Hepatitis B Vaccination Update: New Recommendations from the ACIP

Rick Davis, PA-C

Division of Gastroenterology/Hepatology

University of Florida

Conflict of Interest

Rick Davis, PA-C has no disclosures to report

HBV Vaccination: Learning Objectives

 1. Informed of the epidemiology of acute/chronic hepatitis B in the U.S.

 2. Become aware of the morbidity and mortality of chronic hepatitis B infection from complications of cirrhosis and hepatocellular carcinoma (HCC)

HBV Vaccination: Learning Objectives

- 3. Select the currently available hepatitis B vaccines for the appropriate patients and schedule
- 4. Review the new ACIP recommendations for universal vaccination against hepatitis B in adults in the U.S.

ACIP HBV Vax Recs: What's New? www.cdc.gov/vaccines/acip

- (November, 2021)
- The following groups should receive Hepatitis B vaccine:
 - Adults age 19 thru 59 years of age
 - Adults 60 years of age and older with risk factors for Hepatitis B infection
 - Anyone over 60 without risk factors may also receive the HBV vaccines

ACIP HBV Vax Recs: Why? November, 2021

- HBV vaccinations rates are low in the U.S.
- > 60 million Americans were born before 1991 when infant vaccination was adopted
- HBV cases are rising, likely associated with the opioid epidemic and IVDU
- 2018, 1,649 reported deaths from HBV
- 2016, estimated 862,000-2M Americans infected with chronic hepatitis B
- Vaccination >95% effective in preventing HBV infection

HBV: US Prevalence

Chronic HBV prevalence: 847,000-2.2 million

4X higher rate among veterans

5X higher rate among inmates

20X higher rate among AAPIs

www.cdc.gov/hepatitis/statistics/

WHO: HBV Epidemiology Worldwide (7/27/21)

- Estimates 296 M living with chronic HBV in 2019 worldwide
- 1.5 M new infections/year
- 820,000 deaths in 2019, mostly from complications of cirrhosis and primary liver cancer (HCC)

HBV Transmission

CDC/HBV vaccine information sheet

- Body fluids, blood, semen enter body of uninfected person
- Birth from HBsAg+ mother
- Sharing razors, toothbrushes with infected person
- Sex with an infected partner
- Sharing needles, syringes, or other drug injection equipment
- Needle sticks or other sharps exposure
- Vaccination protects > 95% from becoming infected

Hepatitis B Serologies

- HBsAg (+) chronic carrier or active dz
- HBsAb (+) immunity or previous exposure
- HBcAb(IgM) acute exposure
- HBcAb(IgG) previous exposure
- AASLD Hepatitis B Guidelines, Hepatol, 2018

- HBeAg (+) viral replication
- HBeAb (+) viral clearance or pre-core mutant if DNA (+)
- HBV-DNA < 10⁴ chronic carrier or prev exposure
- HBV-DNA > 10⁴ active chronic infection

Hepatitis B: Complications

- Hepatocellular carcinoma (HCC)
 - In absence of cirrhosis
 - > men from Africa/Asia > 40
 - > women from Asia > 50
- Cirrhosis
 - Portal hypertension
 - Ascites, variceal bleeding, encephalopathy
 - Liver failure

Patients with known chronic HBV: assessment of fibrosis

- Fibrosis calculators from readily available routine labs: APRI, FIB-4, MELD, NAFLD scores
- Imaging: U/S, CT, MR
- Fibrosis scans: elastography, fibroscan;
 measure 'stiffness' of liver, not anatomy
- Liver biopsy: percutaneous, transjugular

HBV: Surveillance for HCC HBsAg+ patients (AASLD, 2018)

- Abd U/S with +/- AFP q 6 months
- Begin at age 40: Asian/African descent men
- Begin at age 50: Asian women
- FH liver cancer
- Hepatitis Delta co-infection
- All with advanced fibrosis, F3-F4

Hepatocellular Carcinoma (HCC): Treatment

Surgical resection or liver transplantation best options

- Alcohol ablation
- Embolization (cryo-,chemo-,
- TACE)
- ChemoRx, e.g. sorafenib

Hepatitis B Vaccination

HBV available vaccines

• Engerix-B®

Recombivax HB[®]

Heplisav-B[®]

TwinRx: Hep A&B

ACIP HBV Routine Vaccination schedule: Adults 19-59 years old

Complete a 2- or 3-, or 4- dose series:

- 2-dose series only applies when 2 doses of Heplisav-B* are used at least 4 weeks apart
- 3-dose series Engerix-B or Recombivax HB at 0, 1, 6 months [minimum intervals: dose 1 to dose 2: 4 weeks / dose 2 to dose 3: 8 weeks / dose 1 to dose 3: 16 weeks])
- 3-dose series HepA-HepB (Twinrix at 0, 1, 6 months [minimum intervals: dose 1 to dose 2: 4 weeks / dose 2 to dose 3: 5 months])

ACIP HBV Vaccination schedule 2022: Adults 19-59 years old, 4-dose series

- 4-dose series HepA-HepB (Twinrix)
 accelerated schedule of 3 doses at 0, 7, and
 21–30 days, followed by a booster dose at 12 months
- 4-dose series Engerix-B at 0, 1, 2, and 6
 months for persons on adult hemodialysis
 (note: each dosage is double that of normal
 adult dose, i.e., 2 mL instead of 1 mL)
- *Note: Heplisav-B not recommended in pregnancy due to lack of safety data

- Age 60 years or older and at risk for hepatitis
 B virus infection*:
- 2-dose (Heplisav-B) or 3-dose (Engerix-B, Recombivax HB) series or 3-dose series HepA-HepB (Twinrix)

*Note: Anyone age 60 years or older who does not meet risk-based recommendations may still receive Hepatitis B vaccination.

- Chronic liver disease:
- Chronic Hepatitis C
- Cirrhosis
- Fatty liver disease
- Alcoholic liver disease
- Autoimmune hepatitis
- Elevated transaminasea > 2x ULN

HIV infection

Current or recent injection drug use

Incarcerated persons

 Travel in countries with high or intermediate endemic hepatitis B

- Sexual exposure risk:
- Sex partners of hepatitis B surface antigen [HBsAg]-positive persons
- Sexually active persons not in mutually monogamous relationships
- Persons seeking evaluation or treatment for a sexually transmitted infection
- Men who have sex with men

- Percutaneous or mucosal risk for exposure to blood:
- Household contacts of HBsAg-positive persons
- Residents and staff of facilities for developmentally disabled persons
- Health care and public safety personnel with reasonably anticipated risk for exposure to blood or blood-contaminated body fluids

- Percutaneous or mucosal risk for exposure to blood, cont'd:
- Hemodialysis
- Peritoneal dialysis
- Home dialysis
- Predialysis patients
- Patients with diabetes

ACIP pediatric/adolescent HBV vaccination recommendations 2022

- Unchanged from 2018
- Routine:
 - HepB monovalent vaccine at birth
 - 1-2 month
 - 18 months
- Mother HBsAg+:
 - Sgl monovalent HepB vaccine + HBIG
 - -1 month
 - 3 months
 - Ck HBsAg + HBsAb at 9-12 months
 - 18 months

Reactivation of HBV: previously infected but HBsAb+

- Ck HBcAb total, prior to beginning biologic, immunomodulatory, or immunosuppressive therapy.
- Monitor for reactivation during therapy with LFT, HBV-DNA or HBsAg
- May require viral suppression therapy during therapy with entecavir, tenofovir
- AASLD, 2018 guidelines

Summary

- New ACIP recommendations to vaccinate adults age 19-59 yrs and those over 60 if at risk or if they wish
- HBV vaccination preventions infection in > 95% of individuals
- Pts with chronic HBV infection are at risk of primary liver cancer and development of cirrhosis with complications.

References

- CDC.gov/vaccines/schedule/downloads/adult/schedule. 2022
- AASLD 2018 Hepatitis B Guidance, Hepatology 2018,67(4): 1560-99.
- WHO: https://www.who.int/news-room/factsheets/detail/hepatitis-b [accessed 2/25/22]
- Prevention of Hepatitis B virus infection in the U.S.: Recommendations of the Committee on Immunization Practices. MMWR 2018;67(1): 1-36