ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES

VACCINES FOR CHILDREN PROGRAM VACCINES TO PREVENT HEPATITIS A

The purpose of this resolution is to revise the previous resolution to incorporate the post-exposure use of hepatitis A vaccine.

VFC resolution 10/05-1 is repealed and replaced by the following:

Eligible Groups

All persons 1 year through 18 years of age*:

* Twinrix is only indicated for persons 18 years and older. Only persons 18 years of age are eligible to receive Twinrix through the VFC program. HAVRIX and VAQTA vaccine is licensed for use in persons 12 months of age and older.

Recommended Hepatitis A Schedule*

Vaccine**	<u>Age</u>	# of Doses	Schedule***
$HAVRIX^{^{\otimes}}$	1 yr	2	0, 6-12 months
(Pediatric formulation)	-		
VAQTA®	1 yr	2	0, 6-18 months
(Pediatric formulation)	•		
$TWINRIX^{^{\otimes}}$	18 yrs	3	0, 1, 6 months
(Adult formulation)	•		

- * 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 (See Recommended Schedule above) and integrated into the routine childhood vaccination schedule. Children who are not vaccinated by 2 years of age can be vaccinated at subsequent visits. States, counties, and communities with existing hepatitis A vaccination programs for children 2-18 years are encouraged to maintain these programs. In these areas, new efforts focused on routine vaccination of 1 year old children should enhance, not replace, ongoing programs directed at a broader population of children. In areas without existing hepatitis A vaccination programs, catch-up vaccination of unvaccinated children aged 2-18 years can be considered. Such programs might especially be warranted in the context of rising incidence or ongoing outbreaks among children or adolescents.
- ** Use of brand names is not meant to preclude the use of other hepatitis A vaccines where appropriate.
- *** 0 months represents timing of the initial dose; subsequent numbers represent months after the initial dose.

Dosage intervals

	Minimum	Minimum interval between doses		
Vaccine	Age (Dose 1)	Dose 1 to 2	Dose 2 to 3	Dose 1 to 3
HAVRIX® (Pediatric formulation)	12 months	6 months	n/a	n/a
VAQTA® (Pediatric formulation)	12 months	6 months	n/a	n/a
TWINRIX® (Adult formulation)	18 years	1 month	5 months	6 months

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

Persons who recently have been exposed to hepatitis A virus and who previously have not received hepatitis A vaccine should be administered a single dose of single antigen vaccine or immune globulin (IG) (0.02 mL/kg) as soon as possible. Information about the relative efficacy of vaccine compared to IG postexposure is limited, and no data are available in persons with underlying medical conditions. Therefore, decisions to use vaccine or IG should take into account patient characteristics associated with more severe manifestations of hepatitis A, including age and chronic liver disease.

Selected special categories:

IG should be used in healthy persons younger than 12 months of age, immunocompromised persons, persons who have been diagnosed with chronic liver disease and persons for whom vaccine is contraindicated.

For healthy persons aged 12 months through 18 years, hepatitis A vaccine at the age appropriate dose is preferred to IG because of vaccine's advantages, including long term protection and ease of administration.

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 Dosages

Refer to product package inserts.

Contraindications and Precautions

The following conditions are contraindications to 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 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.

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