Global shortage of hepatitis B vaccine

Update for Immunisation Providers and Health Care Workers

In 2017, SA Health issued Public Health Information advising of a global shortage of hepatitis B vaccine.

Supplies for the National Immunisation Program remain unaffected and SA Health is continuing to supply vaccine for the High Risk Hepatitis B Immunisation Program and the birth dose and primary course for neonates and infants through the Immunisation Section, Communicable Disease Control Branch. Hepatitis B vaccine is also available for the management of post-exposure situations where a significant exposure has occurred.

The initial shortage of one brand of adult formulation hepatitis B vaccine (Engerix-B®) has reduced private market availability of all adult and paediatric formulations of hepatitis B vaccine (Engerix-B and the Sequiris vaccine, H-B-Vax II®), as well as availability of the combination hepatitis A- hepatitis B vaccine (Twinrix)

For use in the event of the unavailability of either of the two brands of the adult formulation of hepatitis B vaccine the Australian Technical Advisory Group on Immunisation (ATAGI) has released updated detailed advice on the use of hepatitis B vaccines during supply shortages. This advice should be read in detail before offering vaccination, but the main points are summarised here:

For health care workers aged < 20 years, a 3 dose course of paediatric hepatitis B vaccine (either brand) or a 3 dose course of Twinrix (adult) is recommended, as currently detailed in the Australian Immunisation Handbook.

For adults aged ≥ 20 years requiring completion of hepatitis B vaccine, the standard 3-dose schedule should not be altered.

A. If adult formulation is not available, each of the doses can be substituted with two concurrent doses of the paediatric formulation of a hepatitis B vaccine (0.5ml per dose)

B. An alternative is to substitute a dose with an adult dose of Twinrix. The ATAGI document provides detailed advice for the use of paediatric formulation Twinrix, for those who have not previously been vaccinated against either hepatitis A or hepatitis B, and for those who have commenced a monovalent course of hepatitis B vaccine.

The updated ATAGI advice also provides recommendations for adolescents aged 11-15 years requiring catch-up of hepatitis B vaccine.
For SA Health services, where vaccine is in short supply, the highest priority will be given to Health Care Workers (HCWs) in Category A work roles (direct contact with blood or body substances) in higher risk settings such as Emergency Departments, Operating Theatres, renal dialysis units or the South Australian Ambulance Service (SAAS).

To minimise disruption to the delivery of health care services in SA Health, and to minimise the impact on student HCWs who are required to undertake clinical placement in SA Health services as part of their training, student HCWs, prospective employees, contract and volunteer HCWs may work in SA Health services provided they have received at least one dose of hepatitis B vaccine, are aware of the need to complete the course of vaccination as soon as supplies are available, and have been fully informed of management in the event of a blood or body fluid exposure.

For further information see Health Care Worker Immunisation Requirements section at:


Updated April 2018

For more information

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