INFECTION CONTROL ON TROL ON

HOSPITAL EPIDEMIOLOGY

Volume 11, Number 12 • December 1990

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Kenneth Spitalny, MD

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Alternate 0,1,2 month dosing regimen for certain populations*

20 mcg recombinant dose

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Adult dose (mcg)	20	10
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Published efficacy data: Neonates born of infected mothers'	√	✓
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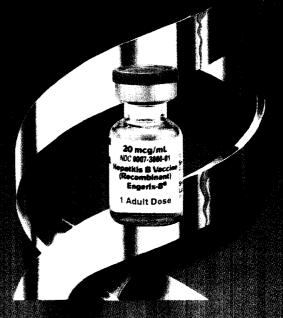
^{*}For those recently exposed to the virus (including needlestick exposure), certain travelers to high-risk areas and neonates born of infected mothers. When prolonged maintenance of protective antibody titers is desired, a booster dose at month 12 is recommended.

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14 million doses distributed in over 87 countries³

Switch to Engerix-B

Can be used to complete a course of vaccination initiated with another hepatitis B vaccine³⁴



thepatitis B Vaccine (Recombinant), MSD.
tPlease see brief summary of prescribing information on adjacent page for a complete listing of adverse reactions, contraindications, warnings and precautions.

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Engerix-B®

Hepatitis B Vaccine (Recombinant)

See complete prescribing information in SK&F literature or \emph{PDR} . The following is a brief summary.

INDICATIONS A N D USAGE: 'Engerix-B' is indicated for immunization against infection caused by all known subtypes of hepatitis B wrus. Immunization is recommended in persons of all ages, especially those who are, or will be, all increased risk of exposure to hepatitis B wrus.

CONTRAINDICATIONS: Hypersensitivity to yeast or any other component of the vaccine is a contraindication for use of the vaccine

WARNINGS: Do not give additional injections to pabents experiencing hypersensitivity alter an 'Engerix-B' injection. (See CONTRAINDICATIONS.)

Hepatitis B has a long incutation period. Hepatitis B vaccination may not prevent hepatitis B infection in individuals who had an unrecognized hepatitis B infection at he bene of vaccine administration. Additionally, it may not prevent infection in individuals who do not achieve protective antibody titlers

PREUUTIONS: **General:** As with any percutaneous vaccine, keep nephrine available for use in case of anaphylaxis or anaphylactoid reaction

As with any vaccme, delay administration, if possible, in persons with any febrile illness or active infection

Prognancy: Pregnancy Category C Animal reproduction studies have not been conducted with "Engerix-Bit its also not known whether Engerix B can cause letal harm when administered to a pregnant woman or can affect reproduction capacity Give 'Engerix-B' to a pregnant woman only if clearly needed

Nursing Mothers: It is not known whether 'Engerix B' is excreted in human milk Because many drugs are excreted in human milk, use caution when giving 'Engerix-B' to a nursing woman

Pediatric Usa: 'Engerix B' has been shown to be well tolerated and highly immunogenic in infants and children of all ages Newborns also respond well, maternally transferred antibodies do not interfere with the active immune response to the vaccine

ADVERSE REACTIONS: 'Engerix'8' is generally well tolerated. During clinical studies involving over 19,000 individuals distributed over all age groups, no serious adverse reactions attributable to vaccine administration were reported As with any vaccine, however, it's possible that expanded Commercial use of the vaccine could reveal rare adverse reactions not observed in chiral extreme.

Ten double blind studies involving 2,252 subjects showed no significant difference in the frequency or seventy of adverse experiences between Engerix B' and plasma-derived vaccines in 36 clinical studies a total of 13,495 doses of Engerix B' were administered to 5,071 healthy adults and children who were initially seronegalize for hepatitis B markers, and healthy neonates All subjects were monitored for 4 days post-administration. Frequency of adverse experiences tended to decrease with successive doses of Engerix B', Using a symption checklist: the most frequently reported adverse reactions were injection site soreness (22%), and fatigue (14%) Other reactions are listed below:

Incidence 1% to 10% of Injections: Induration; erythema; swelling: fever (>37.5°C); headache', dizziness.*

'Parent or guardian completed forms for children and neonates. Neonatal checklist did not include headache. fatigue or dizziness.

Incidence < 1% of in ections: Pain; pruritus; ecchymosis; sweating; malaise; chills, weakness: ilushing; tingling; hypotension; influenza-like symptoms; upper respiratory tract illnesses: nausea, anorexia; abdominal pain/cramps: vomiting; constipation; diarrhea; lymphadenopathy; pain/stiffness in a, shoulder or neck arthralgia; myalgia; back pain; rash; urticaria; petechiae; erythema; somnolence; insomnia; irritability; agitation.

Additional adverse experiences have been reported with the commercial use of 'Engerix-B' outside the United States. Those listed below are to serve as alerting information to physicians. Anaphylaxis, erythema multiforme including Stevens-Johnson syndrome; angioedema; arthrist; kachycardia/palpitations; bronchospasm including asthma-like symptoms, abnormal liver function tests: migraine; syncope; paresis; neuropathy Including hypoesthesia, paresthesia. Guilin-Barré synfrome and Bell's nalsy transverse myelitis; thrombocytopenia; ezezma; purpura; herpes zoster; vertigo; conjunctivitis; keratifis vieural disfurbances.

Ablantial Adverse Experiences: In addition, certain other adverse experiences not observed with "Engerix-8" have been reported with Heptavax-8" and/or Recombivax H8". I Those listed below are to serve as alerting information to

 $\textbf{HOW SUPPLIED: 20 mcg/mL in } Single-Dose \ Vials \ in \ packages \ \textbf{of} \ 1.10 \ and$

NOC **0007-3860-01** (package **of** 1)

NDC 0007-3860-16 (package of 25)

10 mcg/0.5 ml. in Single-Dose Vials in packages of 1 vial NDC 0007-3859-01 (package of 1)

† plasma-derived, Hepatitis B Vaccine, MSD. ‡ yeast-derived, Hepatitis B Vaccine. MSD.

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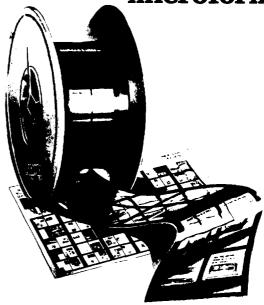
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 Poovorawan Y, Sanpavat S, Pongpunlert W, et al: Protective efficacy of a recombinant DNA hepatitis B vaccine in neonates of HBe antigen-positive mothers. JAMA 1989; 261(22):3278–3281. AMM 1989; 261(22):32/8-3281.

2. Based on Medi-Span Hospital Formulary Pricing Guide, December 1989.3. Data on file, SK&F. 4. Bush L, Moonsammy G, Boscia 1: Evaluation of initiating a hepatitis B vaccination schedule with one vaccine and completing it with another. Hepatology 1989;10:689. This publication is available in microform.



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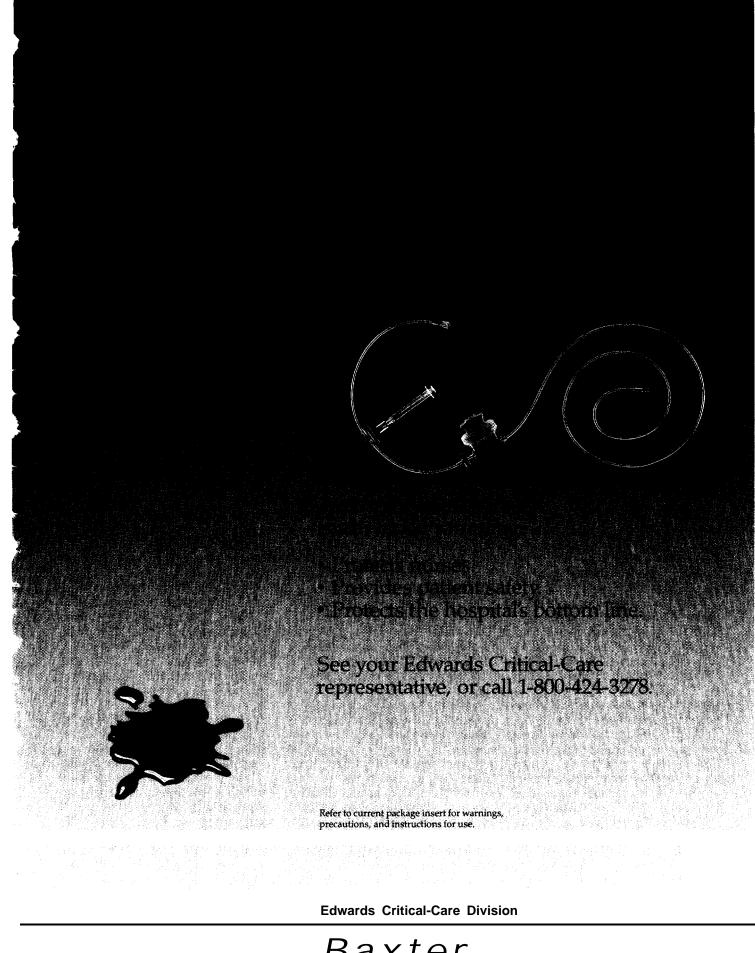
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