American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™

NYS AAP, District II

May 8, 2015

Memo of Support A.1528/S.2712

The New York State American Academy of Pediatrics, District II strongly supports A.1528 /S.2712.

This legislation provides qualified health care practitioners with the authority to provide health care for treatment and prevention of sexually transmitted infections to minors who are capable of giving informed consent without the consent of a parent or guardian. The legislation provides an important clarification to public health law that such providers are authorized to administer the vaccine that protects young people from the Human Papillomavirus (HPV).

HPV is the most common sexually transmitted infection in the United States and its consequences are dire. Some forms of HPV cause cancer, including vaginal cancer, cervical cancer, penile cancer, and anal cancer. Virtually all cervical cancer cases and 85 percent of all anal cancer cases are caused by HPV infections. In addition, HPV infections have recently been found to cause oropharyngeal cancer, which affects the throat, base of the tongue, and tonsils. Nationwide, HPV infections are linked to more than half of all oropharyngeal cancer diagnoses.

Close to 12,000 women in the United States are diagnosed with cervical cancer each year and approximately 4,000 women die each year as a result of the disease. HPV's impact is widespread. Most sexually active men and women have the virus at some point in their lives, and as many as half of these infections are among adolescents and young adults ages 15 through 24.

Fortunately, there is a prevention tool that works. Despite a misinformation campaign about the vaccine by opponents, clinical trials and post-licensure monitoring data prove that HPV vaccines are not only critical as preventive care measures but entirely safe.

The HPV vaccine has the greatest chance of preventing HPV infections and related cancers when administered to girls and boys aged 11 or 12 years—before they become sexually active and at risk of being exposed to the virus. Ideally the vaccine would be offered in the course of regular pediatric visits, or any time a provider learns that a young person is about to become or has been sexually active.

Despite the fact that most parents are involved in their children's health care decisions, not all teens have healthy, safe family relationships. Some teens are unable or unwilling to involve their parents, especially when it comes to reproductive and sexual health care. Studies have shown that many adolescents will simply not seek sexual health care services if their

confidentiality is compromised. Minors who do not wish to disclose to their parents that they are, or will soon become, sexually active often have good reasons, such as fear of abuse at home. For these reasons, public health experts and professional medical associations, including the *American Academy of Pediatrics*, Society for Adolescent Health and Medicine, the American College of Obstetricians and Gynecologists, the American Medical Association, *the American Academy of Family Physicians, and the American Public Health Association, strongly support the provision of confidential reproductive and sexual health care to teens. The laws and policies of the state of New York rightly recognize these realities and allow minors to consent on their own for reproductive and sexual health care, including testing and treatment for sexually transmitted infections.*

However, in the past the New York State Department of Health has taken the position that this statute may not encompass preventive treatment such as the HPV vaccine. Thus, some health care providers are unsure whether minors may provide informed consent for this vaccine without parental permission. We believe that drawing a distinction between treatment and prevention creates unnecessary barriers, and conflicts with the important public health principles that guide our laws. If providers are required to obtain parental consent before administering the vaccine in all cases, they may be forced to decide between breaching confidentiality with an adolescent patient and missing a critical opportunity for prevention. As a result, many minors are unable to access this potentially life-saving treatment.

This legislation would help expand access to the vaccine for this vulnerable population by explicitly covering preventive care, including vaccines. Allowing access to such preventive care without obstacles is consistent with both good medical practice in the field of adolescent medicine and with New York policies. Further, while opponents often charge that the HPV vaccine will put minors at risk by encouraging sexual activity, recent studies show that there is no connection between receipt of the vaccine and sexual behavior.

We urge you to pass this critical legislation making clear that qualified health care practitioners may legally administer the HPV vaccine to minors who have the capacity to provide informed consent without parental consent. The young people who will benefit from this clarification the most are those who are most at risk, due to factors such as lack of adequate family support, instability in the home, or child abuse and neglect. We hope that you will act swiftly to pass A.1528/S.2712 and enable such vulnerable young people to protect themselves against disease and infection.

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