

December 2006 HepTalk Listserv

In the December edition, you'll find an important new document from the CDC, plus links to two good references, one for treatment of Hepatitis B and one for Hepatitis C.

1. **CDC ISSUES ACIP'S RECOMMENDATIONS ON ELIMINATION OF HEPATITIS B VIRUS INFECTION IN U.S. ADULTS**
2. **Management of Hepatitis C: 2002 National Institutes of Health Consensus Conference Statement.** The NIH consensus statement is a good reference for HCV treatment specifics.
3. **A Physician's Guide to Chronic Hepatitis B Treatment** from the Asian Liver Center at Stanford University
4. **Archives** for HepTalk Listserv 2006

1. **From IAC (Immunization Action Coalition) Issue Number 635, December 11, 2006**

NEW: CDC ISSUES ACIP'S RECOMMENDATIONS ON ELIMINATION OF HEPATITIS B VIRUS INFECTION IN U.S. ADULTS

CDC published "A Comprehensive Immunization Strategy to Eliminate Transmission of Hepatitis B Virus Infection in the United States: Recommendations of the Advisory Committee on Immunization Practices (ACIP) Part II: Immunization of Adults" in the December 8 issue of MMWR Recommendations and Reports. The summary and the section on major updates to the recommendations are reprinted below.

Also on December 8, John W. Ward, MD, sent a Dear Colleague letter to health professionals outlining the multifaceted strategy ACIP has recommended to increase hepatitis B vaccination coverage among adults. Dr. Ward is director, Division of Viral Hepatitis; National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (proposed); CDC. A link to Dr. Ward's letter appears at the end of this article.

SUMMARY

Hepatitis B vaccination is the most effective measure to prevent hepatitis B virus (HBV) infection and its consequences, including cirrhosis of the liver, liver cancer, liver failure, and death. In adults, ongoing HBV transmission occurs primarily among unvaccinated persons with behavioral risks for HBV transmission (e.g., heterosexuals with multiple sex partners, injection-drug users [IDUs], and men who have sex with men [MSM]) and among household contacts and sex partners of persons with chronic HBV infection.

This report, the second of a two-part statement from the Advisory Committee on Immunization Practices (ACIP), provides updated recommendations to increase hepatitis B vaccination of adults at risk for HBV infection. The first part of the ACIP statement, which provided recommendations for immunization of infants, children, and adolescents, was published previously (CDC. A comprehensive immunization strategy to eliminate transmission of hepatitis B virus infection in the United States: recommendations of the Advisory Committee on Immunization Practices [ACIP]. Part 1: immunization of infants, children, and adolescents. MMWR 2005; 54 [No. RR-16]:1-33).

In settings in which a high proportion of adults have risks for HBV infection (e.g., sexually transmitted disease/human immunodeficiency virus testing and treatment facilities, drug-abuse treatment and prevention settings, healthcare settings targeting services to IDUs, healthcare settings targeting services to MSM, and correctional facilities), ACIP recommends universal hepatitis B vaccination for all unvaccinated adults. In other primary care and specialty medical settings in which adults at risk for HBV infection receive care, healthcare providers should inform all patients about the health benefits of vaccination, including risks for HBV infection and persons for whom vaccination is recommended, and vaccinate adults who report risks for HBV infection and any adults requesting protection from HBV infection. To promote vaccination in all settings, healthcare providers should implement standing orders to identify adults recommended for hepatitis B vaccination and administer vaccination as part of routine clinical services, not require acknowledgment of an HBV infection risk factor for adults to receive vaccine, and use available reimbursement mechanisms to remove financial barriers to hepatitis B vaccination. . . .

MAJOR UPDATES TO THE RECOMMENDATIONS

This report updates ACIP recommendations published previously for hepatitis B vaccination of adults. The primary changes from previous recommendations are as follows:

- In settings in which a high proportion of persons are likely to be at risk for HBV infection (e.g., STD/HIV testing and treatment facilities, drug-abuse treatment and prevention settings, healthcare settings targeting services to IDUs, healthcare settings targeting services to MSM, and correctional facilities), ACIP recommends universal hepatitis B vaccination for all adults who have not completed the vaccine series.
- In primary care and specialty medical settings, ACIP recommends implementation of standing orders to identify adults recommended for hepatitis B vaccination and administer vaccination as part of routine services. To ensure vaccination of adults at risk for HBV infection who have not completed the vaccine series, ACIP recommends the following implementation strategies:

- Provide information to all adults regarding the health benefits of hepatitis B vaccination, including risk factors for HBV infection and persons for whom vaccination is recommended.
- Help all adults assess their need for vaccination by obtaining a history that emphasizes risks for sexual transmission and percutaneous or mucosal exposure to blood.
- Vaccinate all adults who report risks for HBV infection.
- Vaccinate all adults requesting protection from HBV infection, without requiring them to acknowledge a specific risk factor. . . .

To access a ready-to-print (PDF) version the recommendations, which includes Appendices A, B, and C, go to:
<http://www.cdc.gov/mmwr/PDF/rr/rr5516.pdf>

Note: The PDF version includes a free CDC-sponsored education activity that can be completed online or submitted by U.S. mail for CME, CEU, or CNE credit. Simply read the primer, answer the questions at the end, and follow instructions for submitting your answers.

To access a web-text (HTML) version of the body of the recommendations, go to:
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5516a1.htm>

To access a web-text (HTML) version of Appendix A: Immunization Management Issues, go to: <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5516a2.htm>

To access a web-text (HTML) version of Appendix B: Postexposure Prophylaxis to Prevent Hepatitis B Virus Infection, go to:
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5516a3.htm>

To access a web-text (HTML) version of Appendix C: Identification and Management of Hepatitis B Surface Antigen (HBsAg)-Positive Persons, go to:
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5516a4.htm>

To receive a FREE electronic subscription to MMWR (which includes new ACIP statements), go to:
<http://www.cdc.gov/mmwr/mmwrsubscribe.html>

To access Dr. Ward's Dear Colleague letter, go to:
<http://www.immunize.org/acip/hepbrecs06.pdf>

2. Management of Hepatitis C: 2002 National Institutes of Health Consensus Conference Statement. The NIH consensus statement is a good reference for

HCV treatment specifics:

<http://consensus.nih.gov/2002/2002HepatitisC2002116html.htm>

3. **A Physician's Guide to Chronic Hepatitis B Treatment from the Asian Liver Center at Stanford University.** http://liver.stanford.edu/Edu/Edu_materials.php.

This is an excellent reference. Also available as a pdf file at <http://liver.stanford.edu/files/2005Handbook.pdf>

4. **Access the HepTalk Listserv Archives at**

<http://www.migrantclinician.org/excellence/hepatitis/listservarchive>, or email the listserv moderator, Kath Anderson, at dempander@earthlink.net to have a previous edition e-mailed directly to you. The following is a list of the monthly topics in 2006:

- **January 2006:** Updated Advisory Committee on Immunization Practices (ACIP) of the US Centers for Disease Control and Prevention (CDC) comprehensive guidelines for the eradication of hepatitis B virus (HBV) in the United States.
- **February 2006:** Update on Hepatitis C.
- **March/April 2006:** Cross cultural communication.
- **April 2006:** Hepatitis A and prevention, with guest editor Amy Liebman, MPA.
- **May 2006:** two successful adult immunization programs, one in Pennsylvania and one in New York. Each involves cooperation between state and local health departments and community clinics in order to provide immunizations, including Hepatitis A and B, to migrant seasonal farmworkers. The Pennsylvania program works with a HepTalk clinic participant.
- **June /July 2006:** Cultural Competency and Hepatitis, with guest editor Dr. Jennie McLauren
- **July 2006** Hepatitis B Uptates
- **August 2006** Liver Cancer and Hepatitis B and C
- **September 2006** Resources for Effective Risk Assessment
- **October 2006** Resources for Effective Risk Assessment
- **November** A Quick Review of Hep Facts, and Transmission Hot Spots

HepTalk is a project of the Migrant Clinicians Network and Community Health Education Concepts. HepTalk is funded by the Centers for Disease Control and Prevention. The goal of HepTalk is to help clinicians serving migrants and recent immigrants engage in productive discussions about hepatitis risks with their clients and help them make prevention plans. The HepTalk listserv is a support service for clinics participating in the project. This is a post-only listserv and postings will come from HepTalk staff about once a month. If others at your clinic would like to be on the listserv, or if you have questions about the listserv or resources listed here, or if you would like to add something to the posts, please contact Kathryn Anderson, HepTalk training and education coordinator and listserv administrator, at dempander@earthlink.net. You can also contact the listserv administrator if you would like to unsubscribe from the list.