



**Hungary hepatitis meeting**  
Elimination of Viral Hepatitis in Hungary:  
Lessons learnt and the way forward  
**Budapest, Hungary**  
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# **Hepatitis vaccination programs in Hungary**

**Dr. Molnár Zsuzsanna**  
**Head of Communicable Disease Epidemiology and Immunisation Unit**  
**National Public Health Center, Hungary**

# Factors determining the immunization strategy against hepatitis B in Hungary (1980-1990)

- **Incidence of HBV infections**

Incidence of acute hepatitis B: 300-400 cases/100 000 inhabitants/year  
The most affected age cohorts: 15-24 years  
Prevalence of HBV carriers: around 1%

- **The characteristics of HBV transmission**

Dominant mode of transmission: sexual  
Most vulnerable groups: health care worker  
new-borns of HBsAg positive mothers

- **Cost of vaccination**

# The national hepatitis immunization program has three components

1. Immunising individuals in risk groups
2. Active and passive immunization of newborns of HBsAg positive mothers
3. Vaccination of adolescents

# Immunising individuals in risk groups

**1984:** Vaccination of health care workers with the highest risk and haemodialysis patients

**1993:** Voluntary vaccination of health care workers in all jobs at risk

**1996:** Voluntary vaccination of students enrolled in the first year of health education

**1998:** Decree No. 18/1998. (VI. 3.) by the Ministry of Welfare  
Occupation-related mandatory vaccination  
Mandatory vaccinations in health education institutions

**1999:** Decree No. 61/1999 (XII. 1) by the Ministry Of Health  
on protecting the health of workers exposed to biological agents



**The employer must ensure that workers at risk are vaccinated  
as a condition of employment**

# **Immunising individuals in risk groups who have not previously received HB vaccination**

**HB vaccination is available for free of charge for**

- Contacts of HBV cases**
  - Sexual partners of acute or chronic HBV cases
  - Exposed ppl to HBV living in the household of HBV cases
- Patients on dialysis**
- Haemophiliac patients**
- Onco-haematological patients**
- Intravenous drug users**

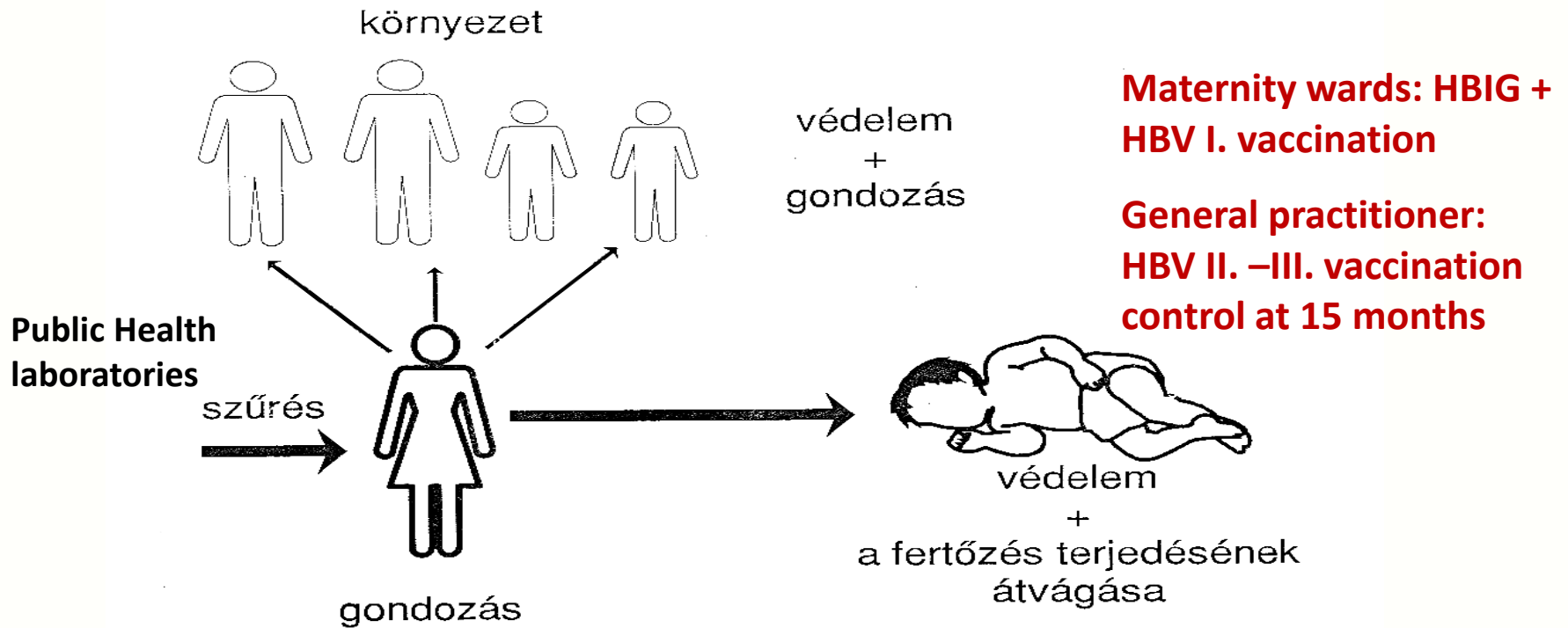
# **Immunising individuals in risk groups who have not previously received HB vaccination II.**

## **HBV vaccine is recommended for risk groups**

- ✓ unsafe sexual practice (promiscuous people, sex workers, people re-infected with STDs, MSM)
- ✓ chronic HCV carriers
- ✓ travellers to HBV highly endemic countries, with long term residing

# New-born HBV Prevention Program

**NPHMOS: epidemiological investigation, education,  
HBsAg screening: vaccination of exposed non-immune persons,  
hepatological care of HBV carriers**



**Screening around 16th week of pregnancy,  
Prenatal care: Obstetrician/Gynecologist, health visitor**

# Vaccination of adolescents

**1999: School-based vaccination (campaign)**

14 years (8th grade) - 3 doses

From 2003: 2 doses

In 2009: 13 years (7th grade) and 14 years (8th grade)

From 2010: 13 years (7th grade)

**Vaccination coverage : over 99%**

***Persons aged 13 to 33 years were vaccinated against HBV infection with a few exceptions!***



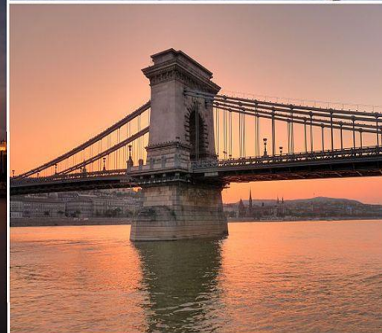
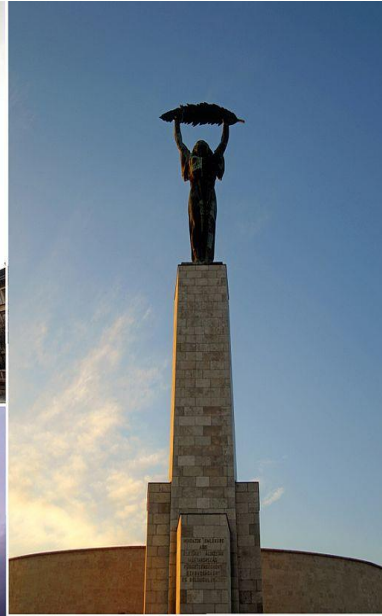
# Conclusion

The hepatitis vaccination strategy and its implementation in Hungary have been successful

- The incidence of hepatitis B infections has decreased significantly
  - 1995: 2,2 cases/100.000 inhabitant
  - 2018: 0,4 cases /100.000 inhabitant
- The biggest incidence drop was in the 15-29 age group, health care workers and infants

# Future plan

- ❖ Maintaining the high vaccination coverage
- ❖ Improving HB surveillance
- ❖ Performing sero-epidemiological surveys to measure prevalence data in both the general population and at-risk populations



**THANK YOU FOR  
YOUR ATTENTION!**