

Stakeholder Collaborative Meeting on Strategic Prioritisation for HPV Vaccination in Lao PDR

Monday, 26 May 2025

08:00–12:00 ICT

Laos–Singapore Cooperation Centre, Vientiane Capital, Lao PDR

Executive summary

The stakeholder collaborative meeting was held in Vientiane Capital, Lao PDR, bringing together key representatives in Lao PDR and international researchers. The primary purpose of the meeting was to introduce the HPV-ADVISE mathematical model and to collaboratively identify strategic, policy-relevant research questions for HPV vaccination and cervical cancer screening in Lao PDR. Key presentations outlined the significant burden of HPV and cervical cancer in Lao PDR, the WHO's global elimination strategy, and the capabilities of the HPV-ADVISE model to inform policy through an integrated knowledge translation approach. The presentation also highlighted the model structure of HPV-ADVISE, its adaptability to local contexts using country-specific data, and its capacity to evaluate the impact, effectiveness, and cost-effectiveness of various intervention strategies. The breakout group discussions with Lao stakeholders identified priority research questions for the HPV-ADVISE model. These centred on (1) vaccination strategies, evaluating the potential switch from quadrivalent to bivalent HPV vaccines, assessing catch-up vaccination for older girls who have yet to be vaccinated, and strategies for ensuring equitable coverage and long-term program sustainability, especially in light of the Gavi transition and (2) screening strategies, exploring the expansion of cervical cancer screening, including the feasibility and impact of HPV self-collection methods, and addressing health system readiness. Stakeholders emphasised the need for modelling outputs to include cost-effectiveness analyses, budget impact assessments, efficiency, and projected timelines for cervical cancer elimination to guide national decision-making. The meeting concluded with a commitment to continued collaboration, including future workshops, to refine these research questions, address data requirements, and utilise the HPV-ADVISE model to generate actionable evidence for HPV prevention and control efforts in Lao PDR.

ສະຫຼຸບສັງລວມ

ກອງປະຊຸມຮ່ວມມືຂອງບັນດາພາກສ່ວນກ່ຽວຂ້ອງໄດ້ຈັດຂຶ້ນຢູ່ນະຄອນຫຼວງວຽງຈັນ, ສປປ ລາວ. ໂດຍມີຜູ້ຕາງໜ້າທີ່ສໍາຄັນ ແລະ ນັກຄົ້ນຄວ້າ ຢູ່ ສປປ ລາວ ແລະ ສາກົນເຂົ້າຮ່ວມ.

ຈຸດປະສົງຫຼັກຂອງກອງປະຊຸມແມ່ນເພື່ອນໍາສະເໜີແບບຈໍາລອງທາງຄະນິດສາດ HPV-ADVISE ແລະ ຮ່ວມມືກັນກໍານົດຄໍາຖາມຄົ້ນຄວ້າຍຸດທະສາດ, ນະໂຍບາຍທີ່ກ່ຽວຂ້ອງກັບການສັກຢາກັນພະຍາດ HPV ແລະ ການກວດມະເຮັງປາກມົດລູກໃນ ສປປ ລາວ. ບົດນໍາສະເໜີໄດ້ອະທິບາຍເຖິງສະພາບຄວາມສໍາຄັນຂອງພະຍາດ HPV ແລະ ມະເຮັງປາກມົດລູກໃນ ສປປ ລາວ, ຍຸດທະສາດການລົບລ້າງມະເຮັງປາກມົດລູກ ໃນທົ່ວໂລກຂອງ WHO, ແລະ ຄວາມສາມາດຂອງແບບຈໍາລອງ HPV-ADVISE ເພື່ອແຈ້ງຕໍ່ນະໂຍບາຍ ໂດຍຜ່ານວິທີການແບບຄວາມຮູ້ແບບປະສົມປະສານ. ການນໍາສະເໜີຍັງໄດ້ຍົກໃຫ້ເຫັນເຖິງໂຄງສ້າງແບບຈໍາລອງຂອງ HPV-ADVISE, ການປັບຕົວເຂົ້າກັບສະພາບການໃນທ້ອງຖິ່ນໂດຍນໍາໃຊ້ຂໍ້ມູນສະເພາະປະເທດ, ແລະ ຄວາມສາມາດໃນການປະເມີນຜົນກະທົບ, ປະສິດທິຜົນ ແລະ ຄວາມຄຸ້ມຄໍາຂອງຍຸດທະສາດການແລກແລງຕ່າງໆ. ການສົນທະນາກຸ່ມຍ່ອຍຂອງພາກສ່ວນກ່ຽວຂ້ອງຂອງລາວໄດ້ກໍານົດຄໍາຖາມຄົ້ນຄວ້າບຸລິມະສິດສໍາລັບແບບຈໍາລອງ HPV-ADVISE. ຊຶ່ງໄດ້ຊຸມໃສ່

(1) ຍຸດທະສາດການສັກຢາກັນພະຍາດ, ການປະເມີນການປ່ຽນແປງຈາກວັກຊີນ HPV ສີ່ສາຍພັນ (quadrivalent) ໄປເປັນ ສອງສາຍພັນ (bivalent),

ການປະເມີນການສັກຢາກັນພະຍາດສໍາລັບເດັກຍິງອາຍຸເກີນເກນທີ່ຍັງບໍ່ເຄີຍໄດ້ຮັບການສັກຢາມາກ່ອນ, ແລະ ຍຸດທະສາດສໍາລັບການຮັບປະກັນການຄຸ້ມຄອງທີ່ເທົ່າທຽມກັນ ແລະ ຄວາມຍືນຍົງຂອງໂຄງການໃນໄລຍະຍາວ, ໂດຍສະເພາະໃນແງ່ຂອງການຫັນປ່ຽນ Gavi ແລະ

(2) ຍຸດທະສາດການກວດກາຄັດກອງພະຍາດ, ສ້າງຫຼວດການຂະຫຍາຍການກວດຄັດກອງມະເຮັງປາກມົດລູກ, ລວມທັງຄວາມເປັນໄປໄດ້ ແລະ ຜົນກະທົບຂອງວິທີການເກັບຕົວຢ່າງເຊື້ອ HPV ດ້ວຍຕົວເອງ, ແລະ

ການກະກຽມຄວາມພ້ອມຂອງລະບົບສາທາລະນະສຸກ.

ບັນດາພາກສ່ວນກ່ຽວຂ້ອງໄດ້ເນັ້ນໜັກເຖິງຄວາມຈໍາເປັນຂອງຜົນໄດ້ຮັບຈາກແບບຈໍາລອງເພື່ອປະກອບເຂົ້າໃນການວິເຄາະ ຄວາມຄຸ້ມຄໍາ, ການປະເມີນຜົນກະທົບດ້ານງົບປະມານ, ປະສິດທິພາບ, ແລະ

ກໍານົດໄລຍະເວລາທີ່ຄາດຄະເນສໍາລັບການລົບລ້າງມະເຮັງປາກມົດລູກເພື່ອເປັນແນວທາງໃນການຕັດສິນໃຈແຫ່ງຊາດ.

ກອງປະຊຸມໄດ້ສະຫຼຸບຜົນຂອງການສົນທະນາທີ່ຈະສືບຕໍ່ການຮ່ວມມື, ລວມທັງການຈັດກອງປະຊຸມສໍາມະນາໃນອານາຄົດ,

ເພື່ອແກ້ໄຂຄໍາຖາມຄົ້ນຄວ້າເຫຼົ່ານີ້, ລະບຸຄວາມຕ້ອງການຂໍ້ມູນ, ແລະ ນໍາໃຊ້ແບບຈໍາລອງ HPV-ADVISE

ເພື່ອສ້າງຫຼັກຖານໃນການປະຕິບັດສໍາລັບຄວາມພະຍາຍາມໃນການປ້ອງກັນ ແລະ ຄວບຄຸມ HPV ຢູ່ ສປປ ລາວ.

Stakeholder Collaborative Meeting on Strategic Prioritisation for HPV Vaccination in Lao PDR



Figure 1. Participants of the Stakeholder Collaborative Meeting on Strategic Prioritisation for HPV Vaccination in Lao PDR, held on Monday, 26 May 2025, at the Laos-Singapore Cooperation Centre, Vientiane Capital, Lao PDR.

1. Background

A stakeholder collaborative meeting was convened to discuss strategic priorities for Human Papillomavirus (HPV) vaccination in Lao PDR. The primary aim was to introduce the HPV-ADVISE mathematical model and engage with national experts and decision-makers to co-design research relevant to Lao PDR's context. This initiative seeks to foster long-term partnerships and build local capacity in using modelling for evidence-informed policy decisions regarding HPV prevention and control.

Objectives of the meeting

The key objectives of the meeting were:

- To share and understand the HPV-ADVISE model, a tool for addressing HPV vaccination and cervical cancer screening policy questions in Lao PDR and beyond.
- To invite Lao PDR stakeholders to share policy questions and knowledge gaps, ensuring that modelling work is grounded in the national context.
- To build national capacity in the use of the HPV-ADVISE model.
- To strengthen the network and foster long-term partnerships between national experts and the modelling team.

Meeting participants

The meeting brought together key stakeholders, including:

- Representatives from the Ministry of Health, Lao PDR (Lao MOH), Lao Tropical and Public Health Institute (Lao TPHI), the Lao National Immunization Technical Advisory Group (Lao NITAG), and the University of Health Sciences in Lao PDR (UHS Laos).
- Researchers from the NUS Saw Swee Hock School of Public Health (NUS Public Health Lao PDR Programme).
- International modelling experts, including Professor Marc Brisson from Université Laval, Canada.
- Other relevant national and international experts and participants involved in public health and HPV prevention in Lao PDR. The full list is included in **Annex 1**.

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2. Key presentation on mathematical modelling to inform HPV policy decisions

By Professor Marc Brisson, Université Laval

Professor Brisson introduced the HPV-ADVISE model,¹ a transmission dynamic model of HPV infections and related diseases that includes herd immunity and 18 HPV types, allowing for analysis of various HPV vaccines (bivalent, quadrivalent, nonavalent).

Rationale for modelling. Mathematical models are essential tools for evaluating public health interventions, such as HPV vaccination and screening. Whilst clinical trials provide efficacy data, they often have limitations regarding duration, the number of options testable, generalizability to real-world effectiveness, and the ability to capture long-term population-level impacts, including herd effects. Models like HPV-ADVISE can overcome these limitations by projecting the long-term health outcomes (e.g., disease incidence, mortality) and economic consequences (e.g., cost-effectiveness, budget impact) of diverse strategies across entire populations, accounting for country-specific demographics, sexual behaviour, HPV prevalence, cancer burden, and health system characteristics. Being a transmission dynamic model, it inherently captures the indirect protection (herd effects) conferred to unvaccinated individuals as vaccination coverage increases in the population.

The details of the model components of HPV-ADVISE were shared, and this included the demography, sexual behaviour, natural history of disease, screening, vaccination, economics and its validation using post-vaccination data from countries like Canada and the United States of America. HPV-ADVISE is designed to be tailored to specific country contexts by calibrating it to local data on demography, sexual behaviour, HPV prevalence, cancer incidence, screening practices, and vaccination coverage. Whilst some data for Lao PDR is available from international databases (UN, DHS, IARC) and published literature, further local data and insights would be helpful for tailoring the model. If data is missing, parameters from similar countries can be considered, though country-specific data is preferred. The model has been extensively used and validated, with predictions aligning with post-vaccination surveillance data in countries like Canada and the U.S. It has informed recommendations for the CDC, UK, and WHO on HPV vaccination strategies, including dose schedules and elimination targets.

HPV-ADVISE can examine various **policy questions**, such as the impact of different vaccination strategies (target ages, gender, coverage, catch-up campaigns, vaccine types, number of doses) and screening algorithms, with outcomes including population-level impact, efficiency (e.g., Number Needed to Vaccinate [NNV]), cost, and cost-effectiveness. Examples from Thailand were shared, illustrating how the model assessed the current strategy and the potential switch to a 9-valent vaccine.

¹**HPV-ADVISE** (Agent-based Dynamic model for Vaccination and Screening Evaluation) is an individual-based, transmission dynamic model that simulates HPV infection, related diseases like cervical cancer, and the impact of interventions. It's designed to be adapted to specific country contexts by using local data, allowing policymakers to evaluate the population-level health and economic outcomes of various HPV vaccination and screening strategies.

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Figure 2. Professor Marc Brisson presented the integrated knowledge translation approach. The presentation highlighted the importance of involving local and international experts at all stages of the research to ensure mathematical models are understood, address relevant policy questions, and build local capacity.

The **integrated knowledge translation approach**, a collaborative methodology, was emphasised, involving local stakeholders in all aspects of the research to ensure that models are understood, trusted, and address relevant policy questions. This ensures that the model is not a "black box," that the questions addressed are policy-relevant for Lao PDR, that local data and context are appropriately incorporated, and that capacity for using and interpreting model-based evidence is built within the country. The process involves initial consultations (like the current meeting), kick-off workshops, regular follow-up meetings, and joint interpretation of results.

3. Key policy questions and priorities identified for Lao PDR

Summary of breakout group discussions

The breakout sessions with Lao stakeholders aimed to identify priority policy questions to be examined using the HPV-ADVISE model and to determine the outcomes of interest for decision-making. The key questions guiding the discussion: (1) What questions should be examined to help support decisions? and (2) What outcomes should be used for prioritization?



Figure 3. Participants engaged in a breakout group discussion or feedback session.

The following key themes and specific questions emerged:

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Vaccination strategies and sustainability

- **HPV vaccine choice (2v vs. 4v)**

A primary concern was the potential switch from the current quadrivalent (4v) HPV vaccine to a bivalent (2v) vaccine, with a focus on cost-effectiveness and affordability, particularly in light of the Gavi transition.

Modelling request: Comparative analysis of 2v vs 4v vaccines regarding cost-effectiveness, budget impact, and identification of sustainable price points. Consideration of the 4v vaccine's impact on genital warts (HPV 6 & 11) is also important.

Should Lao PDR switch from the current quadrivalent (4v) HPV vaccine to a bivalent (2v) HPV vaccine, considering cost-effectiveness, budget impact, and long-term sustainability, especially in light of the Gavi transition and the need for national procurement?

- **Catch-up vaccinations**

Modelling the impact and cost-effectiveness of extending vaccination to older girls and females beyond the current target.

What is the potential impact and cost-effectiveness of implementing catch-up HPV vaccination programs for older girls and females who are beyond the current target age for routine vaccination?

- **Status quo and elimination timeline**

Understanding future cervical cancer trends if current programmes remain unchanged (i.e., the counterfactual) and projecting the timeline for cervical cancer elimination in Lao PDR.

What are the projected future patterns of cervical cancer (prevalence, incidence) if no changes are made to the current HPV vaccination program in Lao PDR?

Under the current vaccination strategy, when can Lao PDR expect to achieve cervical cancer elimination targets?

- **Equity in vaccination coverage**

Ensuring equitable vaccine coverage across all regions, especially rural/remote areas and out-of-school girls.

How can equitable HPV vaccine coverage be ensured across all regions of Lao PDR, including strategies to reach rural, remote, and out-of-school girls, and to prevent widening geographic disparities?

- **Mode of vaccine delivery**

Investigating the implications of school-based versus facility-based vaccine delivery.

What are the implications and comparative effectiveness of different vaccine delivery modes (e.g., school-based vs. facility-based)?

Screening strategies

- **Expansion of screening**

Modelling the impact of expanding screening programmes, particularly for older women.

What would be the population-level health and economic impact of expanding cervical cancer screening to more individuals, particularly older women?

- **Self-collection for HPV screening**

Interest in exploring self-HPV screening (e.g., every five years for ages 20-25) and addressing concerns about underreporting of cases.

- **System readiness**

Addressing concerns about health system capacity for expanded screening (human resources, lab capacity, reporting systems, financial support).

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Figure 4. Dr Phonethipsavanh Nounthong, secretariat of the Lao NITAG, presenting key discussion points, from the breakout group session. Also in the photo is Dr Khampe Phongsavath who the Chair of the Lao NITAG and Dr Chansay Pathammavong who was previously with the national immunisation programme at Lao MOH.

Desired outcomes from modelling

- **Economic evaluations**
Strong emphasis on cost-effectiveness analysis and budget impact analysis for all proposed strategies.
- **Efficiency metrics**
Number Needed to Vaccinate (NNV) to prevent one cervical cancer case.
- **Health impact**
Population-level impact on HPV infection and cancer incidence, and time to elimination.
- **Vaccine pricing**
Identification of threshold prices for sustainable vaccine procurement.



Figure 5. Dr Phimpha sharing her perspectives on the interventions to be evaluated.

Implementation considerations and data

- **Gavi transition**
The financial implications of the phasing out of Gavi's support is a critical factor influencing vaccine choice and programme sustainability.
- **Data availability and quality**
Acknowledgment of challenges with vaccination coverage data (denominator issues, reporting discrepancies from sources like EPI surveys, EIR) and the need for robust local data for the model.
- **Logistics and human resource**
Addressing challenges in supply chains, human resource deployment, and community engagement.

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Discussion on data availability and quality

A significant portion of the discussion, particularly following the presentation and during the Q&A session, revolved around data. It was noted that while HPV-ADVISE is flexible, its accuracy depends on the quality of input data. For Lao PDR, this includes:

- **Vaccination coverage**
Challenges in accurately determining coverage were highlighted, with discrepancies between official reports (e.g., WHO dashboard showing around 68%), data from EPI surveys, and the Electronic Immunization Register (EIR). Issues with the denominator, inconsistent reporting, and increased school dropout rates post-COVID-19 affecting school-based programmes were also discussed.
- **Sexual behaviour and HPV prevalence**
While some data exists (e.g., DHS, local studies), comprehensive, up-to-date national data is needed. Note for the research team to link up with the national HIV programme and researchers working on HIV in Lao PDR.
- **Cancer incidence and screening data**
Reliance on the Global Cancer Observatory for cancer incidence, with a need for strengthening local cancer registration and data on current (even if limited) screening practices. The modelling team will work with Lao stakeholders to identify, gather, and analyse the best available local data, supplementing with regional data or parameters from similar countries where necessary while clearly acknowledging data limitations.

Additional notes on the data requirements and policy questions that modelling can address are summarised in **Annex 2**.

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4. Next steps

The meeting set the stage for ongoing collaboration.

- a) The modelling team will synthesise the policy questions and priorities identified during the workshop (as presented in this report).
- b) Further discussions will be held to refine these questions and to explore data availability and parameterisation for the Lao PDR context. A follow-up virtual meeting will be scheduled by Q3 2025 to discuss data availability in detail.
- c) A future in-person knowledge translation workshop is planned, tentatively in October 2025. This workshop will provide a more in-depth understanding of the HPV-ADVISE model and *potentially* review preliminary modelling results tailored to Lao PDR.
- d) Continued engagement with local experts.

Action	Key objectives/notes	Responsible parties (tentative)	Timeline
Formalise communication channels and focal points	Establish official communication protocols and nominate key focal persons from each institution to streamline interaction and data sharing	Lao NITAG, NUS, Université Laval, WHO Lao PDR	June–July 2025
Detailed review and prioritisation of policy questions	Refine and formally prioritise the list of policy questions identified during the 26th May workshop to guide initial modelling scenarios	Lao NITAG, Université Laval, NUS, WHO Lao PDR	July 2025
Comprehensive data identification, collection, and gap analysis	Systematically identify, collate, and assess quality of available Lao-specific data for model parameters (demographics, sexual behaviour, HPV epidemiology, cancer stats, vaccination/screening data, costs).	MOH Departments, Lao NITAG, Lao THPI, Lao Statistics Bureau, Université Laval, NUS, WHO Lao PDR	June–October 2025
Technical follow-up meeting (Virtual)	Discuss specific data parameters in detail, address technical queries regarding data extraction/formatting, and refine approaches for handling data gaps.	Modelling team (Université Laval, NUS), Lao THPI, Lao NITAG, Key technical staff	August 2025
Preparation for in-depth modelling workshop	Develop preliminary model structures based on available data; prepare materials and agenda for the Kick-off Meeting & Modelling Workshop	Modelling team (Université Laval, NUS), Lao THPI, Lao NITAG	September–October 2025
Kick-off meeting and in-depth modelling workshop (in-person, Vientiane)	Conduct a longer workshop to provide a deeper understanding of the HPV-ADVISE model; finalise initial policy scenarios and parameters; and discuss data limitations and assumptions transparently	All Stakeholders	October 2025 (after IPVS 2025)

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Acknowledgements

Sincere gratitude is extended to all participants for their valuable contributions. Special thanks to the Lao TPHI, Lao NITAG, UHS Laos, Lao MOH, the NUS Public Health Lao Programme, Université Laval, the Canadian Institutes of Health Research for their support of the HPV-ADVISE project, and the Singapore Embassy and Singapore Cooperation Centre for hosting the event.

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Annex 1

List of participants for the Stakeholder Collaborative Meeting on Strategic Prioritization for HPV Vaccination in Lao PDR

No.	Name	Affiliations
1	Dr Khampheng Phongluxa	Lao Tropical and Public Health Institute (Lao TPHI) Ministry of Health Lao PDR (Lao MOH)
2	Professor Mayfong Mayxay	University of Health Sciences, Lao PDR (UHS Laos), Lao MOH Lao PDR National Immunisation Technical Advisory Group (Lao NITAG)
3	Dr Khampe Phongsavath	Lao NITAG
4	Dr Phonethipsavanh Nouanthong	Lao NITAG
5	Dr Latsamy Siengsounthone	Lao TPHI, Lao NITAG
6	Associate Professor Vanphanom Sychareun	UHS Laos, Lao NITAG
7	Dr Phimpha Paboriboune	Lao NITAG, Center Infectiology Lao-Christophe Merieux
8	Dr Bounhome Soukkaphone	Lao TPHI, Lao MOH
9	Dr Kethmany Rathsavong	Lao TPHI, Lao MOH
10	Associate Professor Kongmany Chaleunvong	UHS Lao, Lao MOH
11	Dr Thitsamay Luangxay	Cancer Center, Lao MOH
12	Thepmala Sadettan	WHO Lao PDR
13	Dr Chansay Pathammavong	WHO Lao PDR
14	Professor Marc Brisson	Université Laval
15	Dr Kiesha Prem	NUS Lao Programme
16	Dr Viengsamay Sengchaleun	NUS Lao Programme
17	Ms Sonemany Keolangsy	NUS Lao Programme
18	Dr Nirada Vannavong	NUS Lao Programme
19	Ms Dorothy Boyle	NUS
20	Ms Phornaphat Chertchinnapa	Research Assistant at HITAP Foundation
21	Dr Phouthapanya Xongmixay	Lao TPHI

Stakeholder Collaborative Meeting on Strategic Prioritisation for HPV Vaccination in Lao PDR

Annex 2

Data requirements and adaptation for Lao PDR

Adapting HPV-ADVISE for Lao PDR requires comprehensive local data, including:

- Demographic statistics.
- Sexual behaviour patterns (e.g., from DHS surveys and local studies).
- HPV prevalence and genotype distribution.
- Incidence and mortality data for cervical and other HPV-related cancers (e.g., from Globocan, local cancer registries if available).
- Current HPV vaccination program details (coverage by age/region, vaccine type).
- Cervical screening practices (protocols, coverage, test performance).
- Healthcare costs and quality of life data.

Perfect data is rare, and for parameters where Lao-specific data may be limited, the team can explore using data from similar countries or regional estimates, with all assumptions clearly documented and discussed with local experts. The initial step involves a thorough review of all available local data.

Policy questions HPV-ADVISE can address for Lao PDR

The model can be used to examine a wide range of policy questions relevant to Lao PDR, such as:

- The long-term impact and cost-effectiveness of the current HPV vaccination program for girls.
- The potential benefits and costs of increasing vaccination coverage or expanding to include boys.
- The optimal age for vaccination and the value of catch-up campaigns for older cohorts.
- Comparative effectiveness and cost-effectiveness of different vaccine types (e.g., bivalent vs. quadrivalent) and dosing schedules (e.g., one-dose vs. two-dose).
- The impact of different cervical cancer screening strategies (e.g., varying tests, frequencies, target ages) in conjunction with vaccination.
- Projections towards achieving cervical cancer elimination targets and the timelines involved. The outcomes generated can include population-level health impacts (e.g., cases averted, deaths prevented), efficiency metrics (e.g., NNV), and economic evaluations (e.g., cost-effectiveness, budget impact).

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Annex 3

Programme Brief for the Stakeholder Collaborative Meeting on Strategic Prioritization for HPV Vaccination in Lao PDR

Monday, 26 May 2025, 08:00 to 12:00

Laos - Singapore Cooperation Centre, Vientiane Capital, Lao PDR

Time (ICT)	Description	Speaker/Moderator
Welcome		
08:00	Coffee and registration	NUS Public Health Lao PDR Programme
	Welcome Address Dr Kiesha Prem, Lead of NUS Public Health Lao PDR Programme, NUS Saw Swee Hock School of Public Health	
	Opening remarks Dr Khampheng Phongluxa, Director-General of Lao Tropical and Public Health Institute, MOH Lao PDR	
Introduction to modelling HPV vaccination		
9:00	Overview of the meeting and introduction of the HPV vaccination programmes	Dr Kiesha Prem
	Mathematical Modelling to Inform HPV Policy Decisions <ul style="list-style-type: none"> What is the HPV-ADVISE model? What data does it require? What questions can it explore? 	Professor Marc Brisson Department of Social and Preventive Medicine, Faculty of Medicine Université Laval
	Questions and answers	
Breakout discussion		
09:50	Understanding priorities in Lao PDR <ol style="list-style-type: none"> What policy questions should be examined? What outcomes to use? <i>Each group identifies priority policy questions to examine for Lao PDR and the outcomes that would be of interest for policy decisions.</i>	All participants
10:30	Break	
10:45	Group reports and facilitated discussion <ul style="list-style-type: none"> Group representatives present key insights Open floor discussion 	Facilitators and group representatives
Summary and closing		
11:30	Summary of the session	
11:50	Closing remarks	Dr Khampheng Phongluxa, Director-General of Lao Tropical and Public Health Institute, MOH Lao PDR
12:00	End of the meeting	