

f) People with other risks

- Individuals who change sexual partner frequently, men who have sex with men (MSM), male and female commercial sex workers, people engaging in anal intercourse, attendees at clinics for sexually transmitted infections (STIs) and those diagnosed with an STI.
- Inmates of custodial institutions.
- Tattoo and body piercing artists/practitioners.
- Immigrants from areas with a high or intermediate prevalence of HBV.
- Homeless people.
- Children born to parents from high or intermediate prevalence countries.
- Travellers to areas with a high or intermediate prevalence of HBV

The vaccine

- Hepatitis B vaccine is a safe, effective vaccine and an excellent way to protect yourself.
- The vaccine is usually given in a course of three injections - at your first clinic visit, one month later and six months after the first injection.
- After three injections, a blood test may sometimes be taken to check if you are now protected.
- Some people will need an extra dose(s) of the vaccine. A very small number of people will not respond to the vaccine and are not protected.
- Side effects of the vaccine may be a sore arm and redness where you have been injected.
- If you are pregnant or planning a pregnancy, talk to your doctor before getting the vaccine.
- You cannot get hepatitis B from the vaccine.

Get Vaccinated

Summary:

- Hepatitis B is a serious disease but it can be prevented.
- It is spread by coming in contact with blood or body fluids of an infected person.
- Vaccination and good hygiene can protect you from hepatitis B.

How can I learn more?

Useful information on hepatitis B can be found from the following sources:

- Your family doctor
- Your occupational health department
- Local public health department of the HSE

You can get other information and leaflets about hepatitis B on the following websites:

- www.hpsc.ie
- www.cdc.gov/hepatitis/hbv
- www.who.int
- www.immunisation.ie
- www.emitoolkit.ie



Hepatitis B Vaccine

What you need to know



Publication date: April 2017
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What is hepatitis B?

Hepatitis B is a virus that affects the liver and can make you seriously ill.

Some people with hepatitis B never get rid of the virus and may stay infected for life. This is chronic hepatitis B and people who have it are called “carriers.”

Some carriers go on to develop severe liver disease. Some carriers have no symptoms and may be unaware that they are infectious so they may spread the virus to others without knowing.

What is chronic hepatitis B?

Some people never get rid of the virus. You may stay infected for life and can spread hepatitis B to others. This is called chronic hepatitis B infection and people who have it may infect others.

You may feel healthy for your entire life and not show evidence of liver damage. Some people develop more severe liver disease, such as liver scarring (cirrhosis), liver failure or cancer. If you have hepatitis B, you can still get other types of hepatitis such as hepatitis A or C.

How is it spread?

Hepatitis B is spread by exposure to the blood or body fluids of an infected person. You can catch hepatitis B if you:

- Have sex with a person carrying hepatitis B.
- Share needles or other equipment when injecting drugs.
- Use unsterilised needles for body piercing, tattooing, acupuncture, electrolysis, or if you have been injected with a used needle.
- Share razors, toothbrushes, washcloths, towels, nail clippers or anything that might have blood or other body fluids on them.
- Come in contact with bleeding sores or cuts of an infected person.
- Are a health care worker or other person exposed to infected blood or body fluids.
- Are the child of a hepatitis B carrier.

In some cases, a definite source of infection is never identified.

You cannot get hepatitis B by

- Sneezing or coughing
- Kissing or hugging
- Breastfeeding
- Food or water
- Sharing dishes or glasses
- Casual contact (such as at work)

Am I at risk?

The following groups are at increased risk of HBV infection and should receive hepatitis B vaccine if non-immune:

a) Persons with occupational risk of exposure to blood or blood-contaminated environments

- Doctors, nurses, dentists, midwives, laboratory staff, mortuary technicians, ambulance personnel, cleaning staff, porters, medical, nursing and dental students, other health-care professionals.
- Staff and carers in centres for those with an intellectual disability (including daycare facilities, special schools and other centres).
- Prison staff in regular contact with prisoners.
- Security and emergency services personnel
 - Members of security and rescue services
 - Members of An Garda Síochána
 - Members of the fire service
 - Members of the armed forces
 - Employees of security companies.
- Any other workers who may be exposed to blood injuries.

b) Family and household contacts

- Infants born to mothers with acute or chronic HBV infection (see also postexposure prophylaxis below).
- The spouses, sexual partners, family and household contacts of acute cases and individuals with chronic infection. Where testing for markers of current or past infection is clinically indicated, this should be done at the same time as the administration of the first dose. Vaccination should not be delayed while waiting for results of the tests. Further doses may not be required in those with clear evidence of past exposure.

c) Adoption/fostering

- Vaccination is recommended for families adopting children from countries with a high or intermediate prevalence of HBV. These children should be tested for evidence of current or past HBV infection.
- All short-term foster carers and their families who receive emergency placements should be offered hepatitis B vaccination. Permanent foster carers and their families, who accept a child known to be at high risk of HBV, should also be offered immunisation.

Note: Hepatitis A vaccination may also be required.

d) Injecting drug users (IDUs) and their contacts

- All IDUs.
- Household contacts, children and sexual partners of IDUs.
- Those at risk of progressing to injecting drug use (including those who are currently smoking heroin and/or crack cocaine or heavily dependent amphetamine users).

e) Individuals at high risk due to medical conditions

- Those receiving regular transfusions of blood or blood products, and carers responsible for the administration of such products.
- Those with an intellectual disability attending centres such as daycare facilities, special schools and other units.
- Patients with chronic renal failure. It is advisable to administer a hepatitis B vaccine formulated for use in patients with chronic renal failure (Fendrix or HBVAXPRO40). The immune response to hepatitis B vaccine may be diminished compared to immunocompetent individuals and a more rapid decline in anti-HBs can be observed.
- Patients with chronic liver disease including those with persistent hepatitis C infection.
- Patients who are non-immune and who are likely to become immunocompromised, such as transplant recipients or those receiving immunomodulatory agents.
- HIV exposed and infected infants should be given Hepatitis B vaccine at birth and then continue with the routine childhood schedule.