UNIVERSITY OF CANBERRA

HEPATITIS B
INFORMATION SHEET

Introduction:

As future health care workers, it is important that students recognise the need to demonstrate immunity to vaccine preventable diseases as part of professional practice. The following information sheet provides an overview of a Hepatitis B vaccination course to ensure protection and longevity of protection and how to provide appropriate evidence for Clinical Placement.

Hepatitis B is a viral disease primarily affecting the liver. A large proportion of those who are chronically infected will develop liver-related issues which account for considerable morbidity and mortality.[1] Hepatitis B is prevalent in the community and preventable through a vaccination course.

Providing Evidence for Hepatitis B:

Students can provide evidence of Hepatitis B protection in several different ways:

1.	Provide evidence of age-appropriate course (this must include date, batch number, medical practitioner signature with official practice stamp) and post vaccination serology indicating Anti-HBs greater than 10mIU/mL.

OR

2.	If you have been previously immunised, but do not have evidence, please complete the Statutory Declaration to indicate that you have completed the Hepatitis B vaccine and serology indicating Anti-HBs greater than 10mIU/mL. *You must try all means to retrieve your immunisation record first.*

OR

3.	Some students may have developed immunity through previous infection. In this instance, students can attach a serology of Anti-HBc (not Anti-HBs), indicating past Hepatitis B infection.

Hepatitis B Immunisation Schedule:

As with all vaccinations, students must undertake the appropriate vaccine schedule in a timely manner to ensure the best chance of vaccine protection and longevity of that protection. Students presenting evidence of vaccinations without undertaking the correct vaccination schedule may be required to undertake further booster vaccinations and provide evidence to ensure longevity of protection.

Age-Appropriate Vaccination Schedule[1]:

Different vaccination schedules are recommended for different age groups/settings:

For infants: birth dose (within seven days of birth), then at 2, 4 and 6 months of age (evidence of birth dose is not compulsory).

For children/adolescents and adults: standard 3-dose schedule (at 0, 1 month and 6 month from 1st dose).

For adolescents aged 11–15 years: a 2-dose schedule using adult formulation vaccine (Engerix-B or H-B-/Vax II) is also acceptable (as is used in school-based catch-up programs).

Other schedules can be indicated for adults with particular medical conditions and for travelers.

Adult Vaccination Course:

Most students will undertake an adult vaccination for Hepatitis B. The standard vaccine is called *Engerix* (or *Twinrix* for combined Hep B & A vaccination) and has a 3-dose schedule at 0, 1 and 6 months. Serology will need to be undertaken 4-8 weeks post final dose to ensure Anti-HBs greater than 10mlU/mL.

Non-Response to Hepatitis B Vaccination:

A non-responder is a person without HBV infection who has a documented history of an age-appropriate primary course of Hepatitis B vaccine, but without a current Anti-HBs level.

Students who are non-responders after being given the booster (4th dose) (and in whom HBV infection has been excluded) should have a 2 further doses of Hepatitis B vaccine at monthly intervals and be re-tested for Anti-HBs levels at least 4 weeks after the last dose. The booster (4th dose) that was received can be counted as the 1st of the 3 repeat doses, as recommended for non-responders.

Important: *A non-response to vaccination will not prevent a student from attending clinical placement. Additional precautions will be discussed to minimise risk.*

Infection Positive Student Guidelines:

A separate guideline has been developed for Infection Positive Students and can be downloaded from Placement Office website, see link: Infection Positive Student Guidelines

[1] National Centre for Immunisation Research and Surveillance 2012, *Hepatitis B vaccines for Australians*, NCIRS, Westmead.