

IMMUNE GLOBULIN & HEPATITIS A VACCINE FACT SHEET

Facts you need to know before you get an injection of immune globulin

Immune globulin, a sterile solution of antibodies obtained from human serum, may prevent or reduce the severity of *Type A hepatitis*.

Recent questions regarding the safety of administering blood products, including *immune globulin*, have been addressed by the Center for Disease Control (CDC). After the CDC reviewed *immune globulin* preparation methods and performed virologic testing, they concluded that *immune globulin* is safe for administration.

When you receive an injection of *immune globulin*, you cannot donate blood for 6 months.

Immune globulin can interfere with the effectiveness of live, attenuated virus vaccines such as measles, mumps and rubella. Therefore:

If you have received a live virus vaccine within the last **3 weeks**, check with your doctor about the need to repeat this virus vaccine.

Administration of any MMR vaccine should be deferred for **3 months after** an *immune globulin* injection, as the vaccination might be ineffective.

Facts you need to know before you get an injection of hepatitis A vaccine

The hepatitis A vaccine is a sterile inactivated form of the hepatitis A virus. The vaccine is given at least 2 weeks prior to travel to an endemic area. A booster dose for adults is recommended 6-12 months after the initial dose. The duration of immunity has not been established; a booster dose at a later date may be recommended.

Even after receiving the vaccine travelers are advised to use caution and avoid contact with contaminated food and water. Administration of other vaccines at the same time is unlikely to interfere with the immune response to the hepatitis A vaccine.

The vaccine is recommended for persons traveling to or living in areas that are endemic for hepatitis A, military personnel, those engaging in high risk sexual activity, IV drug users, employees of day care centers, labs where there is a risk of exposure to hepatitis A, or institutions serving populations at risk for hepatitis A.

The hepatitis A vaccine can be administered along with immune globulin for someone exposed to hepatitis A. The vaccine may not prevent hepatitis A in individuals who already have an unrecognized hepatitis A infection.

There is also a combination vaccine available that combines Hepatitis A vaccine with a vaccine for Hepatitis B. This vaccine may be appropriate for people who are at risk for both diseases and has the advantage of a reduced number of injections for coverage against both diseases.

Check our website: www.uhs.berkeley.edu to learn more about this medical concern or others.

For an appointment www.uhs.berkeley.edu or call **510-642-2000**

Clinic Nurse **510-643-7197** for advice