Hepatitis B Vaccine Higher Dose Schedule

The following immunocompromised individuals may respond sub-optimally to standard dosing of hepatitis B vaccine:

- Congenital immunodeficiency
- Hematopoietic stem cell transplant (HSCT) recipients
- Solid organ transplant candidates and recipients
- HIV infection

Such individuals should be offered the higher dose schedule as follows:

<table>
<thead>
<tr>
<th>Age</th>
<th>ENGERIX®-B Dose</th>
<th>ENGERIX®-B Volume</th>
<th>ENGERIX®-B Schedule</th>
<th>RECOMBIVAX HB® Dose</th>
<th>RECOMBIVAX HB® Volume</th>
<th>RECOMBIVAX HB® Schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-15 years</td>
<td>20 mcg</td>
<td>1.0 mL</td>
<td>0, 1 and 6 months</td>
<td>10 mcg</td>
<td>1.0 mL</td>
<td>0, 1 and 6 months</td>
</tr>
<tr>
<td>16-19 years B</td>
<td>40 mcg</td>
<td>2.0 mL</td>
<td>0, 1, 2 and 6 months</td>
<td>10 mcg</td>
<td>1.0 mL</td>
<td>0, 1 and 6 months</td>
</tr>
<tr>
<td>20 years and older B,C</td>
<td>40 mcg</td>
<td>2.0 mL</td>
<td>0, 1, 2 and 6 months</td>
<td>40 mcg</td>
<td>4.0 mL</td>
<td>0, 1 and 6 months</td>
</tr>
</tbody>
</table>

Individuals with advanced liver disease (e.g., cirrhosis, physician-diagnosed advanced liver disease related to hepatitis C infection) who are non-responsive to the initial hepatitis B vaccine series (standard dosing), should be immunized as per the ‘Hepatitis B Vaccine Higher Dose Schedule’ for the second series.

**Post-vaccination serology:** Measure anti-HBs at 1-6 months after completion of the vaccine series to ensure that an adequate immune response has been achieved. If anti-HBs is ≥ 10 IU/L, consider immune. If anti-HBs is < 10 IU/L, provide a second vaccine series and reassess anti-HBs 4 weeks later. If anti-HBs remains < 10 IU/L, consider as a 2-series non-responder and susceptible to hepatitis B. There is no benefit to further vaccination. If an exposure to blood or body fluids occurs, the client will require post-exposure prophylaxis.

**Note:** If post-vaccination serology was done more than 6 months after completion of the vaccine series, titres may underestimate protection achieved by the series. Consider as immune those with anti-HBs ≥ 10 IU/L. However, if anti-HBs < 10 IU/L and:

- anti-HBs is *detectable*: provide 1 dose of vaccine and retest 4 weeks later:
  - If level is ≥ 10 IU/L, consider as immune and no further doses are required.
  - If level is < 10 IU/L, complete the second vaccine series and retest 4 weeks later.
- anti-HBs is *undetectable*: provide a second series and retest 4 weeks later.

If anti-HBs remains < 10 IU/L after 2 vaccine series, consider as a 2-series non-responder and susceptible to hepatitis B.

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A For programmatic reasons, HSCT recipients should follow the hepatitis B vaccine schedule outlined in Part 2 – Immunization of Special Populations, Hematopoietic Stem Cell Transplantation (HSCT), using the age-appropriate higher vaccine dosing as indicated in the table above.

B If any dose in the series is given as ENGERIX®-B, a 4-dose series is required.

C The RECOMBIVAX HB® Dialysis Formulation (40 mcg/1 mL) should not be used for these individuals, with the exception of HSCT recipients and kidney transplant candidates and recipients.