



DEPARTMENT OF DEFENSE  
ARMED FORCES EPIDEMIOLOGICAL BOARD  
5109 LEESBURG PIKE  
FALLS CHURCH, VA 22041-3258



AFEB (15-1a) 95-2

28 February 1995

MEMORANDUM FOR THE ASSISTANT SECRETARY OF DEFENSE (HEALTH AFFAIRS)  
THE SURGEON GENERAL, DEPARTMENT OF THE ARMY  
THE SURGEON GENERAL, DEPARTMENT OF THE NAVY  
THE SURGEON GENERAL, DEPARTMENT OF THE AIR FORCE

SUBJECT: Recommendations Regarding the Use of the Newly Licensed  
Hepatitis A Vaccine in Military Personnel

1. In response to your request for recommendations regarding the use of the newly licensed hepatitis A vaccine in military personnel, the Board reviewed available data on clinical trials at its recent meeting and provides the following conclusions:

- a. HEPATITIS A VACCINE IS SAFE AND HIGHLY EFFICACIOUS AND OFFERS CERTAIN DISTINCT ADVANTAGES OVER IMMUNE GLOBULIN FOR PREVENTION OF HEPATITIS A:
  - 1) THE SCHEDULE FOR ADMINISTRATION OF VACCINE IS NOT TIED TO THE TIME OF DEPLOYMENT AND WILL SIGNIFICANTLY ENHANCE READINESS.
  - 2) RECENTLY EXPERIENCED SHORTAGES OF IG CAN BE EXPECTED TO CONTINUE FOR THE FORESEEABLE FUTURE.
  - 3) ACQUISITION COSTS OF IG ARE EXPECTED TO INCREASE.
  - 4) VACCINE PRODUCES RAPID (2-3 WEEKS AFTER A FIRST DOSE) AND LONGER LASTING (AT LEAST 4 YEARS) ACTIVE IMMUNITY
- b. THE COST OF VACCINE IS CURRENTLY HIGHER THAN IG BUT VACCINE MAY BE MORE COST EFFECTIVE DEPENDING ON RISK AND LOGISTICAL FACTORS.
- c. BASED ON THE LIMITED DATA PRESENTED, CONCURRENT USE OF THE VACCINE WITH OTHER VACCINES USED IN MILITARY PERSONNEL APPEARS TO HAVE NO RECOGNIZED ADVERSE EFFECTS OR INTERFERENCE WITH IMMUNE RESPONSES. INDEED, A COMBINATION HEPATITIS A AND B VACCINE MAY BE COST EFFECTIVE.

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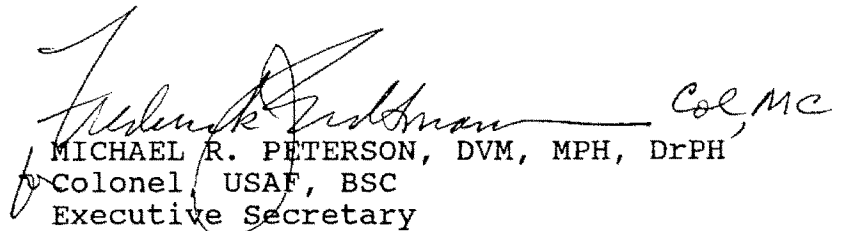
SUBJECT: Recommendations Regarding the Use of the Newly Licensed Hepatitis A Vaccine in Military Personnel

- d. IN OUTBREAK SITUATIONS, IG IS THE PREVENTIVE MEASURE OF CHOICE. IF PROVIDING LONG TERM PROTECTION IS DESIRABLE, VACCINE MAY BE GIVEN SIMULTANEOUSLY.
- e. BASED ON THESE FINDINGS, USE OF HEPATITIS A VACCINE IN MILITARY PERSONNEL IS RECOMMENDED. SPECIAL PRIORITY CAN BE GIVEN TO USE IN THE FOLLOWING GROUPS IN DESCENDING ORDER:
  - 1) MILITARY FORCES ASSIGNED OR DEPLOYED TO GEOGRAPHIC AREAS WITH KNOWN HIGH RISK.
  - 2) DEPLOYABLE FORCES, ACTIVE AND RESERVE, FOLLOWING ALERT LEVEL RANKING.
  - 3) FAMILY MEMBERS AND DOD CIVILIANS ASSIGNED ABROAD OR WITH RECURRENT TRAVEL TO HIGH RISK AREAS.
  - 4) ALL OTHER FORCES.
- f. USE OF THE VACCINE IN DEPENDENTS INCLUDING CHILDREN, FOOD HANDLERS, AND DAY CARE WORKERS SHOULD FOLLOW ACIP RECOMMENDATIONS, WHICH WILL BE ISSUED IN THE NEAR FUTURE.
- g. SCREENING TO DETECT PREEXISTING IMMUNITY MAY BE COST EFFECTIVE IN UNITS WITH HIGH PREVALENCE OF ANTIBODY TO HA. STUDIES TO DETERMINE THE VALUE OF SCREENING OF NEW UNIT MEMBERS AND RECRUITS ON AN ONGOING BASIS ARE RECOMMENDED.

2. A second vaccine preparation is expected to be licensed. At that time, these recommendations will be reviewed and modified, if necessary.



LEWIS H. KULLER, M.D., DrPH  
President, AFEB



MICHAEL R. PETERSON, DVM, MPH, DrPH  
Colonel USAF, BSC  
Executive Secretary

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(See Page 3)

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Hepatitis A Vaccine in Military Personnel

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HEALTH AFFAIRS

## THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, D. C. 20301-1200

DEC 06 1994

MEMORANDUM FOR EXECUTIVE SECRETARY  
ARMED FORCES EPIDEMIOLOGICAL BOARD

SUBJECT: Hepatitis A Vaccine

I request that the Armed Forces Epidemiological Board (AFEB) evaluate the potential use of Hepatitis A vaccine for use in military personnel. Currently, intramuscular immune globulin is the only product available to help protect service members from Viral Hepatitis A. However, at least two commercial firms are in the process of final approval to begin marketing a Hepatitis A vaccine. In fact, Food and Drug Administration approval is anticipated in January 1995.

The new Hepatitis A vaccine has the potential to offer long lasting, active immunity to our service members. If possible, the AFEB evaluation should include the following:

- **Efficacy comparisons between immune globulin and the new vaccine**
- **Cost : Benefit Ratio analysis for the new vaccine**
- **Recommendations for the use of the new vaccine in basic trainees, pre-deployment troops, mobility forces, whole force immunization, individuals assigned overseas, family members of active duty, etc.**
- **Recommendations for the use of the new vaccine in day-care Centers, school age children, young adults**
- **Use of the new vaccine in the face of an outbreak**
- **The concurrent use of the new vaccine in combination with all the other vaccines used in military members**

I look forward to receiving the Board's recommendations.

A handwritten signature in black ink, appearing to read "Stephen C. Joseph", with a long horizontal line extending to the right.

Stephen C. Joseph, M.D., M.P.H.