

Vaccination,  
the best protection

# Free vaccines against hepatitis B and HPV



**For children in elementary  
school Grade 4**

This brochure contains vaccination  
consent form

## **PRODUCED BY**

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This brochure contains information on the hepatitis B and HPV vaccines offered free of charge to children in Grade 4. It also contains a **vaccination consent form**. You must complete this form and return it with your child's vaccination record, **whether or not you agree to have your child vaccinated**.

The vaccines for hepatitis B and HPV are recommended for all boys and girls in Grade 4.

The main goal of hepatitis B vaccination is to protect your child against hepatitis B and its complications. However, a combined vaccine is used in Grade 4 that protects against both hepatitis B and A.

The main goal of HPV vaccination is to prevent cancers caused by HPV and other HPV-related diseases such as condylomas. Since September 1, 2016, the HPV vaccine has also been offered to boys in Grade 4 so that both boys and girls are directly protected.

The vaccines will be administered by CLSC nurses at your child's school. On the day of vaccination, ask your child to bring along his / her vaccination record (if he / she hasn't already provided it) and to wear a short sleeve shirt. If your child is absent from school on vaccination day, you can still get him / her vaccinated for free by making an appointment at the CLSC.



# Vaccination

## Why should I get my child vaccinated in Grade 4?

HPV and hepatitis B and A vaccines are offered in Grade 4 for the following reasons:

- The immune system responds best to these two vaccines between the ages of 9 and 11, when children are in Grade 4.
- These vaccines are most effective when the person is not already infected.
- As a parent, school vaccinations save you the trouble of getting to a vaccination center.

## My child is getting both the hepatitis B and A and the HPV vaccine on the same day. Is this risky?

**No.** There are no added risks to your child in receiving these two vaccines on the same day. Administering multiple vaccines at one time is safe and commonly practiced around the world.

## How many doses of each vaccine will my child receive?

Your child will receive two doses of each vaccine—one in the fall and one in the spring— with an interval of six months between the doses. For children in Grade 4, two doses of each vaccine is enough. After age 18, people require three doses of each vaccine.

## What are the possible reactions to the HPV and hepatitis B and A vaccines?

The HPV and hepatitis B and A vaccines are safe. Most reactions they can cause are not serious and are short lived.

After receiving the **hepatitis B and A** vaccine, less than 50% of boys and girls may experience pain, swelling, or redness at the injection site. Less than 10% of children could experience fever, headaches, discomfort, fatigue, nausea, or vomiting.

After receiving the **HPV** vaccine, more than 50% of boys and girls may experience pain and less than 50% may experience swelling, or redness at the injection site. Less than 10% of children develop fever, or experience itchiness at the injection site.

There is a very low risk of severe allergic reaction to each vaccine. This type of reaction generally occurs a few minutes after receiving the vaccine, and the nurse can take appropriate action immediately.

According to many scientific studies, there is no link between hepatitis vaccines or HPV vaccine and chronic health problems such as multiple sclerosis and chronic fatigue syndrome.

## **What should I do if my child has a reaction?**

You can apply a cold, damp compress to the injection site to reduce pain, swelling, redness, or itchiness. To reduce fever, you can give your child acetaminophen or ibuprofen.

You can also consult a CLSC nurse, Info-Santé 8-1-1, or a doctor depending on the severity of the symptoms.

## **Since the vaccines are administered at the same time, are the possible reactions more severe?**

**No.** The possible reactions to the vaccines will occur at the same time, but they won't be more severe.

# Hepatitis

## What is hepatitis?

Hepatitis is a disease of the liver that can have serious complications. There are a number of types of hepatitis, but the most frequent, like hepatitis B and A, are caused by viruses.

## What is the difference between hepatitis A and hepatitis B?

Hepatitis B is not transmitted in the same way as hepatitis A.

Possible complications from hepatitis B are more severe than those from hepatitis A.

Hepatitis B—unlike hepatitis A—can make a person contagious for life.

## What are the main symptoms of hepatitis B and A?

**Hepatitis B and A may cause:**

- Fever
- Fatigue
- Loss of appetite
- Jaundice
- Headaches
- Stomach aches
- Vomiting
- Diarrhea

Some people do not experience any symptoms. They don't know that they have hepatitis and can infect others.

## How is hepatitis B transmitted?

Hepatitis B is transmitted through contact between a mucous membrane or wound and the blood, sperm, or vaginal secretions of **an infected person**. For example:

- During unprotected sexual relations (without a condom)
- When sharing needles or any other injection material among drug users
- During tattooing or body piercing sessions if the equipment used is not sterile
- By accidental contact with an injured person's blood

## How is hepatitis A transmitted?

Hepatitis A is transmitted when water or food contaminated by the stool of an infected person is consumed, e.g., when an infected person does not wash their hands after going to the washroom and then prepares food.

## What are the possible complications of hepatitis B?

Possible complications of hepatitis B are:

- Serious liver disease
- Chronic liver infection (the person may be contagious for life)
- Cirrhosis
- Liver cancer
- Death (1% of cases)

## What are the possible complications of hepatitis A?

Possible complications of hepatitis A are:

- Serious liver disease
- Fatigue lasting several weeks
- Death (0.1 – 0.3% of cases)



# Hepatitis B and A vaccine

## How can we protect ourselves against hepatitis B and A?

Vaccination is the best way to protect against hepatitis B and A.

## How long does protection last?

For people in good health, complete vaccination provides protection against hepatitis B and A for at least 20 years. Currently, nothing indicates that a booster dose is necessary later in life.



## Should my child get vaccinated in the following situations?

Situation	Vaccine	Reason
My child has already contracted hepatitis B	Yes	To benefit from protection against hepatitis A
My child has already contracted hepatitis A	Yes	To benefit from protection against hepatitis B
My child has already received hepatitis B vaccine	Yes	To benefit from protection against hepatitis A
My child has already received hepatitis A vaccine	Yes	To benefit from protection against hepatitis B
My child has already received hepatitis B and A combination vaccine	No	Your child is already protected against hepatitis B and A

There is no risk associated with receiving the hepatitis vaccine more than once. If you do not want your child to receive the combined vaccine, you can have him / her receive only the hepatitis B vaccine free of charge by making an appointment at a CLSC.

# HPVs

## What are HPVs?

HPVs (human papillomaviruses) are among the most common viruses in the world and are very numerous. There are more than 100 types. Some HPVs can cause condylomas (anal or genital warts) and precancerous lesions on the genitals or cervix as well as cancers of the cervix, vagina, vulva, anus, penis, mouth and throat.

## How are HPVs transmitted?

HPVs are transmitted during sexual relations through intimate skin-to-skin contact, with or without penetration.

## Who can contract an HPV?

Between 70% and 80% of men and women will be infected with HPV at least once in their lifetimes. Men and women can also be infected by more than one HPV at a time and more than once by the same HPV.

The risk of being infected by the same HPV could be higher for men. Indeed, men develop fewer antibodies than women after being infected by one or more HPVs.

## How can we protect ourselves against HPVs?

Condoms are the best way to protect yourself against sexually transmitted infections. However, condoms do not provide full protection against HPVs since they do not cover the skin around the genital. HPVs may be present on skin that is not covered by a condom. Therefore, getting vaccinated against HPV before the onset of sexual activities is the best way to protect yourself. The HPV vaccine does not provide protection against any other sexually transmitted infections. It is important to wear a condom even if one or both partners have been vaccinated against HPV.

## **What symptoms does a person infected with one or more HPVs exhibit?**

People with an HPV infection very often don't know they have it because they have no symptoms. This means that they can pass on the HPVs without knowing it.

Every year, thousands of men and women in Québec are diagnosed with condylomas. It is the most common sexually transmitted disease. Condylomas are not always visible to the naked eye. Treating condylomas may be painful and can require several visits to the doctor.

Precancerous lesions on the genitals and cervix can cause a variety of symptoms such as pain or bleeding, but they can also exist for several years without symptoms or signs.

# HPV vaccine

## What does the HPV vaccine consist of?

The vaccine administered in school protects against nine HPVs that cause certain cancers and condylomas.

The vaccine does not transmit the HPVs included in the vaccine. It stimulates the immune system to produce antibodies against these types of HPV.

HPVs included in the vaccine	Associated diseases
16, 18, 31, 33, 45, 52 and 58	90% of cervical cancers 80% of lesions in the cervix 65–70% of cancers of the vulva 70% of cancers of the vagina 85% of cancers of the anus 70% of cancers of the mouth and throat 50% of cancer of the penis
6 and 11	85% of condylomas

## Is the vaccine effective?

**Yes.** In more than 98% of cases, a person who is not already infected by one of the HPVs included in the vaccine, will produce antibodies against those HPVs. This is why vaccination against HPV is recommended before the onset of sexual activity.

The annual average number of cancer cases that could be avoided by getting vaccinated against HPVs is as follows:

Disease	Average number of cases per year in Québec from 2004 to 2007	
	Women	Men
Cervical cancer	281	–
Cancer of the vagina	15	–
Cancer of the vulva	64	–
Cancer of the anus	36	24
Cancer of the mouth and throat	68	198
Cancer of the penis	–	24

Disease	Number of cases that could be avoided by getting vaccinated against HPV	
	Women	Men
Cervical cancer	281	–
Cancer of the vagina	11	–
Cancer of the vulva	42	–
Cancer of the anus	30	20
Cancer of the mouth and throat	48	139
Cancer of the penis	–	12

A recent study conducted in Québec estimated that, between 2006 and 2012, HPV vaccination helped significantly reduce the number of cases of condylomas in women under the age of 20. Even though men were not vaccinated, the study also observed a reduction in the number of cases in men under the age of 20.

## **Does the HPV vaccine replace screening tests?**

**No.** The most common screening test to detect cervical cancer, known as the Pap test, or cervical smear, is currently the only test capable of detecting precancerous lesions.

It is recommend that women age 21 and over who are sexually active get screened for cervical cancer every two or three years. The screening test can detect precancerous cervical lesions early on so they can be treated as soon as possible.

There is currently no reliable test to detect precancerous lesions in men.

## **How long does protection last?**

The HPV vaccine will provide protection for many years. Studies are being conducted to evaluate long-term protection. If necessary, a booster dose will be given later to maintain protection.

# Consent for vaccination against HPV and hepatitis B and A



**For parents and guardians  
of students in Grade 4**

**Important – Form to complete**

## Steps:

- **Fill out all sections of the form using a pen**
- **Sign the form using a pen**
- **Detach the form from the leaflet and return it to the school along with your child vaccination record, whether or not you consent to vaccination**

# For use by parent or guardian

## Section A – Information on the Child

Last name :		
First name:		Sex: <input type="checkbox"/> F <input type="checkbox"/> M
Date of birth: year-month-day	Health insurance number: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Expiry date year-month
Address : <u>Number</u> <u>Street</u>		
City	Province	P.C.: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Your name: :		
Your relationship to the child: mother <input type="checkbox"/> father <input type="checkbox"/> guardian <input type="checkbox"/>		
Phone number where you can be reached:		

## Section B – Child's School

Name of school: _____
Class: _____

## Section C – Child's Medical and Vaccination Record

1. Has your child ever had a serious allergic reaction that required emergency medical care?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If so, state the cause: Vaccine <input type="checkbox"/> or other <input type="checkbox"/> Specify:		
2. Does your child have an immune system problem due to an illness (e.g., leukemia) or a medication he / she is taking (e.g., chemotherapy)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If your child has one of these conditions, he / she needs to receive an extra dose..		

Please provide your child's vaccination record whether or not you consent to vaccination. A CLSC nurse will verify and record this information, including the number of doses to be administered.



## Section D – Parent/Guardian Consent (Decisions)

As the parent or guardian of a child under the age of 14, you are in charge of vaccination decisions for this child.

Explanations to help you make an informed decision are provided in the leaflet attached to this form. If you would like additional information about vaccination programs, please contact your local CLSC or speak with the school nurse.

Please read the following statements and check the box for each to give or decline consent. You must also sign your name at the bottom of the section. By giving your consent, you agree to the full vaccination series, which includes two doses for each vaccine.

### Indicate whether or not your child may be vaccinated against HPV (human papillomavirus).

A single vaccine is administered at school that protects against nine types of HPV.

- I CONSENT to have my child vaccinated with this vaccine.
- I DECLINE to have my child vaccinated with this vaccine.
- DOES NOT APPLY because my child has already been vaccinated against HPV.

### Indicate whether or not your child may be vaccinated against hepatitis B.

A single combination vaccine is administered at school that protects against hepatitis A and B.

- I CONSENT to have my child vaccinated with the combination vaccine.
- I DECLINE to have my child vaccinated with the combination vaccine.
- DOES NOT APPLY because my child has already been vaccinated against or has already had hepatitis B.

## Your signature (use pen)

Signature

Date :

year-month-day

