

INFORMATION SHEETS

VACCINATION AGAINST HEPATITIS B VIRUS

- **What is Hepatitis B and how is it passed on and how could it affect me?**

Hepatitis B is a highly infectious virus spread by through blood or body products:

- Hepatitis is inflammation of the liver
- Hepatitis B is an infection of the liver caused by the hepatitis B virus (HBV). It is very common worldwide and very infectious.
- One third of the people infected do not show any symptoms until serious disease develops many years later, but they can still pass the virus onto others.

Methods of transmission:

- Through vaginal or anal intercourse (unprotected sex)
- As a result of blood-to-blood contact (e.g. sharing of needles and other equipment by injecting drug users (IDUs))
- Through perinatal transmission from mother to child.
- Transmission has also followed bites from infected persons, although this is rare.
- Transfusion-associated infection is now rare in the UK as blood donations are screened. Viral inactivation of blood products has eliminated these as a source of infection in this country.
- Injuries at work involving contaminated sharps

- **Am I at risk?**

The first line of defence against any infection is following Infection Control and Health and Safety Policies.

If you work in a health care setting, caring for patients, disposal of waste and cleaning then it is strongly recommended that you are vaccinated against HBV.

- **Will the vaccine make me unwell?**

The vaccines produced against HBV have a very good safety record and are very well tolerated but there is always the potential of reaction. These are:

Common – 1 in 10 to 1 in 100;

injection site pain, injection site erythema, injection site induration

Rare – less than 1 in 1000;

dizziness, headache, paraesthesia, nausea, vomiting, diarrhoea, abdominal pain, hepatobiliary disorders, abnormal hepatic function, arthralgia, myalgia, rash, pruritus, urticaria, fatigue, fever, malaise, influenza-like symptoms

Very rare – less than 1 in 10000;

anaphylaxis, thrombocytopenia, serum sickness, lymphadenopathy, syncope, paralysis, neuropathy, neuritis (including Guillain-Barré syndrome, optic neuritis and multiple sclerosis), encephalitis, encephalopathy, meningitis, convulsions, hypotension, vasculitis, bronchospasm, Gastrointestinal disorders, angioneurotic oedema, erythema multiforme, musculoskeletal and connective tissue disorders, arthritis.

- **How many injections do I need?**

The initial course consists of 3 injections over 6 months. You should be given the appointment for the next injection after you have had your first and then second injection. A blood test is required after you have had all the injections and in a small percentage of people the vaccination does not work.

After the initial course and an adequate antibody response a booster vaccine is recommended in 5 years

- **What vaccine will I be given?**

The Royal United Occupational Health mainly use Engerix B®. but may also use HBvaxPRO®

- **Can everybody have the vaccine?**

Occasionally it is not suitable for people to have the vaccine, please see the contra-indications below.

- **Contra-indications**


You should not have the vaccine if you have any of the following:

- Previous allergy to Hepatitis B vaccination.
- Known hypersensitivity to any of the components including:-Yeast, Sodium Chloride, Disodium phosphate dihydrate, Sodium dihydrogen phosphate, Thiomersal, Aluminium oxide hydrated, Formaldehyde, Potassium thiocyanate, Borax.
- History of signs of hypersensitivity after a previous vaccination.
- History of Hepatitis B infection.
- Current viral infection.
- Current fever or infection.
- Allergy to Latex

Or if you are currently pregnant.

- **What will happen if I refuse the vaccine(s)?**

The nurse will review with you what HBV is, how it is passed on, how it could affect you and ask you to sign a form stating that you do not want the vaccine. You will be able to change your mind and have the vaccine at a later date.



Your manager may be notified that you have refused the vaccine as it could put you at risk of contracting the infection.

In some areas/occupations it will mean a yearly blood test to ensure that you have not caught the infection.

If you have a sharps injury from a patient known to have the infection or from an unknown source vaccination with Hepatitis B human immunoglobulin will be recommended and offered with follow up testing for infection at 6 months.

This will also apply to those who cannot have the vaccine

- **How will I know if I am immune to Hepatitis B**

Following the completed course (or booster vaccination) a blood test will be done. You will be notified of the result of this blood test and any further action that is needed.

- **References**

<https://www.medicines.org.uk/emc/>.

Immunisation against infectious disease – The green book (DoH)