

## ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES

### VACCINES FOR CHILDREN PROGRAM

#### VACCINES TO PREVENT HEPATITIS A

*The purpose of this resolution is to add recommendations for infants 6-11 months of age traveling to countries outside the United State for which protection against hepatitis A is recommended and to revise the language regarding post-exposure prophylaxis to match the most current ACIP recommendations.*

VFC resolution 06/07-1 is repealed and replaced by the following:

#### **Eligible Groups**

*Infants 6-11 months of age traveling to countries outside the United States for which protection against hepatitis A is recommended*

*All children aged 1 through 18 years of age*

#### **Recommended Vaccination Schedule**

All children should receive hepatitis A vaccine at 1 year of age (i.e., 12-23 months). Vaccination should be completed according to the licensed schedules below. Children who are not vaccinated by 2 years of age can be vaccinated at subsequent visits. Catch-up vaccination of unvaccinated children ~~should~~ **can\*** be administered to children aged 2 through 18 years.

<b>Vaccine<sup>1</sup></b>	<b>Age</b>	<b># of Doses</b>	<b>Schedule<sup>2</sup></b>
Havrix (pediatric formulation)	1 year	2 doses	0, 6-12 months
Vaqta (pediatric formulation)	1 year	2 doses	0, 6-18 months
Twinrix (adult formulation) <sup>3</sup>	18 years	3 doses	0, 1, 6 months

- <sup>1.</sup> Use of brand names is not meant to preclude the use of other hepatitis A vaccines where appropriate.
- <sup>2.</sup> 0 months represents timing of the initial dose; subsequent numbers represent months after the initial dose.
- <sup>3.</sup> Only persons 18 years of age are eligible to receive Twinrix through the VFC program.

\*In the VFC resolution language put forward for ACIP’s vote in February 2018, the word “can” was unintentionally changed to “should” in the statement about catch up vaccination. The intention for catch up language in the resolution remains “can be administered” despite this error. The resolution will be presented at an upcoming ACIP meeting for a technical correction.

## Recommended Intervals

Vaccine <sup>1</sup>	Min Age (Dose 1)	Minimum interval between doses		
		Dose 1 to 2	Dose 2 to 3	Dose 1 to 3
Havrix (pediatric formulation)	<b>12 months</b>	<b>6 months</b>	<b>n/a</b>	<b>n/a</b>
Vaqta (pediatric formulation)	<b>12 months</b>	<b>6 months</b>	<b>n/a</b>	<b>n/a</b>
Twinrix (adult formulation)	<b>18 years</b>	<b>1 month</b>	<b>5 months</b>	<b>6 months</b>

1. Use of brand names is not meant to preclude the use of other hepatitis A vaccines where appropriate.

### Recommendation for Use of Hepatitis A Vaccine for Post-Exposure Prophylaxis

Healthy persons aged 12 months through 18 years, who have been exposed to HAV within the prior 14 days and have not received hepatitis A vaccine previously should receive a single dose of hepatitis A vaccine as soon as possible. The hepatitis A vaccine series can be completed with the second dose at least 6 months after the first dose.

### Selected Special Categories:

A single dose of hepatitis A vaccine should be administered to infants age 6-11 months of age traveling to counties outside the United States for which protection against hepatitis A is recommended on CDC's Traveler's health website (<https://wwwnc.cdc.gov/travel/>). Infants should then receive the full 2-dose hepatitis A vaccine series at  $\geq 12$  months of age as recommended.

Persons administered IG for whom hepatitis A vaccine is also recommended should receive a dose of vaccine simultaneously with IG. For persons who receive vaccine, the second dose should be administered according to the licensed schedule to complete the series. The efficacy of IG or vaccine when administered  $>2$  weeks after exposure has not been established.

### Recommended Dosage

Refer to product package inserts.

## **Contraindications and Precautions**

*The following conditions are contraindications to the administration of hepatitis A vaccine:*

**1. Allergy to vaccine components**

*Anaphylactic reaction to the vaccine or a constituent of the vaccine*

**2. Acute, moderate, or severe illness with or without a fever**

*The following condition is a precaution to the administration of hepatitis A vaccine:*

**1. Pregnancy**

*The safety of hepatitis A vaccination during pregnancy has not been determined; however, because hepatitis A vaccine is produced from inactivated HAV, the theoretical risk to the developing fetus is expected to be low. The risk associated with vaccination should be weighed against the risk for hepatitis A in women who may be at high risk for exposure to HAV.*

[If an ACIP recommendation regarding hepatitis A vaccination is published within 6 months following this resolution, the relevant language above (except in the eligible groups sections) will be replaced with the language in the recommendation and incorporated by reference to the URL.]

Adopted and Effective: February 22, 2018

This document can be found on the CDC website at: