

Please be sure to read the enclosed leaflet from the Ministry of Health, Labor and Welfare before getting vaccinated.

2026

HPV Vaccination Notice



This notice is being sent to the girls who are eligible for Human Papillomavirus(HPV) vaccination by public expense and their parents/guardians residing in Minato City.

We would like to provide you with the necessary information to ensure that those who wish to be vaccinated will receive their vaccination without delay.



Inquiries

Public Health and Disease Prevention Section, Minato Public Health Center

 03-6400-0094  FAX:03-3455-4460



Information on HPV vaccination

1 Eligibility

As of the date of the vaccination, girls from the 6th grade of the elementary school to the 1st grade of the high school who are registered as residents in Minato City (For the 2026 school year, those born between April 2, 2010 and April 1, 2015 are eligible for the vaccine.)

2 Period

From the first day (April 1) of the school year for the 6th grade of the elementary school to the last day (March 31) of the school year for first grade of high school.

Please check the date printed in the upper right-hand corner of the enclosed Pre-vaccination check sheet (Yoshin-hyo) for the expiration date for eligible persons.

3 Type and Schedule

As of April 1, 2026, the only publicly funded vaccine available (free of charge) is the 9-valent vaccine (Silgard® 9).

The 2-valent vaccine (Cervarix®) and the 4-valent vaccine (Gardasil®) are not covered by public funding.

For those under 15 years of age, 2 doses are administered, while 3 doses are required for those aged 15 and older, according to the schedule below. It is recommended that all doses be completed within one year from the first dose.

| | | |
|---------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Vaccine name | 9-valent vaccine (Silgard®9) | |
| Corresponding virus type | HPV 6, 11, 16, 18, 31, 33, 45, 52, and 58 | |
| Number of vaccinations (administration schedule) | A child aged under 15 years old at the time of initiating the initial vaccine 2 doses (Intramuscular injection) | A child aged 15 years old and older at the time of initiating the initial vaccine 3 doses (Intramuscular injection) |
| Vaccination schedule | <p>Interval of 5 months or more*1</p> <p>1st dose → 2nd dose</p> <p>Standard → 0 months → 6 months</p> <p>*1: If you get 2nd vaccine at intervals of less than 5 months, you need 3rd vaccine.</p> | <p>Interval of 1 month or more</p> <p>Interval of 3 months or more from the 2nd vaccine</p> <p>1st dose → 2nd dose → 3rd dose</p> <p>Standard → 0 months → 2 months → 6 months</p> |
| Manufacturer & distributor | MSD K.K. | |

“An interval of x months or more” means that the next dose may be administered on or after the same date X months after the previous dose.

● Regarding the Interchangeability of the 2-valent, 4-valent, and 9-valent HPV Vaccines

Although HPV vaccines are generally recommended to be administered using the same vaccine product throughout the series, the safety, immunogenicity, and efficacy of interchangeability between the 2-valent or 4-valent vaccine and the 9-valent vaccine have been clarified to some extent. For individuals who have previously received the 2-valent or 4-valent vaccine but have not yet completed the series, please consult thoroughly with your doctor and receive the remaining doses accordingly. If vaccination was initiated with the 2-valent or 4-valent vaccine and later switched to the 9-valent vaccine to complete the series, the total number of doses required is 3, regardless of the age at which vaccination was started : The vaccination schedule requires an interval of at least one month between the first and second doses (the standard interval is 2 months), and at least three months between the second and third doses (the standard interval is 4 months).

4 Cost

Free of charge (publicly funded).

However, you will be charged a fee if the routine vaccination program requirements are not met—for example, if the validity period stated on the Pre-vaccination check sheet (Yoshin-hyo) has expired; if you receive the vaccination at a non-designated medical facility; if you receive more doses than required; if a vaccine other than the 9-valent vaccine is used; or if you receive the vaccination without using Minato City's Pre-vaccination check sheet (Yoshin-hyo).

5 What to Bring

In principle, children under the age of 16 need to be accompanied by their guardian when receiving vaccinations. It is strongly recommended that a guardian accompanies the child especially for the first vaccination so that they can receive an explanation from the doctor who administers the vaccine.

If accompanied by a parent/guardian

- (1) HPV Vaccine Pre-vaccination check sheet(Yoshin-hyo)
(The vaccination will go smoothly if you fill in the items that can be completed in advance.)
- (2) Record of vaccinations of the person receiving the HPV vaccination (e.g., maternal and child/parent and child health handbook records.)
- (3) Other items to present at the clinic/hospital reception desk as needed (e.g., My Number Card, medical benefit card/certificate, and patient/clinic card).

If not accompanied by a parent/guardian

• Accompanied by someone other than a parent/guardian

If a parent/guardian is unable to accompany the vaccination recipient due to special circumstances, another person may accompany him/her with an authorization letter(Inin-jo) from the parent/guardian. The accompanying person must be someone who is familiar with the recipient's usual health condition. The parent/guardian must complete the authorization letter(Inin-jo) before the vaccination appointment, and the accompanying person must submit it at the clinic/hospital together with items (1)–(3) above. The authorization letter form(Inin-jo) is available on Minato City website(in Japanese).

• If a person aged 13–15 will be vaccinated without a parent/guardian present

They may receive the vaccination on their own with parental/guardian consent. Before the vaccination appointment/day, the parent/guardian should read this notice and sign the parent/guardian signature section of the Pre-vaccination check sheet (1). The vaccination recipient must bring the signed Pre-vaccination check sheet and visit the clinic/hospital.

• Persons aged 16 or older

They may receive the vaccination on their own with their own consent only. The vaccination recipient must sign the signature section of the Pre-vaccination check sheet (1).

[Minato City Website](#)



6 Vaccination Locations

See medical institutions listed in "HOSPITALS AND CLINICS FOR HPV VACCINATION" on website

A reservation may be necessary, so please check with your healthcare provider in advance. For the list of medical institutions in Minato City, please refer to Minato City website (scan 2D code).

[Medical institution List-Minato City Website](#)



You can also get vaccinated at the designated medical institutions in Tokyo's 23 wards(cities). For the medical institution you want to visit, check the website of the city office where the institution is located to see whether it is a designated medical institution. If you will receive the vaccination outside Tokyo's 23 wards(cities), you must complete the necessary procedures for a "Vaccination Authorization Request" (in Japanese) before your vaccination. For details, please visit the Minato City website (search for "Minato City jisshi irai-sho").

7 Vaccination Precautions

You cannot receive the vaccine if:

- (1) You have a fever (generally 37.5°C or higher).
- (2) You have a serious acute illness.
- (3) If you have had anaphylaxis-like symptoms and other hypersensitivity caused by the components of the HPV vaccination.
- (4) A doctor determines that you should not receive the vaccine.

Vaccination requires particularly careful consideration—consult a doctor before vaccination if:

- (1) You have experienced unexplained persistent pain (e.g., throbbing or tingling), such as after an injury.
- (2) You have previously experienced severe pain or numbness in arms or legs after vaccination (including other vaccines).

After vaccination:

- Sit down and watch for about 30 minutes after receiving the vaccine.
- Avoid strenuous exercise on the day of vaccination.
- If you develop any symptoms that concern you, contact a doctor, a parent/guardian or another adult nearby, or Minato City immediately.

8 Adverse Reactions (Possible Side Effects After Vaccination), etc.

Main adverse reactions that may occur after vaccination

| Frequency of occurrence | Vaccine:Silgard®9 |
|-------------------------|-----------------------------------------------------------------------------------------------|
| 50% or more | pain |
| Less than 10% to 50% | swelling, erythema, headache |
| Less than 1% to 10% | dizziness, nausea ,diarrhea, pruritus, fever, fatigue, Internal bleeding, etc. |
| Less than 1% | vomiting, abdominal pain, muscle or joint pain, bleeding, hematoma, malaise, induration, etc. |
| Frequency unknown | hypoesthesia, fainting, extremity pain, etc. |

Adapted from the package insert of Silgard® 9 (3rd edition)

Severe adverse reactions that rarely occur after vaccination

| Report frequency* | Name of disease | Main symptoms |
|-------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| Once in approximately 960 thousand vaccinations | Anaphylaxis | A severe allergy that causes dyspnea, urticaria, etc. |
| Once in about 4.3 million vaccinations | Guillain-Barre syndrome | A disease of the peripheral nerves that is characterized by weakness in the hands and feet |
| Once in about 4.3 million vaccinations | Acute disseminated encephalomyelitis (ADEM) | A neurological disease, such as in the brain, that causes headache, vomiting, and decreased consciousness |
| Once in about 8.6 million vaccinations | Complex regional pain syndrome (CRPS) | "A disease of unknown origin that causes chronic pain after injury." |

*The frequency of reports identified by the Ministry of Health, Labour and Welfare up to March 2013 in which a relationship with vaccines could not be ruled out."

Consultation

If you experience persistent pain of unknown cause after vaccination (e.g., muscle pain, joint pain, skin pain, or headache), or symptoms such as numbness or weakness, please consider seeking advice not only from your regular doctor or the doctor who administered the vaccine, but also from the following dedicated consultation service(s) or Minato City.

Dedicated consultation services for those who have symptoms after receiving a HPV vaccine



Cooperative medical institutions for the treatment of symptoms that occur after receiving a HPV vaccine



Relief System for Health Injuries due to Vaccination



9 Others

Cervical cancer screening

Regular cervical cancer examinations are also important for the prevention of cervical cancer. There are some types of HPV that cannot be immunized against. As such, you should also have a cervical cancer screening once every 2years after age 20, whether or not you have been vaccinated.

Please be sure to read the enclosed leaflet from the Ministry of Health, Labor and Welfare before getting vaccinated.