

Vaccine-Preventable Diseases in Adults
Hepatitis B

Hepatitis B is a vaccine-preventable disease that kills nearly 2,000 Americans annually.[1,2]

Hepatitis B virus (HBV) infection is often silent, because most people with acute HBV have mild or no symptoms. Adults aged 30 and older are more likely to experience symptoms during acute infection with HBV than those who are younger.[2]

Symptoms of hepatitis B include abdominal pain, nausea, and/or vomiting; dark urine or clay-colored stools; fatigue; fever; jaundice; joint pain; and loss of appetite.

HBV spreads through blood or other body fluids, and an acute infection can progress to chronic hepatitis that may lead to cirrhosis, liver failure, or liver cancer.

While anyone can get hepatitis B, those at higher risk include patients with chronic liver disease, hepatitis C, HIV, diabetes, liver damage or inflammation, or patients on dialysis.

The disease burden is substantial; approximately 15% to 25% of chronically infected adults will develop chronic liver disease, including cirrhosis, liver failure, or liver cancer.

In 2023, there were a reported 14,400 acute HBV infections and 1,769 HBV-related deaths.

Vaccination is the best way to prevent hepatitis B infection.[2]

CDC Recommendations for Hepatitis B Vaccination in Adults[3,4]

Age

The following groups should receive HepB vaccination:

- Adults 19–59 years
- Adults 60 years and older with risk factors for hepatitis B*,†

The following group may also receive HepB vaccination:

- Adults 60 years and older without known risk factors for hepatitis B*,†

CDC=Centers for Disease Control and Prevention.

* **Risk factors include:** chronic liver disease, HIV infection, sexual exposure risk, injection-drug use, percutaneous or mucosal blood exposure (eg, dialysis predialysis, household contact of a person with hepatitis B, healthcare or public-safety exposure), incarceration, or travel to countries with intermediate high hepatitis B prevalence.

† **Special situations:** Adults on dialysis and adults ≥20 years with immunocompromising conditions may require specific 3- or 4-dose schedules; follow product-specific guidance.

Despite universal recommendations, **two thirds of US adults remain unprotected against HBV**, and coverage is lower in high-risk subgroups, like in patients with chronic liver disease or diabetes.[5,6]

Discuss hepatitis B vaccination as an effective, preventive approach with your patients.

References: 1. 2023 Viral Hepatitis Surveillance Report. Centers for Disease Control and Prevention. Updated April 15, 2025. Accessed August 5, 2025. https://www.cdc.gov/hepatitis-surveillance-2023/about/index.html **2.** Clinical overview of hepatitis B. Centers for Disease Control and Prevention. Updated January 31, 2025. Accessed August 5, 2025. https://www.cdc.gov/hepatitis-b/hcp/clinical-overview/index.html **3.** Hepatitis B vaccine administration. Centers for Disease Control and Prevention. Updated January 31, 2025. Accessed August 5, 2025. https://www.cdc.gov/hepatitis-b/hcp/vaccine-administration/index.html **4.** Adult Immunization Schedule by Age (Addendum updated August 7, 2025). Centers for Disease Control and Prevention. Accessed August 8, 2025. https://www.cdc.gov/vaccines/hcp/imz-schedules/adult-age.html **5.** Vaccination coverage among adults in the United States, National Health Interview Survey, 2021. Centers for Disease Control and Prevention. Updated July 19, 2024. Accessed August 5, 2025. https://www.cdc.gov/adultvaxview/publications-resources/vaccination-coverage-adults-2021.html **6.** Adult vaccination coverage: National Health Interview Survey (NHIS), 2015. Weinbaum C. Presented to the National Vaccine Advisory Committee; June 6, 2017. Centers for Disease Control and Prevention. Accessed August 5, 2025. https://www.hhs.gov/sites/default/files/Weinbaum_Adult%20Immunization%20Coverage%20remediated.pdf

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