Hepatitis Vaccines

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Chair, Hepatitis Vaccines Work Group

Advisory Committee on Immunization Practices
June 27, 2019
ACIP Hepatitis WG Terms of Reference

- **Hepatitis A**
  - Update hepatitis A recommendations (2006)
    - Prevention of hepatitis A through active or passive immunization: recommendations of the Advisory Committee on Immunization Practices (ACIP), MMWR, May 19, 2006, Vol 55, #RR-07
Current Recommendations Published Since 2006

- Updated Recommendations from the ACIP for Use of Hepatitis A Vaccine in Close Contacts of Newly Arriving International Adoptees, MMWR, September 18, 2009, Vol 58, #36

- Updated Recommendations from the ACIP for Use of Hepatitis A Vaccine for Postexposure Prophylaxis and for Preexposure Prophylaxis for International Travel, MMWR, November 2, 2018, Vol 67, #43

Work Group Considerations

- **May 2014 - June 2019**
  - Thirty-one meetings focused on hepatitis A vaccine topics

- **March 2019 - June 2019**
  - Five meetings focused on the proposed updated hepatitis A vaccine statement
Today’s Session – I

- Hepatitis A vaccines – 3 votes
  
  - (1) Hepatitis A catch-up vaccination
    
    - Hepatitis A vaccines have demonstrated safety and efficacy for over 20 years
    - Nearly the entire cohort of children aged 13-17 years assessed in 2017, living in states where vaccination was recommended in 2006, were not yet subject to the routine recommendation for childhood vaccination
      
      - Yet as of 2017, more than 3 out of 4 teens had initiated the series and over 2/3 were fully vaccinated
    
    - 40% of states have a daycare or school mandate, or both, for HepA vaccination in 2018, increasing over time from hepatitis A vaccine introduction
    - 27 of 30 state immunization information systems (IIS) already routinely forecast hepatitis A vaccine as being due for an 18 year old who has never been vaccinated (American Immunization Registry Association)
Hepatitis A vaccines – 3 votes

(2) HIV as a risk group for increased HAV infection severity

- When persons with HIV (PWHIV) are co-infected with hepatitis A virus (HAV) infection, they experience higher peak HAV viral loads and a prolonged duration of hepatitis A viremia than persons without HIV infection.
- PWHIV usually respond to hepatitis A vaccination, particularly when the CD4 cell count is >200 cells/mm³ and the PWHIV has a low HIV RNA viral load.
- HIV co-infection outbreak data is available for a limited number of outbreak associated states, indicating excess risk of PWHIV to HAV infection in those states.
- Data from the medical monitoring project also indicates substantial HAV infection among PWHIV.

(3) Full updated hepatitis A vaccine statement
Next Steps

- Continue deliberations on adult hepatitis B vaccination topics
Hepatitis Work Group Members

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- Sharon Frey
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- NCIRD/Immunization Services Division

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- American Immunization Registry Association

- Food and Drug Administration

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