HEPATITIS B VACCINATION IN ROMANIA

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Prof. Dr. Alexandru Rafila

Dr. Adriana Pistol

INSP

Institutul National de Sănătate Publică Romania

CNSCBT

NATIONAL IMMUNIZATION PROGRAMME

- Is part of National Programme of Communicable Diseases

- It is founded from a state budget and ensures free of charge vaccination of all children, from birth to 15 years old

Objectives:

Protection of population health against the main communicable disease which are preventable through vaccination:

- according to the population ages mentioned into the national schedule
- of risk groups population

HISTORICAL DATA ON HBV

- In the early 1990s, Romania had a high incidence of over 30 cases of hepatitis B per 100,000 population.
- The disease represented a serious public health problem, especially with regard to children.
- During the 1990s, public health measures were introduced such as the enforcement of the use of single use needles and a routine vaccination programme for children and health workers.

HEPATITIS B VACCINATION IN ROMANIA

- Vaccination against hepatitis B has been introduced in Romania in 1995.Vaccination scheme comprises 3 doses: at the birth (the first 24 hours), at 2 months age and at 6 months age
- In 1999 vaccination against hepatitis B was extended to 9 years old children (3rd class of primary school) as well as students from the lst year of faculty/college (students from the lst year of Medicine and Stomatology faculties, respectively sanitary schools)
- In 2003 vaccination at 18 years old in high schools

THE NATURAL HISTORY OF VIRAL HEPATITIS B INFECTION IN ROMANIA 1989 - 2016

No. of HBV cases age group 1-34 years Romania, 1999-2016

VACCINATION COVERAGE (VC%) WITH 3 DOSES OF HEPATITIS B VACCINE

CURRENT NATIONAL IMMUNIZATION PROGRAMME

I. Vaccination according to the population ages mentioned into the national schedule

AGE RECOMMENDED	VACCINATION TYPE	COMMENTS
First 24 hours of life 2-7 days age	Hepatitis B vaccine Calmette Guerrin vaccine (BCG)	In maternity
2 months age	Diphtheria–Tetanus-acellular Pertussis-Poliomyelitis-Hepatitis B- Haemophilus infl. B vaccine (DTaP-IPV-HepB-Hib) Pneumococcal conjugated vaccine	Family doctors
4 months age	Diphtheria–Tetanus-acellular Pertussis-Poliomyelitis-Hepatitis B- Haemophilus infl. B vaccine (DTaP-IPV-HepB-Hib) Pneumococcal conjugated vaccine	Family doctors
11 months age	Diphtheria–Tetanus-acellular Pertussis-Poliomyelitis-Hepatitis B- Haemophilus infl. B vaccine (DTaP-IPV-HepB-Hib) Pneumococcal conjugated vaccine	Family doctors
12 months age	Measles-Mumps-Rubella vaccine (MMR)	Family doctors
5 years age	Measles-Mumps-Rubella vaccine (MMR)	Family doctors
6 years age	Diphtheria–Tetanus-acellular Pertussis-Poliomyelitis (DTaP – IPV)	Family doctors
14 years age	Diphtheria–Tetanus vaccine for adults (dT)/Diphtheria–Tetanus-acellular Pertussis vaccine for adults (dTap)	Family doctors

Hepatitis B vaccination of risk group population

- It is recommended free of charge to contacts of HBV infection cases, supported by the programme
- No official recommendation for other risk categories as: dialysis, i.v. drugs users, MSM, prostitutes, etc
- For health personnel this type of vaccination and in case of accidental exposure to biological products is ensured from the hospital funds

VACCINATION ACTIVITIES PROVIDERS

Private system – out of pocket

Public system:

- ✓Maternity hospitals in the first 24 hours after birth
- ✓Family doctors – in combined hexavalent vaccines
- ✓Neonatologists and pediatricians – in combined hexavalent vaccines – out of pocket
- ✓Other categories of medical doctors – for adults - out of pocket

ANTENATAL SCREENING

- AgHBs screening tests are offered free of charge, supported by the health insurance funds
- There not enough coverage of pregnant women (aprox. 60%)
- The data are not monitored in order to inform the public health policy
- Specific immunoglobulins for newborns from positive mothers are not covered by the insurance fund

Sero-prevalence study results, Romania, 2013 – Hepatitis B Virus infection's markers

	HBc Ab		HBs Ag		HBs Ab (<10/≥10mUI/ml)		HBs Ab (≥10mUI/ml)	
	N	%	N	%	N	%	N	%
Overall	911	27.9	138	4.2	2094	64.1	1138	34.9
Age group:								
0-4 years	17	5.6	1	0.3	270	89.1	184	60.7
6-11months	3	4.3						
5-14 years	12	3.9	1	0.3	238	78.0	85	27.9
15-24 years	35	11.0	17	5.3	230	72.3	122	38.4
25-34 years	129	22.4	25	4.3	328	56.9	186	32.3
35-44 years	148	25.5	36	6.2	293	50.4	132	22.7
45-64 years	274	46.4	36	6.1	352	59.6	202	34.2
≥65 years	296	50.1	22	3.7	383	64.8	227	38.4

CONCLUSIONS

- The HBV vaccination program decreased the prevalence of HBV from 8 to 4%
- Shortage of HB vaccine can affect the decrease trend so there is a need for sustainability
- High risk population groups must be covered from the insurance fund
- Screening data must be use by the public health in order to inform health policy