

Protecting and improving the nation's health

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www.gov.uk/phe

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Dear colleague,

Re: Plan for phased re-introduction of hepatitis B vaccine for lower priority groups – implications for general practice

Since mid-2017 the UK has experienced a shortage of hepatitis B vaccine due to global manufacturing issues. In response to the shortage, PHE developed temporary recommendations on hepatitis B vaccine including risk-based prioritisation of vaccine, dose-sparing and deferral of boosters.

Vaccine supplies are now improving and more vaccine is becoming available during 2018. Supplies will remain constrained, however, due to backlog demand from 2017 and low UK allocations from some manufacturers. Supply management and restrictions will therefore need to continue until further notice.

PHE, working with manufacturers and DHSC, has published a phased <u>recovery plan</u> to support reintroduction of vaccine for lower priority groups in 2018 in a phased approach to maintain continuity of supply. The main aspects of the plan which have implications for general practice are:

- Hepatitis B vaccine remains available for those at highest immediate risk, i.e. PHE priority groups 1-3 (see PHE temporary recommendations, August 2017).
- From spring 2018, hepatitis B monovalent vaccine will become available for individuals in priority groups 4 other than for travel. This includes patients with chronic liver disease and household or sexual contacts of chronic hepatitis B cases, and completion of post exposure vaccination courses.
- Between spring and winter 2018, healthcare and other frontline workers will be eligible for vaccination, using a phased approach through occupational health departments.
- Monovalent hepatitis B vaccine should not be used for most travel indications, but combination hepatitis A / hepatitis B vaccine can now be used for high risk travel indications (see PHE Addendum, November 2017).

On the advice of the Joint Committee on Vaccination and Immunisation (JCVI), boosters (priority group 5) are no longer routinely required in healthy, immunocompetent adults who have completed a standard primary course (0,1,6 or 0,1,2,12 months), including healthcare workers who are known responders.

Ordering restrictions will remain in place for general practice and community pharmacists to discourage stockpiling and use for lower risk indications (e.g. travel). Practices will be able to order a

small volume of stock, for example for patients with chronic liver disease or for household contacts of cases. Where larger amounts of vaccine are required for priority group 4 patients e.g. for close contacts in a large household, PHE Health Protection Teams will be able to provide an override approval for manufacturers to release additional vaccine. Information on this override process for priority group 4 patients is detailed in the <u>recovery plan</u>.

If post exposure vaccination is urgently required e.g. for the first dose, and there is no vaccine available in the practice, patients should continue to be referred to NHS Trust urgent care or Accident and Emergency departments for assessment.

To order non-centrally supplied vaccines:

- For GSK contact: <a href="mailto:customercontactuk@gsk.com">customercontactuk@gsk.com</a> or 0800 221 441 option 2.
- For MSD regular orders contact AAH customer services at <a href="www.aah.co.uk">www.aah.co.uk</a> or on 0344 5618899. For exceptional orders above ordering restrictions AAH will direct the requester to call MSD customer services on 01992 452094.

If used appropriately, the volume of vaccines available to order over the course of 2018 will be sufficient for ongoing and catch-up vaccination for priority groups 1-4, minimising override requests to manufacturers.

As the situation is dynamic, all ordering restrictions are subject to change. Please check manufacturers' (GSK and MSD) websites for further information. Any PHE updates will be published on the <a href="PHE temporary recommendations">PHE temporary recommendations</a> webpage or in <a href="Vaccine Update">Vaccine Update</a>. Please cascade this letter and link to the recovery plan to relevant staff in your practice.

If you have any queries, please contact your local PHE Health Protection Team or email: immunisation.lead@phe.gov.uk.

Thank you for your cooperation in this matter.

Yours faithfully,

Dr Mary Ramsay

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