaccination rates, only 45% of females aged 13-17 years received all three of the recommended doses of the vaccine, and only 19% of males in the same age range received all three doses.⁶ In addition, certain cancers associated with HPV continue to increase and also disproportionately affect people by socioeconomic and race/ethnic status.⁷

The President's Cancer Panel recently reported the urgent need for action to increase HPV vaccinations. They highlighted several reasons why parents don't vaccinate their children against HPV and why health care practitioners do not more actively encourage the vaccination. Factors included:

- a lack of knowledge that the vaccine is recommended;
- limited understanding of HPV-related disease, especially in males;
- concerns over the safety of the vaccine;
- discomfort talking about sexual behavior; and
- belief that their children are not sexually active; among many other reasons.⁸

My office has also encountered parents who are reluctant to have their children vaccinated for fear that the vaccine promotes promiscuity and riskier sexual behavior. However, the scientific research has consistently de-bunked this notion. The research consistently indicates that the HPV vaccination does not encourage the onset of sexual activity or promote riskier sexual behavior (such as an increased number of sexual partners or condom use).^{9, 10, 11, 12}

⁴ Oropharyngeal cancer is cancer in the back of throat, including the base of the tongue and tonsils.

⁵ CDC, accessed at <http://www.cdc.gov/cancer/hpv/statistics/cases.htm>.

⁶ CDC, National, Regional, State, and Selected Local Area Vaccination Coverage Among Adolescents Aged 13–17 Years - United States, 2013. MMWR Wkly Rep. July 25, 2014 / 63(29);625-33.

⁷ Jemal, Ahmedin, et al. Annual Report to the Nation on the Status of Cancer, 1975-2009, featuring the burden and trends in human papillomavirus (HPV)-associated cancers and HPV vaccination coverage levels. *Journal of the National Cancer Inst.* 2013; 10.1093/jnci/djs491.

⁸ Accelerating HPV Vaccine Uptake: Urgency for Action to Prevent Cancer. A Report to the President of the United States from the President's Cancer Panel. Bethesda, MD: National Cancer Institute; 2014.

⁹ Mayhew, Allison, et al. "Risk Perceptions and Subsequent Sexual Behaviors After HPV Vaccination in Adolescents." *Journal of American Academy of Pediatrics* 133.3 (2014): 404-411.

¹⁰ Rysavy, Mary B., et al. "Human papillomavirus vaccination and sexual behavior in young women." *Journal of pediatric and adolescent gynecology* 27.2 (2014): 67-71.

3. State Legislation to Encourage Access to the HPV Vaccine

Currently, New York State public health law allows for the **testing and treatment** of STIs without a parent or guardian's consent, but it does not allow for the **prevention** of STIs without a parent or guardian's consent. It is poor public policy that practitioners can treat and diagnose STIs, but they cannot help prevent an STI that can become fatal.

I sponsor bill S3134A (2014) to encourage the vaccination against HPV at a time when it is most effective, which is generally before a person is 18. My legislation would allow health care practitioners to provide health care related to the prevention of STDs, including administration of the HPV vaccine, to patients regardless of their age without requiring a parent or guardian's consent. This care could only be provided when the patient has the ability to consent to the medical care, and does consent to the care.

The Guttmacher Institute reports that the legal ability of minors to consent to a host of health care services has increased substantially over the last 30 years (this includes sexual and reproductive health care, mental health services, and substance abuse treatment). "This trend reflects the recognition that, while parental involvement in minors' health care decisions is desirable, many minors will not avail themselves of important services if they are forced to involve their parents."¹³

It is clear that we need to improve education about HPV and the HPV vaccine, and ensure that parents and patients have the information they need about the safety and effectiveness of the vaccine. However, family relationships cannot be legislated and good public policy should provide access to proper medical care regardless of the family circumstances.

4. An Opportunity to Improve Public Health

Education and prevention of HPV now will dramatically affect New Yorkers for decades. Therefore, I urge the City Council and public health officials to continue to explore all avenues for increasing education on HPV and HPV-related conditions, especially since certain cancers associated with HPV continue to increase. I will continue to work to convince my colleagues in Albany of the necessity of this legislation.

Thank you for introducing these important resolutions and for the opportunity to testify today.

¹¹ Hansen, Bo T., et al. "Human papillomavirus (HPV) vaccination and subsequent sexual behaviour: Evidence from a large survey of Nordic women." *Vaccine* 32.39 (2014): 4945-4953.

¹² Liddon, Nicole C., Jami S. Leichter, and Lauri E. Markowitz. "Human papillomavirus vaccine and sexual behavior among adolescent and young women." *American Journal of Preventive Medicine* 42.1 (2012): 44-52.

¹³ Guttmacher Institute, *State Policies in Brief, An Overview of Minors' Consent Law*. January 1, 2015.