Question for written answer E-007573/2013 to the Commission Rule 117 Struan Stevenson (ECR)

Subject: Human papilloma virus vaccinations in Japan

Japan's Ministry of Health, Labour and Welfare recently told local governments to suspend their previous recommendation for the human papilloma virus (HPV) vaccine to be administered to 12-16-year-old girls. While girls can still receive the vaccination for free, medical institutions in Japan are now obliged to inform them that the ministry does not recommend it.

A special task force reportedly concluded that it could not rule out a connection between the HPV vaccine and adverse effects. Yet after examining 43 cases of widespread pain after HPV vaccinations, a direct cause-and-effect relationship could be neither established nor ruled out.

In 2007, the World Health Organisation's Global Advisory Committee reviewed published and nonpublished data on the safety of both HPV vaccines. The reviewed data covered local and systemic events in the short term, and long-term events up to six years later, including pregnancy events. The Committee concluded that the current evidence on the safety of HPV vaccines is reassuring.

Furthermore, the expert group set up by the European Centre for Disease Prevention and Control has looked into introducing HPV vaccination in EU countries. The expert group's 2008 report states that while the HPV vaccine's adverse effects occurred in about 80 % of study participants, cervical cancer is the second most common cancer – after breast cancer – affecting women aged 15 to 44 in the EU, and that the HPV vaccine offers a new, complementary tool to improve the control of cervical cancer.

Is the Commission aware of this suspension in Japan? What implications is this likely to have for the EU?