



KNOWLEDGE, ATTITUDE, AND PRACTICE RELATED TO HUMAN PAPILLOMAVIRUS (HPV) VACCINATION AMONG HEALTHCARE PROVIDERS IN A TERTIARY CARE HOSPITAL

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ABSTRACT

The progression of cervical cancer has been strongly associated with chronic HPV infection. Vaccination against HPV offers a key preventive measure, yet its uptake remains low, especially in developing countries. Healthcare providers are pivotal in influencing vaccine acceptance. This cross-sectional questionnaire-based study evaluated knowledge, attitude, and practices (KAP) regarding HPV vaccination among 183 healthcare providers in a tertiary care hospital. Although 90% knew HPV causes cervical cancer and 79% were aware of the vaccine's availability, only 56% knew the correct schedule. While 95% were willing to recommend the vaccine, only 60% actually did. Barriers included cost, time constraints, and patient reluctance. Findings indicate the need for better education, awareness programs, and institutional support to improve vaccine uptake and bridge the knowledge-practice gap.

KEYWORDS : HPV, vaccination, healthcare providers, knowledge, attitude, practice, cervical cancer, KAP study

INTRODUCTION

Cervical cancer, driven by persistent HPV infection, is a significant cause of morbidity and mortality in women. Although HPV vaccines—especially targeting high-risk types 16 and 18—offer effective prevention, uptake remains limited. Healthcare providers' awareness and proactive recommendation play a vital role in improving vaccine coverage. An evaluation was conducted to understand the awareness levels, perceptions, and vaccination-related behaviors of healthcare staff in a tertiary healthcare setting.

Methodology

Study Design & Setting:

A cross-sectional, questionnaire-based study conducted among 183 healthcare providers at a tertiary care hospital.

Inclusion Criteria:

Healthcare providers currently employed in the hospital.

Exclusion Criteria:

Non-healthcare staff and those unwilling to participate.

Data Collection:

A structured self-administered questionnaire was used to assess knowledge, attitudes, practices, and barriers. Demographic details, specialty, and education levels were also recorded.

Data Analysis:

Descriptive statistics and chi-square tests were used. Data were analyzed to identify correlations and significant trends.

RESULTS

Awareness:

- 90% knew HPV causes cervical cancer.
- The availability of HPV vaccination in India was recognized by 79% of the respondents.
- Only 56% knew the correct vaccination schedule.

Attitude:

- 84% believed the vaccine is safe; 80% believed it reduces cancer risk.
- 95% were willing to recommend it.

Practice:

- Only 60% actively recommended the vaccine.
- **Barriers:** cost (75%), patient reluctance (45%), time constraints (35%), lack of awareness (40%), and availability (25%).

Gender & Specialty Differences:

- Female providers showed higher awareness and confidence.
- Gynecologists and pediatricians recommended vaccination more frequently than other specialists.
- Urban and postgraduate providers were more likely to recommend the vaccine ($p < 0.05$).

DISCUSSION

While healthcare providers demonstrate high knowledge and a positive attitude, actual recommendation rates remain low. Practical barriers such as cost, time, and patient hesitation hinder implementation. Institutional policies, awareness campaigns, and training are necessary to improve vaccine uptake and bridge the KAP gap.

CONCLUSION

A disparity between awareness and routine vaccination behavior among healthcare professionals was evident in the study results. Despite favorable attitudes, low recommendation rates reflect operational challenges. Interventions like CME programs, subsidized vaccines, and patient counseling can enhance acceptance and compliance. A coordinated effort involving clinicians, administrators, and policymakers is essential.

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