Which vaccine for protection against hepatitis A?

The results of a recent UK modelling study* indicate that using inactivated hepatitis A vaccine ['Havrix'; SmithKline Beecham] to immunise against hepatitis A infection is less costly than using hepatitis A immune globulin when the anticipated frequency of travel to an 'at risk'** area is greater than once every 2 years.

Relative costs compared

Since the benefits derived from the 2 immunisation strategies are equivalent, the model compared the relative costs of the 2 strategies in individuals who sought protection from hepatitis A at 2–4 weeks prior to a planned departure to an at risk area. The relative costs for inactivated hepatitis A vaccine (2 injections at a 1-year interval giving around 10 years' protection) and immune globulin (a single 2ml dose giving protection for about 3 months) were calculated for a 10-year time frame.

Fixed and additional costs

Costs included the fixed cost of the initial immunisation (comprising the cost of drug acquisition and administration by a general practitioner) and the additional costs of any expected future need for immunisation arising from the expected frequency of travel over the 10-year time frame. All costs and benefits were discounted at a rate of 6% per year.

** The study was sponsored by SmithKline Beecham.*

*** No definition for 'at risk' areas was given, but countries where patients are at higher risk are generally those in Southeast Asia, Africa and South America, with the possible addition of Greece and parts of the Middle East.*

Fenn P, McGuire A, Gray A. An economic evaluation of vaccination against hepatitis A for frequent travellers. Journal of Infection 36: 17-22, Jan 1998

800644816