

# HPV Vaccine Data and Maps (Heat Maps) Tool

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## BACKGROUND

Despite being introduced nearly two decades ago, human papillomavirus (HPV) vaccination rates remain far below the national goal (80%). While HPV vaccination is available at the national and state levels, county-specific HPV vaccination rates remain largely unavailable. Disaggregating HPV vaccination to the county level can be extremely valuable for understanding HPV vaccination disparities.

## OBJECTIVE

Our objective was to develop an interactive web-based tool to disseminate data-

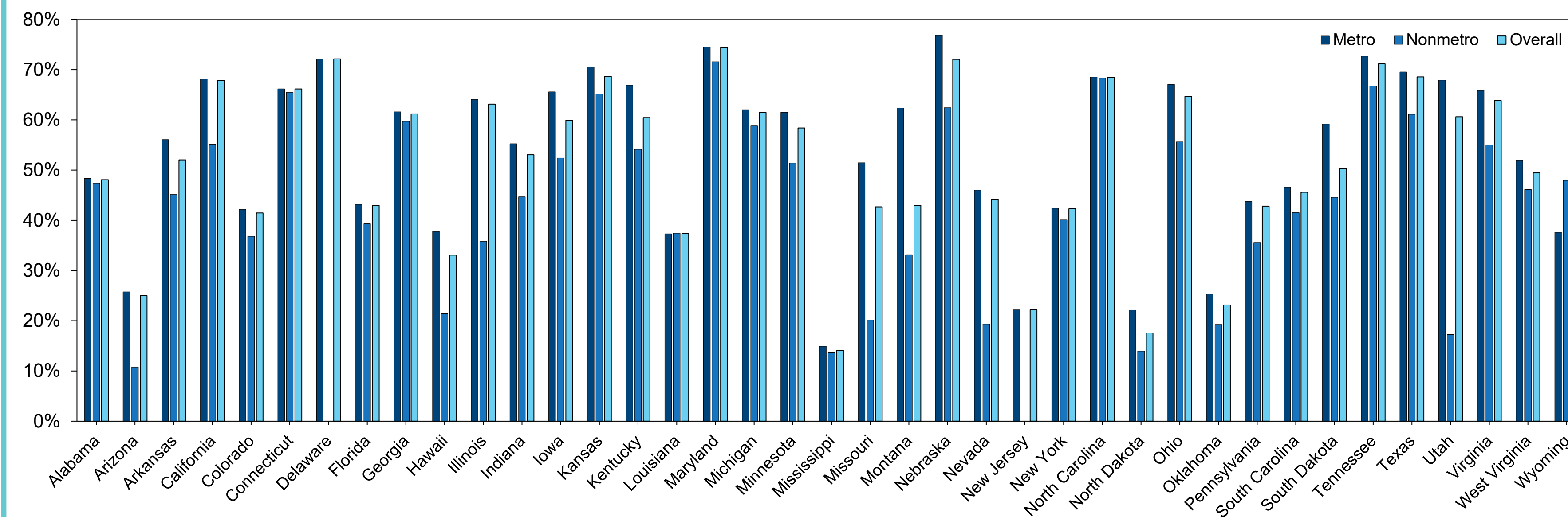
- 1) Describing HPV vaccination rates at the state and county level
- 2) Illustrating geographic disparities in HPV vaccination rates between states and within states (metro vs. non-metro)

## METHODS

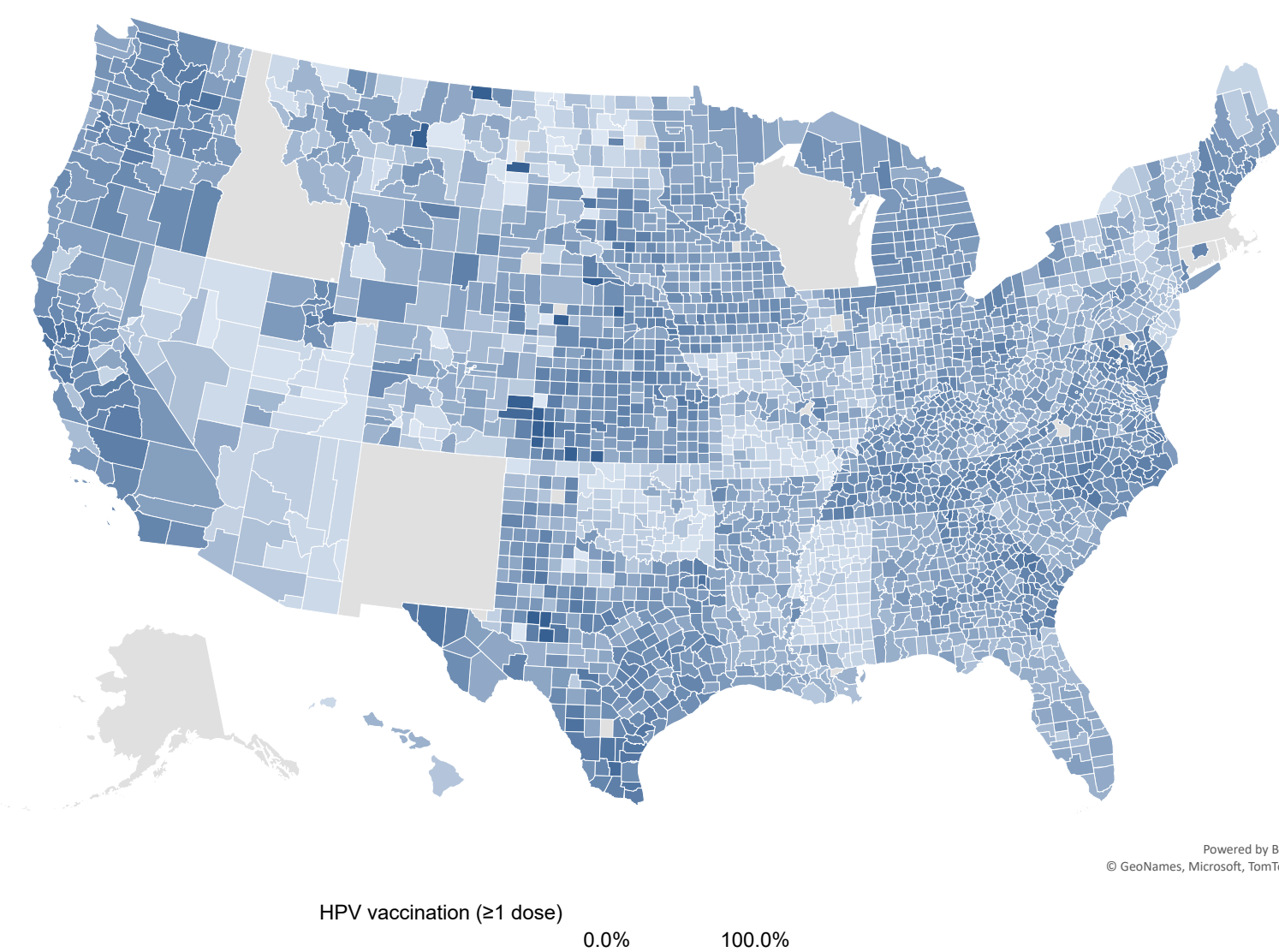
- We developed an interactive web-based tool, **HPV Vaccine Data and Maps (Heat Maps) Tool**, to disseminate county-level data.
- Medical claims data of over 10 million adolescents across 50 states was analyzed.
- HPV vaccination rates ( $\geq 1$  dose) among 13-15-year-old adolescents was estimated during the calendar year 2020 at the national level, and at the state and county levels.
- Universal vaccine purchase policy and bundled vaccine payment states were excluded.
- Color-coded interactive spatial maps were rendered using Tableau JavaScript API.



**Figure 1: State-specific HPV vaccination ( $\geq 1$  dose) rates (Metro, Non-metro, and Overall).\***

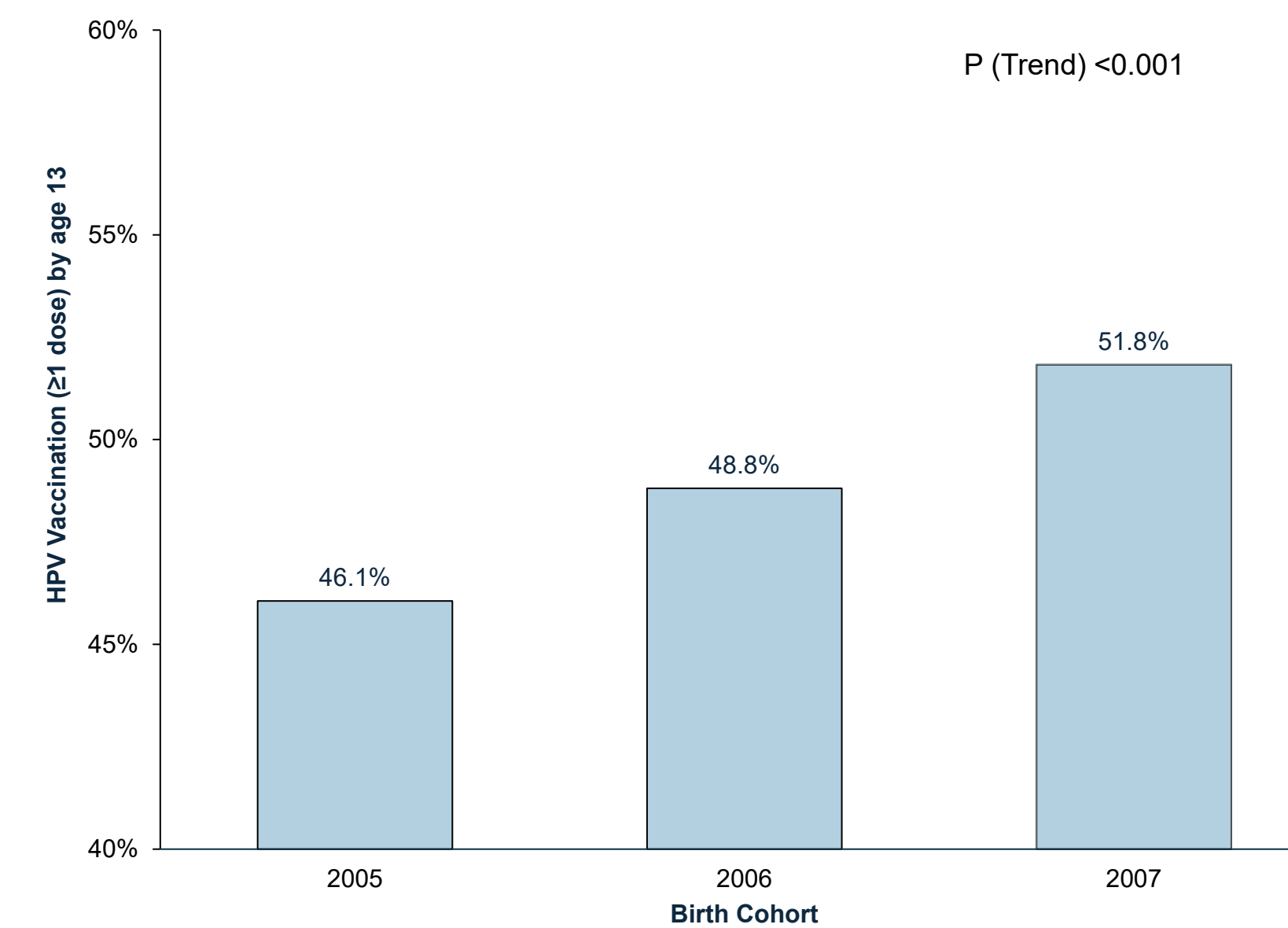


**Figure 2: County-level HPV vaccination ( $\geq 1$  dose) rates.\***



\*Excluding States with Universal Purchase (MA, AK, ID, ME, NH, NM, OR, RI, VT, WA) and Wisconsin state (bundled vaccine payments).

**Figure 3: HPV vaccination ( $\geq 1$  dose) by age 13 years in contemporary adolescent birth cohorts.\***



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## RESULTS

- Of a total of 2.8 million [2.4 million urban and 0.4 million rural] adolescents, over one-half (54.3%) of the 13-15-year-old adolescents in 2020 had received an HPV vaccine dose.
- State averages exceeded 70% for Maryland, Delaware, Nebraska, and Tennessee, but were <30% in Mississippi, North Dakota, New Jersey, and Oklahoma (**Figure 1**).
- Nationally, the rate was 8.8%-point higher for urban counties compared to rural counties ( $P < .001$ ).
- In nearly all states, the average of urban counties was higher than rural counties; urban-rural difference in Utah, Missouri, Arizona, Nevada, Montana, and Illinois exceeded 25%-points.
- County-level rates varied widely within states and ranged from 1.7% in Benson county (North Dakota) to 90.9% in Brooks county (Texas) (**Figure 2**).
- Increasing trend in HPV vaccination by age 13 years was observed in contemporary adolescent birth cohorts (2005, 2006, and 2007;  $P < 0.001$ ) (**Figure 3**).

## CONCLUSION

- The visualization tool was highly effective in illustrating county-level HPV vaccination data and revealed substantial urban-rural vaccination disparities across the nation.
- Interventions to mitigate these geographic disparities are urgently needed to prevent the morbidity and mortality burden of HPV-associated cancers.