

Increasing HPV vaccination coverage among pediatric, adolescent, and young adult (PAYA) cancer survivors: A multilevel intervention

Status: Recruiting

Eligibility Criteria

Sex: Male or Female

Age Group: Not specified

This study is NOT accepting healthy volunteers

Inclusion Criteria:

- current patient in the University of Minnesota CCSP clinic or the Children's Minnesota Long-Term Follow-up (LTFU) Program clinic - seen in the CCSP clinic who do not have a history of cancer but who have received immunosuppressive therapy or HSCT for treatment of a hematologic disorder - survivor of childhood cancer (diagnosed with cancer at age 25 years or younger) who is currently 18-26 years of age OR a caregiver of a survivor of childhood cancer who is currently 9-17 years of age - at least 6 months post-treatment (current treatment for graft-versus-host disease allowed) - no previous HPV vaccination or incomplete HPV vaccination - people who are unsure of their HPV vaccination status and are unable to find vaccination records (study staff will review)

Exclusion Criteria:

- previously completed HPV vaccination series - unable to read and write in English - pregnant or plans to become pregnant in the next year - currently receiving treatment for cancer or hematologic disorder or plan for treatment in next 12 months - immediate hypersensitivity reaction to any vaccine component (study staff will review)

Conditions & Interventions

Interventions:

Behavioral: GLAm app

Conditions:

Cancer, Children's Health

Keywords:

Clinics and Surgery Center (CSC), cancer survivors, HPV, vaccination

More Information

Description: The purpose of this research is to test the efficacy of different interventions to increase vaccination against human papillomavirus (HPV). Survivors of childhood, adolescent and young adult cancers are at increased risk of developing HPV-associated secondary cancers, but have lower HPV vaccination coverage compared to the general population. Interventions which are found to be successful in this study will be incorporated into future survivorship care to improve adherence to recommend preventive healthcare practices. All research procedures will be conducted remotely (e.g. online).

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