

**Trends in Baseline Screening and Vaccination for Hepatitis B in an Immunosuppressed Cohort of IBD Patients**

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**Introduction**

- Vaccination against Hepatitis B in Ireland was introduced to the Irish vaccination programme in 2008.
- As per the second European consensus on prevention of opportunistic infections in inflammatory bowel disease (IBD) hepatitis B vaccination is recommended in all IBD patients who are HBV anti-HBcAb seronegative.
- Compared with the general population, immunogenicity to Hepatitis B vaccination is less in IBD patients' with one study showing a response rate of only 61%.

**Method**

- All patients at our centre receiving Infliximab or vedolizumab infusions regularly for treatment of their IBD were included.
- Patient's biologic screens prior to commencing treatment were reviewed to determine if patients were susceptible to hepatitis B prior to commencing therapy and if vaccination was given to susceptible patients.

**Aim**

- To determine rates of vaccination to Hepatitis B infection in a vulnerable-cohort of IBD patients who are immunosuppressed.

**Results**

- 223 patients were identified for inclusion and 52 were excluded due to incomplete data.
- 171 patients in total were included (147 IFX, 24 vedolizumab).
- Baseline characteristics are summarised in Table 1.
- 169 (98.3%) patients had a negative Hepatitis B Surface Ag.
- Only 51.5% (n=88) of our cohort had a Hepatitis B anti-core Ab (anti-HBc) checked prior to commencing biologic therapy.

**Results (cont):**

- Of the 83 patients who did not have an anti-HBc checked only 6 (7.2%) were performed after 2018 after the introduction of a standard biologic screen set at our centre.
- All patients who had an anti-HBc checked results were negative.
- Only one patient had confirmed vaccination to Hepatitis B.
- Median time on treatment was 26 months(1 – 101 months).
- Similar results were seen in both patients treated with infliximab and vedolizumab.

**Conclusion**

- Overall our audit highlights in a vulnerable cohort of immunosuppressed IBD patients screening for Hepatitis B infection is adequate at our centre since introduction of a standard biologic screening set.
- However, vaccination against Hepatitis B in this immunocompromised cohort of patients is inadequate.
- We plan to implement a protocol to improve uptake of this vaccination at our centre.

	Total (n = 171)	Infliximab Cohort (n = 147)	Vedolizumab Cohort (n = 24)
Male gender (%)	115 (67%)	100 (68%)	15 (62.5%)
Median age [range]	38 [17-82 years]	35 [17-82]	47 [21-74 years]
Crohn's Disease	72 (42%)	67 (%)	5 (%)
Median time on treatment (months)[range]	26 [1-101]	26 [1-101]	8 [6 – 11]
HBsAg – ve (%)	169 (98.3%)	145 (98.6%)	24 (100%)
HbantiC –ve (%)	88 (51.5%)	72 (49%)	16 (66.7%)

Table 1: Baseline demographics and Hepatitis B serology