

## CHICAGO HEPATITIS A RESPONSE TASKFORCE

Chicago Department of Public Health – Immunization Program

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**CHART Newsletter** keeping you aware of emerging HAV outbreak related information.

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**Requests for Hepatitis A vaccine, please contact:**  
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**Please enter all Hep A doses into I-CARE when possible and submit all publicly funded doses administered using the following:**

[Hepatitis A Electronic Reporting System \(HERS\)](#)

### Coadministration of COVID-19 Vaccine and Other Vaccines

The COVID-19 Pandemic continues, and with the recent surge in cases caused by the Delta variant further taxing our healthcare systems to their limits, it is more critical than ever that we continue to emphasize the importance of routine vaccinations for every eligible patient.

As such, providers should be aware that the coadministration of COVID-19 vaccines (including Pfizer-BioNTech, Moderna, and Johnson & Johnson) in the same visit with all other vaccines is currently recommended by the Centers for Disease Control and Prevention (CDC) and the Advisory Committee on Immunization Practices (ACIP). Flu, COVID-19, and all other routine vaccines continue to be highly effective at reducing the burden on an already overtaxed healthcare system. Please see the current recommendations on coadministration below:

#### CDC Recommendations

When deciding whether to administer an(other) vaccine(s) with COVID-19 vaccine, vaccination providers should consider:

- Whether the patient is behind or at risk of becoming behind on recommended vaccines,
- Their risk of vaccine-preventable disease (e.g., during an outbreak or occupational exposures), and
- The reactogenicity profile of the vaccines.

**If multiple vaccines are administered at a single visit, administer each injection in a different injection site.** For adolescents and adults, the deltoid muscle can be used for more than one intramuscular injection administered at different sites in the muscle. Consider these best practices for multiple injections:

- Label each syringe with the name and the dosage (amount) of the vaccine, lot number, the initials of the preparer, and the exact beyond-use time, if applicable.
- Separate injection sites by 1 inch or more, if possible.
- **Administer the COVID-19 vaccines and vaccines that may be more likely to cause a local reaction (e.g., tetanus-toxoid-containing and adjuvanted vaccines) in different limbs, if possible.**

1. CDC (2021, Sept 15) [Interim Clinical Considerations for Use of COVID-19 Vaccines](#)



### Hepatitis A Hospitalization Costs vs the Costs of Vaccination

Though the majority of the country's attention remains focused on the continued fight against the COVID-19 Pandemic, it is essential to remember that the risk for person-to-person transmission of hepatitis A virus (HAV) continues to be a concern. Since the national outbreak of hepatitis A was first identified in 2016, a total of 42,718 cases of hepatitis A disease have been identified, 25,988 (61%) of which have resulted in hospitalization, and 391 in death<sup>2</sup>. With the primarily affected populations remaining persons who use drugs and persons experiencing homelessness, many of these individuals are uninsured, resulting in a significant financial burden to our hospital and public health systems and at a time when they are already significantly taxed. The additional burden on an already strained system makes it harder to provide care to those who need it most, and is one that can be alleviated by continuing to institute a robust hepatitis A vaccination program.

While hepatitis A vaccination has been widely recommended since 2006, adult hepatitis A vaccination coverage rates with  $\geq 2$  doses remain low at only 10.9% of individuals  $\geq 19$  years of age. With such a low vaccination rate, many adults in the United States still remain highly susceptible to the disease. With the average cost per hepatitis A related hospitalization reaching \$16,232, hospitalization costs for the disease are likely to have exceeded \$421.8 million as of October 22, 2021<sup>3</sup>. As hospitalized patients represent 61% of those infected with HAV, these outbreaks represent a significant economic burden on hospitals, public health systems, and state and local governments. With the average price of hepatitis A vaccine ranging from only \$36 - \$73 a dose in the public/private sector, this only underscores the importance of improving adult hepatitis A vaccination coverage rates among adults in the United States<sup>4</sup>.

2. CDC (2021, Oct 25) [Widespread person-to-person outbreaks of hepatitis A across the United States](#)

3. CDC (2020, May) [Hepatitis A Hospitalization Costs, United States, 2017](#)

4. CDC (2021, Oct 18) [CDC Vaccine Price List](#)

