

Hepatitis B Vaccination

Community pharmacy is very well placed to secure and improve the immunisation of at-risk individuals, such as illicit drug users, by a factor of ten or more.

Why is it important?

Hepatitis B can be a fatal disease but can be immunised against with vaccination. The cost of the disease to the individual and society is high, whether considered in terms of mortality, palliative treatment or infection control. The cost of vaccination is low and a very effective public health intervention. However, successful immunisation depends upon completion of a course of 3 vaccinations with the recommendation of a booster at one year.

What can Community Pharmacy do?

The biggest challenge is for an individual to attend follow-up vaccinations at seven and twenty-one days after the first vaccination. Failure to attend means that the vaccination is essentially wasted and the individual remains unprotected.

With their regular, local contact with individuals either in structured treatment programmes or accessing the needle and syringe programme and their strong relationship with shared-care prescribers and drug treatment centres, there is very strong evidence that community pharmacy can drastically reduce the number of failed vaccination courses and increase rates of uptake of immunisation.

A pharmacy-based vaccination service was awarded the Silver Medal by the Chief Medical Officer in the annual Public Health Awards. Speaking at the event, Dr Jenifer Smith said “This is not rocket science – we can all do this”.

Commissioning a Local Service Solution

Most areas engage with substance misuse clients at dedicated treatment centres or through shared care arrangements. In either setting individuals attend for assessment and treatment, with prescriptions generally issued to cover a 14 day period. With very little effort, arrangements can be put in place allowing faxed referrals to be sent to a client's preferred pharmacy upon identification of need for vaccination. Trained pharmacists at the pharmacy sites can then administer vaccination in line with an ultra-rapid schedule at days 0, 7 and 21 when the patient picks up. Treatment centres are notified of successful course completion.

A Cost effective Solution

In the first two quarters of service delivery, a community pharmacy service increased vaccination course completion by over 700%

The typical cost for a pharmacy based immunisation service is in the region of £80 for a patient. Compared this with recommended interferon treatment costs for hepatitis B costing in the region of £6,200 alone, this is a very cost-effective public health intervention.

Integrating Care Pathways

A vaccination service integrates well with a Hepatitis B screening service using dry blood spot testing. A test can be carried out at course commencement with results generally returned by day 7. This can not only identify active infection in what is a high risk group, but also avoid the use of further vaccine to complete an unnecessary course where immunity already exists or there is live infection.

The same dry blood spot samples can be used to identify infection with HIV, hepatitis C and syphilis. Testing can be made available to all in the recognised risk groups as a stand- alone service. The accessibility that pharmacies offer with opportunistic service delivery means that a pharmacy setting for this type of testing is well received and can increase the uptake of vaccination very significantly.