



Hepatitis B: About the Basics – Raising Awareness, Screening, Vaccination and Resources

May 29, 2025

PARTICIPATING IN THE WEBINAR



Audio – Attendees on mute



Chat – Hello! Feel free to drop a chat and respond to open-ended poll questions



Questions? Please type questions in the Q&A window

**The session is being recorded. We will also share slide presentations.*

Speakers:

Frank Hood

Director of Policy and Partnerships

Hepatitis B Foundation

Shreya Koirala

Public Health Program Coordinator

Hepatitis B Foundation

The only national non-profit dedicated to finding a cure and improving the quality of life for those affected by hepatitis B worldwide

HBF

- Outreach & Education
- Public Health Research
- Policy & Advocacy
- Education & Training
- PA Biotechnology Center & Biotech Incubator

BARUCH S. BLUMBERG RESEARCH INSTITUTE

- Biomedical Research - drug discovery & early detection methods for cirrhosis and HCC

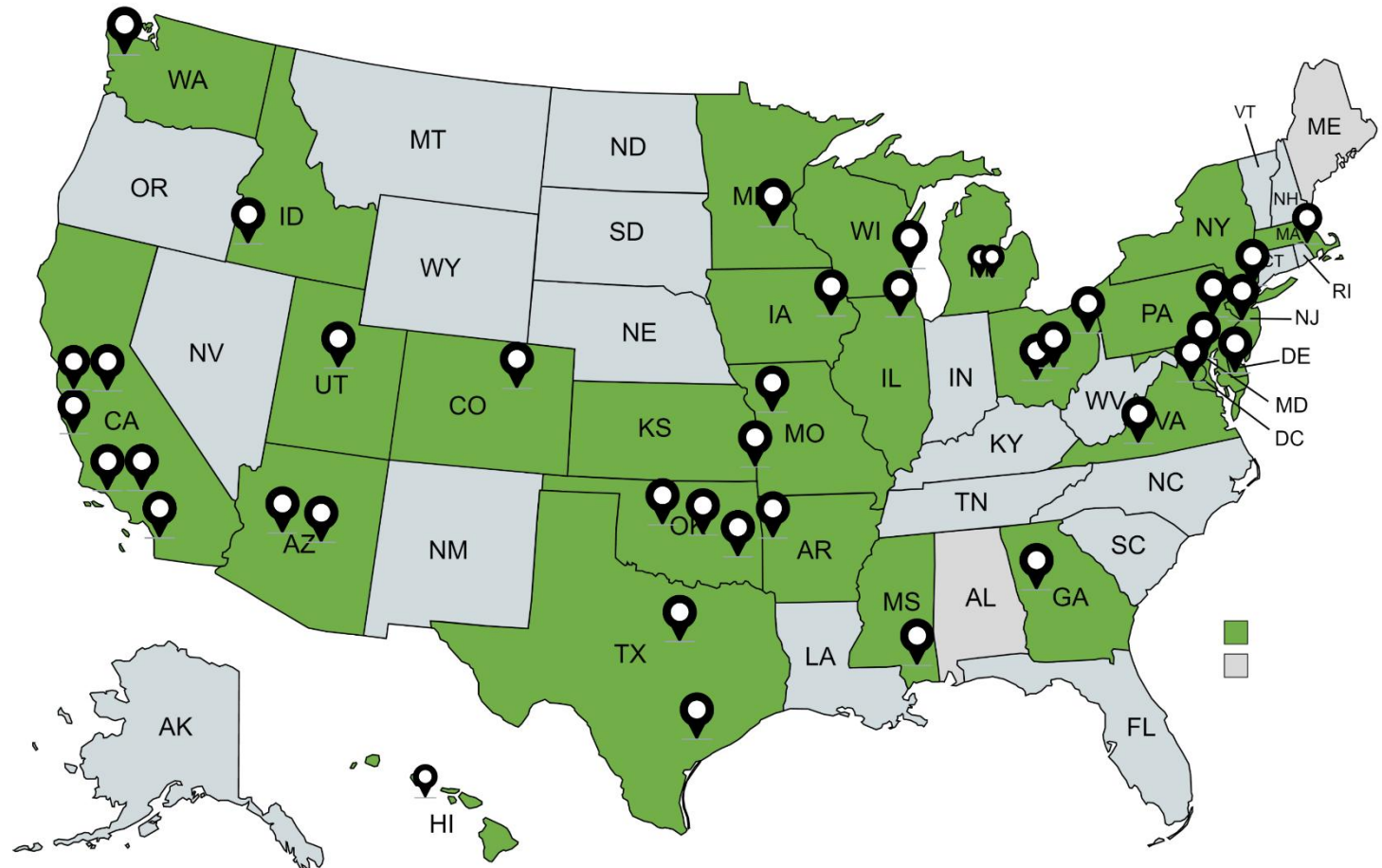
About the Hepatitis B Foundation



Hep B United

A National Coalition

- Founded in 2012 with support from HHS Office of Minority Health
- More than 60 organizations in 37 cities and 28 states
- **Mission** - Hep B United is a national coalition dedicated to reducing the health disparities associated with hepatitis B by increasing awareness, screening, vaccination, and linkage to care for high-risk communities across the United States.



Hep B 101

Hepatitis B

- Bloodborne
- Vaccine preventable
- Can become chronic
- No cure, but lifelong treatment
- U = U
- 17,650 newly reported chronic cases in 2023
- 14,400 estimated new acute cases in 2023
- Cases have plateaued after years of declining numbers
- Estimated prevalence of 862,000-2,400,000
- 25% of chronic hepatitis B infections progress to liver cancer or cirrhosis
- 5-10% of chronic cases lead to liver cancer without cirrhosis
- Most widespread infectious disease globally (~300M)
- ~66% unaware of status
- Can lead to Hepatitis D(elta) virus
- Rates remain low in children and adolescents, likely due to childhood vaccinations

Health Disparities - Who is Impacted in the U.S.?

- Asian Americans, Native Hawaiians, and Pacific Islanders
 - Comprise less than 6% of the U.S. population, but account for over 60% of all chronic hepatitis B cases in the country
- African Immigrants
 - Communities can have infection rates as high as 18%
 - People who inject drugs
- People with HIV and hepatitis C
- People with kidney disease/diabetes
- However, anyone can be at some degree of risk for hepatitis B in their lifetime.

2023 Stats

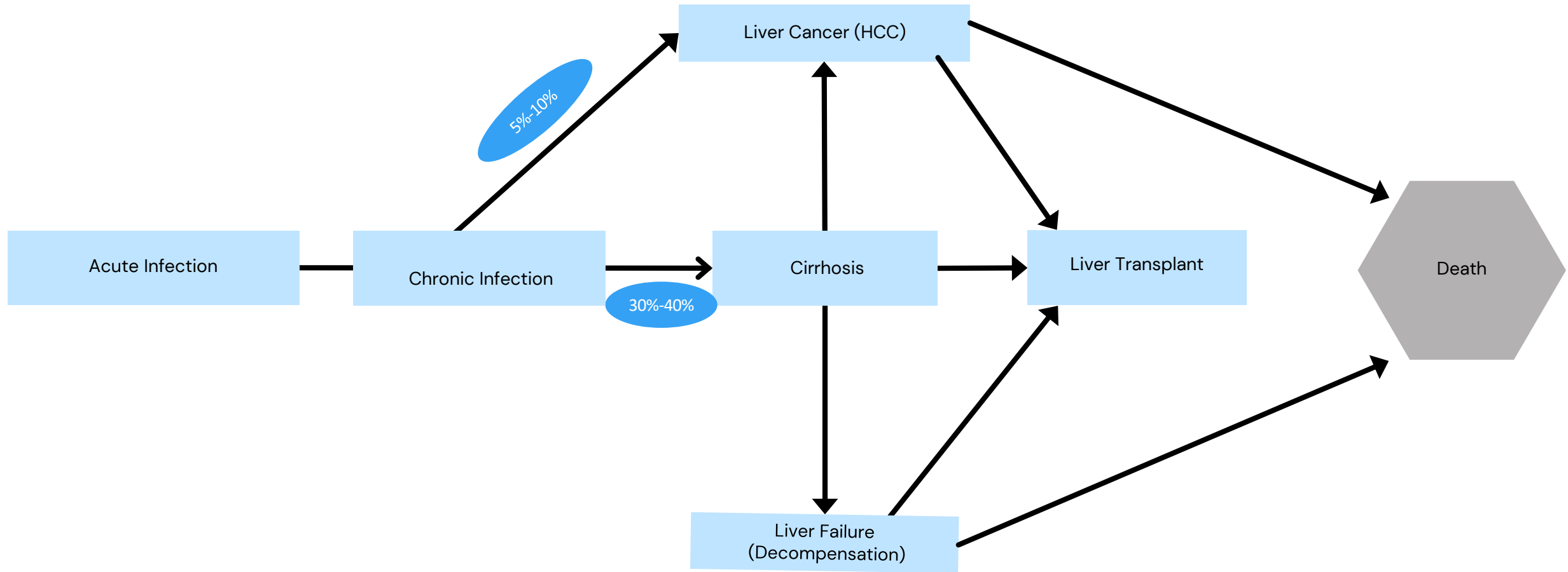
- The rate of newly reported chronic hepatitis B cases among non-Hispanic Asian/Pacific Islander (A/PI) persons (18.9 cases per 100,000 population) was **9.9 times** as high as the rate among non-Hispanic White persons (1.9 cases per 100,000 population).
- The rate of newly reported chronic hepatitis B cases was highest among persons aged **30–39** and **40–49**; these two age groups combined accounted for **46%** of all newly reported chronic hepatitis B cases.



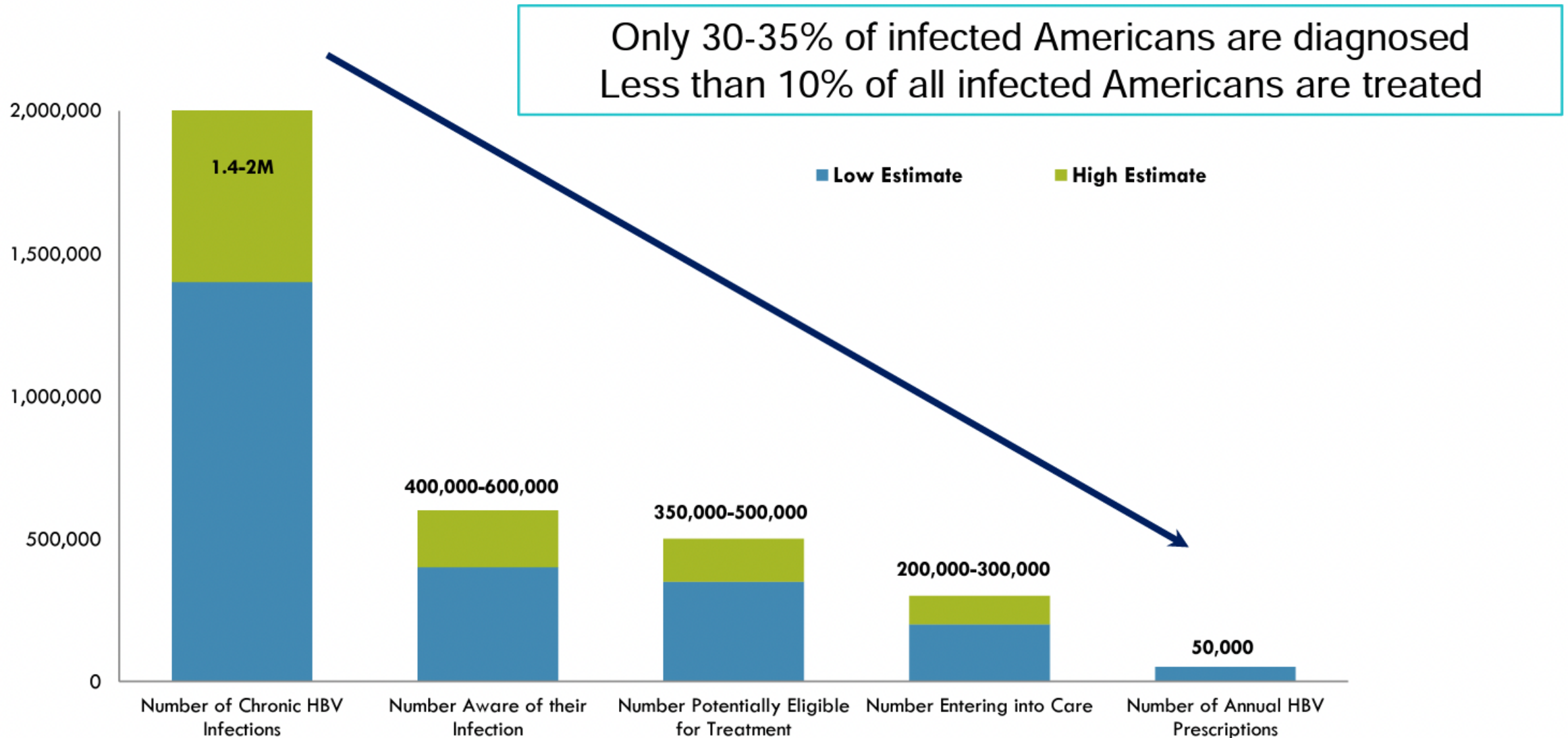
Hepatitis B Transmission

- Spread by direct contact with infected blood
- Most commonly from a mother to her newborn during childbirth
 - Infants exposed to hepatitis B during childbirth have a 90% chance of developing a chronic or lifelong infection of hepatitis B.
 - Treatment during pregnancy can help prevent transmission
- Unprotected sex with an infected individual
- Use of contaminated or unsterile medical or injection equipment
 - ~35% of new cases could be due to drug use

Hepatitis B Disease Progression



Hepatitis B Care Cascade



Which leads us to...

People living with chronic hepatitis B have a 15% to 25% risk of premature death from cirrhosis or liver cancer without monitoring and antiviral treatment as indicated



Up to
2.4M Americans
are living with chronic
hepatitis B



67%
of people living with hepatitis B
are unaware of their infection



70%
of adults 19 and older have
NOT completed the hepatitis
B vaccine series

Universal HBV Screening Recommendation

01

Universal, one-time
hepatitis B
screening for adults
18 & older

Hepatitis B Surface Antigen
Hepatitis B Surface Antibody
Hepatitis B Core Antibody

02

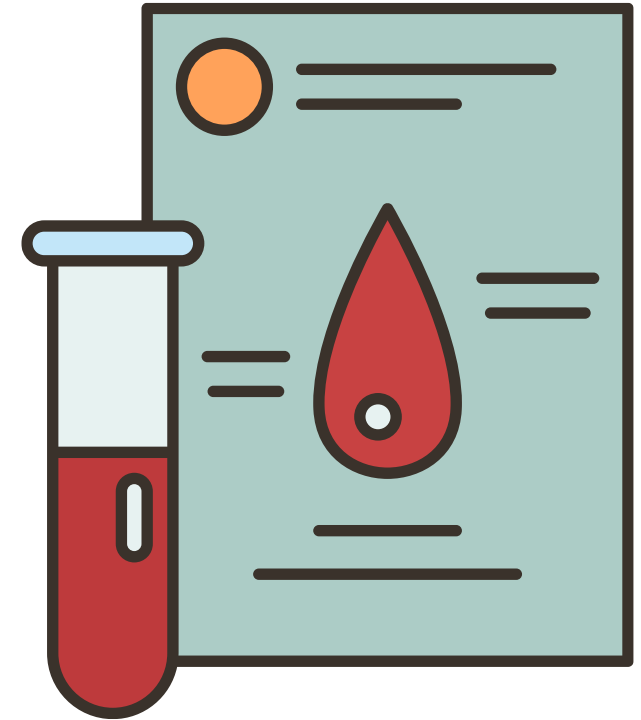
Periodic testing for
all susceptible
persons with
ongoing risk

New groups added to risk-based
recommendation:

- current or history of STI
- currently or formerly incarcerated persons
- hepatitis C infection

03

Anyone who
requests a hepatitis
B screening test



Universal Vaccination for Hepatitis B

01

Universal vaccination for
all adults < 60

02

Vaccinate all adults ≥ 60 with
risk factors

03

Anyone who requests a hepatitis
B vaccine



The CDC recommends all adults ages 19-59 and 60 and older with risk factors get vaccinated against hepatitis B

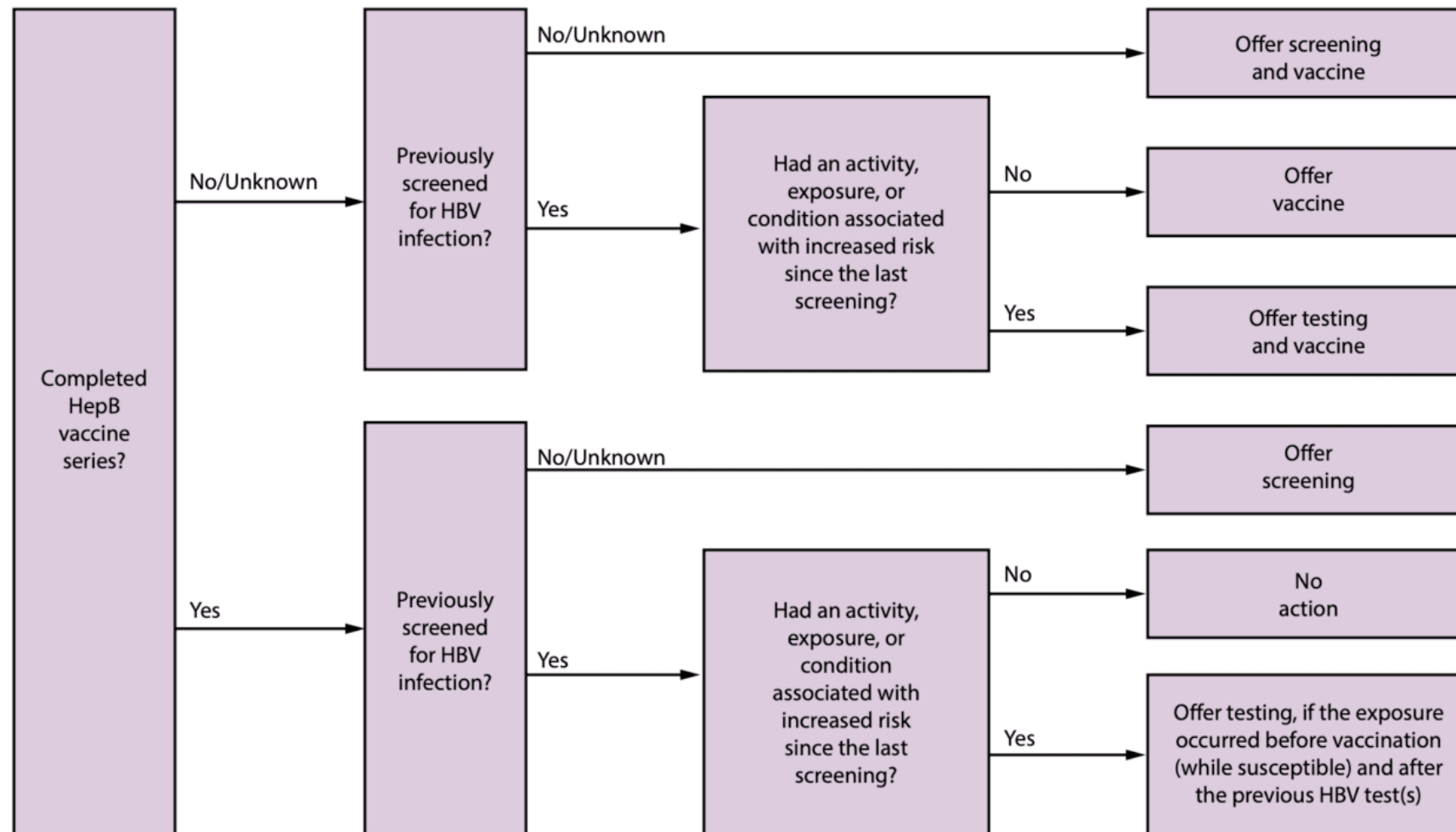


Vaccines are widely available:

- [Recombivax HB](#) (Merck)
- [Engerix-B](#) (GlaxoSmithKline)
- [Twinrix](#) - Hepatitis A & B (GlaxoSmithKline)(18 & Older)
- [PreHevbrio](#) (VBI Vaccines) (18 and older)
- [Heplisav-B](#) (Dynavax Technologies) (2-dose- 18 & older)

HBV Vaccination & Screening in Practice: Clinical Workflow

Nonpregnant Adults Aged ≥ 18 Years without a Known History of HBV Infection



Stigma and Misconceptions

- Some people may associate hepatitis B with unhealthy or risky behaviors. But the virus can infect anyone. Most people are infected as babies, and many people do not know how they got the virus.
- People may be worried that a hepatitis B diagnosis will change their whole life, but it does not have to.
- Hepatitis B can be managed over time by seeing a doctor and taking antiviral treatment if needed.
- A common cultural stigma about hepatitis B is the belief that having the disease brings shame to the family, leading to secrecy and social isolation.

Implementing Universal HBV Recommendations

Educate stakeholders about disease burden and new recommendations

- Focus education on cancer prevention benefit of hepatitis B vaccination and screening
- Engage trusted community members to develop culturally and linguistically appropriate messages
- Enlist national partners to provide education and debunk myths
- Partner with professional societies to provide education at annual meetings
- Collaborate with clinical training programs, provide hospital grand rounds, and develop interprofessional continuing education
- Leverage CDC partnerships and create cooperative agreements to create common education resources for all HCPs

Explore multi-stakeholder collaborations and technology innovations

Stakeholder Collaborations:

- Seek insights from experienced centers
- Involve disease intervention specialists at sexual health clinics
- Establish pharmacy-provider collaborative communication agreements
- Engage and collaborate with state/local health departments, leveraging state/local clinics for vaccine delivery

Technology Innovations:

- Consider using a mobile-accessible vaccine card
- Leverage capacity built with COVID-19 vaccination implementation
- Update EHR systems to include screening and vaccination prompts
- Develop national standards for integrating data into EHR systems in settings serving corrections and substance use settings

Address Vaccine Hesitancy

- Emphasize the cancer prevention benefit of hepatitis B vaccination and screening
- Create FAQ documents to help HCPs prepare for questions around vaccine safety and efficacy
- Engage trusted providers and faith leaders to deliver the messaging
- Engage with patients on an individual level to understand their concerns, assess vaccine status, and discuss vaccine recommendations

- [Hepatitis B Vaccine Posters, Record Cards, and Flyers](#)

- [Hepatitis B - Are you at risk?](#)

- [Hepatitis B Fact Sheets \(susceptible, acute, chronic\)](#)

- [#JustB Stories \(Real people living with hepatitis B\) -
hepbstories.org](#)

- DeWayne

- John

- Sura

- William

Clinician Resources

- [Call-to-Action: Eliminating Hepatitis B Virus Through Universal Screening and Vaccination for Adults Ages 19-59](#)
- [Implementing Hepatitis B Universal Adult Screening and Vaccination: Clinical Answers for Healthcare Professionals](#)
- [Hepatitis B Vaccination and Screening of Adults: Simple Steps to Protect Yourself from Serious Liver Disease](#)
- [CDC's Frequently Asked Questions for Health Professionals](#)
- Websites:
 - www.hepb.org
 - <https://www.hepatitisb.uw.edu/> (CME education)
 - www.immunize.org
 - <https://www.cdc.gov/hepatitis/hbv/index.htm>

HEPATITIS B POLICY PRIORITIES



FEDERAL FUNDING FOR HEPATITIS B AND LIVER CANCER

- Appropriations Advocacy (CDC, NIH)
- The LIVER Act



PREVENTION: HEPATITIS B SCREENING AND VACCINATION

- Implementing Hepatitis B Screening Guidelines
- Increasing Adult Hepatitis B Vaccination



TREATMENT ACCESS

- Ensuring affordability and access to hepatitis B treatments



ENDING HEPATITIS B-RELATED DISCRIMINATION

- Health Care Students and Professionals
- U.S. Military

HEALTH EQUITY

- Health Equity and Accountability Act (HEAA)
-

Prevention: Increase Hepatitis B Screening

In the U.S., ~2.4 million people live with hepatitis B and the majority (~65%) are undiagnosed.

The CDC now recommends a one-time universal screening for hepatitis B among adults 18 and older. The previous, risk-based screening guidelines were stigmatizing and ineffective in improving diagnosis rates.

Policy Priorities:

- Ensuring implementation [of universal screening guidelines](#)
- [Advocate for an update to the U.S Preventive Services Task Force \(USPSTF\) Recommendation](#)

[Call to Action: Eliminating Hepatitis B Virus Through Universal Screening and Vaccination for Adults Ages 19-59](#)





Prevention: Improve Adult Hepatitis B Vaccination Coverage

Only 30% of adults are fully protected against hepatitis B.

The hepatitis B vaccine is universally recommended for all adults aged 19-59, and for those 60 and older who have risk factors.

- Policy Priorities:
 - Increase access to hepatitis B vaccines
 - Eliminate systemic barriers to vaccination
- Advocacy Strategies:
 - Sign-on letters, petitions, surveys (needs of state/local health departments - Section 317 Funding)
 - Public Comment Submissions: federal immunization objectives, considerations, and proposals
- National Adult Hepatitis B Vaccination Awareness Day (April 30th)
 - [Toolkit](#) (2023)

Treatment Access

With no cure for hepatitis B, access to affordable medication is extremely important to preventing significant liver damage or cancer and improving the quality of life of people impacted by hepatitis B.

Policy Priorities:

- Adverse drug tiering
- Cost of hepatitis B medication
- Co-pay accumulators

Report: [Health Insurance Costs Impacting People Living with Hepatitis B](#) (2020)



Ending Hepatitis B-Related Discrimination



Hepatitis B is a protected condition under the Americans with Disabilities Act (2013 DOJ Settlement)

- Health Care Schools Admission Policies - Hepatitis B-infected health care providers and students face discrimination, impacting training and/or practice.
- Department of Defense and U.S. Public Health Service Accession Policies - People living with hepatitis B who are pursuing careers/serving in the U.S. military and the Commissioned Corps of the USPHS face discriminatory hepatitis B accession policies.

[Key Resource: 2012 Updated CDC Recommendations for the Management of Hepatitis B Virus-Infected Health-Care Providers and Students](#)

ADVOCACY ACTION CENTER

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Advocacy

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Action Center



Become a Hep B Advocate! Sign up below to receive the latest news and updates about hepatitis B policy issues, learn about upcoming advocacy events, and be notified of opportunities to take action and show your support for our policy initiatives.

We'll provide resources, information, and tools to help you:

- Communicate effectively with your elected officials
- Educate and engage your community on hepatitis B policy issues
- Recruit and organize other hepatitis B advocates and champions in your community
- Promote and participate in ongoing national, state, and local advocacy efforts

Sign up at: www.hepbunited.org/action



Questions?



@hepbfoundation
@hepbunited



info@hepb.org
connect@hepb.org



www.hepb.org
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