

Closing Immunity Gaps: Hepatitis B Vaccine Coverage and Uptake in HIV-Exposed and Unexposed Children in South Africa



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Hepatitis B Virus: Unveiling the **Hidden Depths**

Globally, approximately 254 million people are chronically infected with HBV, with an estimated 1.1 million HBV-associated deaths reported in 2022(1). The global burden of disease varies, with the African region bearing the highest prevalence.



Among people living with HIV, 2.7 million are co-infected with HBV(2).

Immunization Importance

Hepatitis B immunization is crucial to eliminating hepatitis as a public health threat(4).



Disease **Progression**

Co-infection can accelerate hepatitis B disease progression due to increased viral replication and reactivation (3).

Lack of Data

There is a lack of data on the burden of HBV infections among HIV-exposed and unexposed children in South Africa.

Measuring Hepatitis B Coverage, Timeliness & **Immunity**

- To assess the coverage and timely uptake of routine infant hepatitis B vaccination, and the burden of HBV infection among CLWH, HEU, and HUU children in South Africa we followed the methodological steps illustrated in **Figure 2**. The key steps included:
- 1) Obtaining secondary data and archived sera (N=535) from children <13 years old presenting at health facilities in the Western Cape.
- Assessing hepatitis B vaccine coverage using vaccination records for doses 1 to 3 by 12 months of age, with timely uptake defined as receipt of a dose from 4 days before to 28 days after the recommended age.
- 3) Testing sera for hepatitis B serological markers: HBsAg, anti-HBs, and anti-HBc to determine HBV prevalence and immunity across HIV strata.
- 4) Conducting logistic regression analysis to assess factors influencing incomplete and

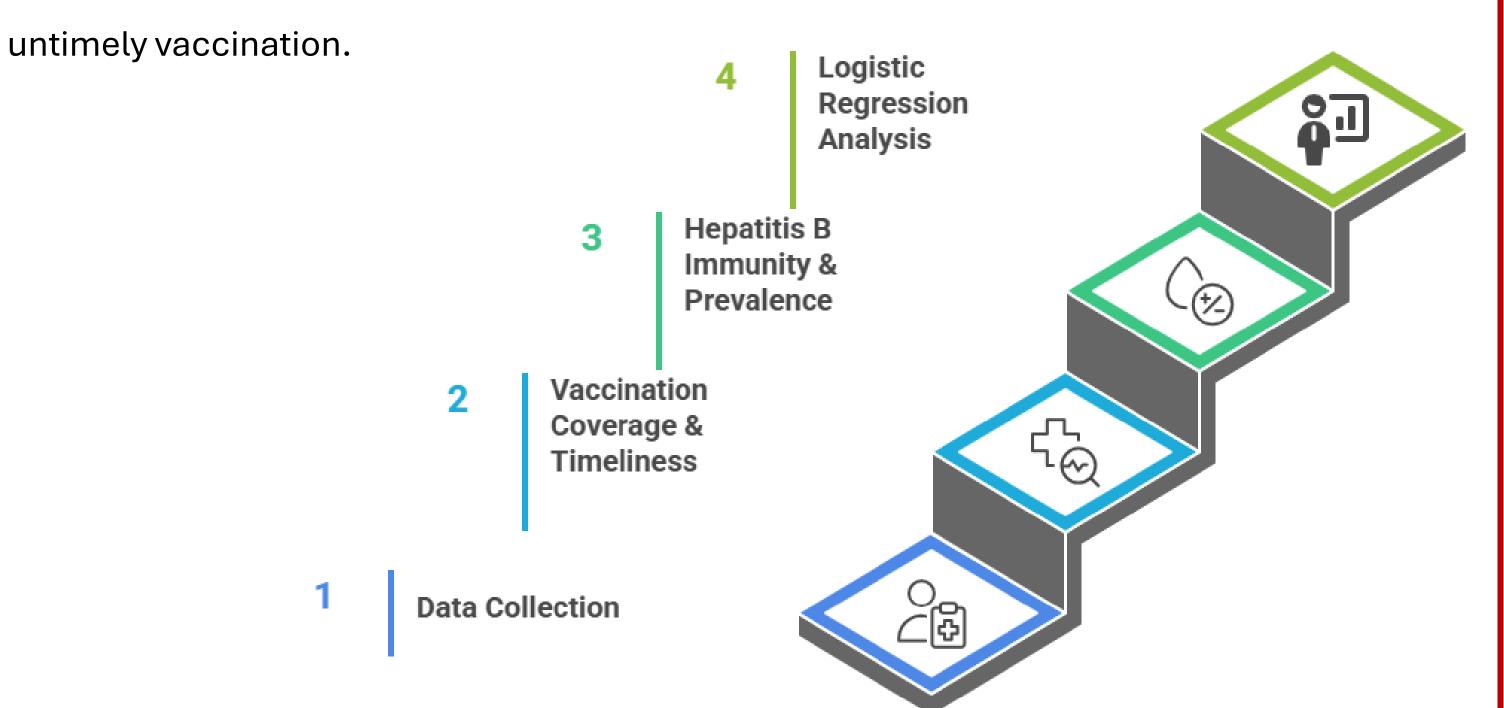


Fig 2: Methodological steps for assessing vaccine coverage, timely uptake and hepatitis B prevalence among CLWH, HEU and HUU children..

High Coverage, Delayed Hepatitis **B** Vaccination

Vaccine coverage rates were higher for CLWH (86.7%), compared to HUU (80.9%), and HEU (77.0%) children (Fig 3).

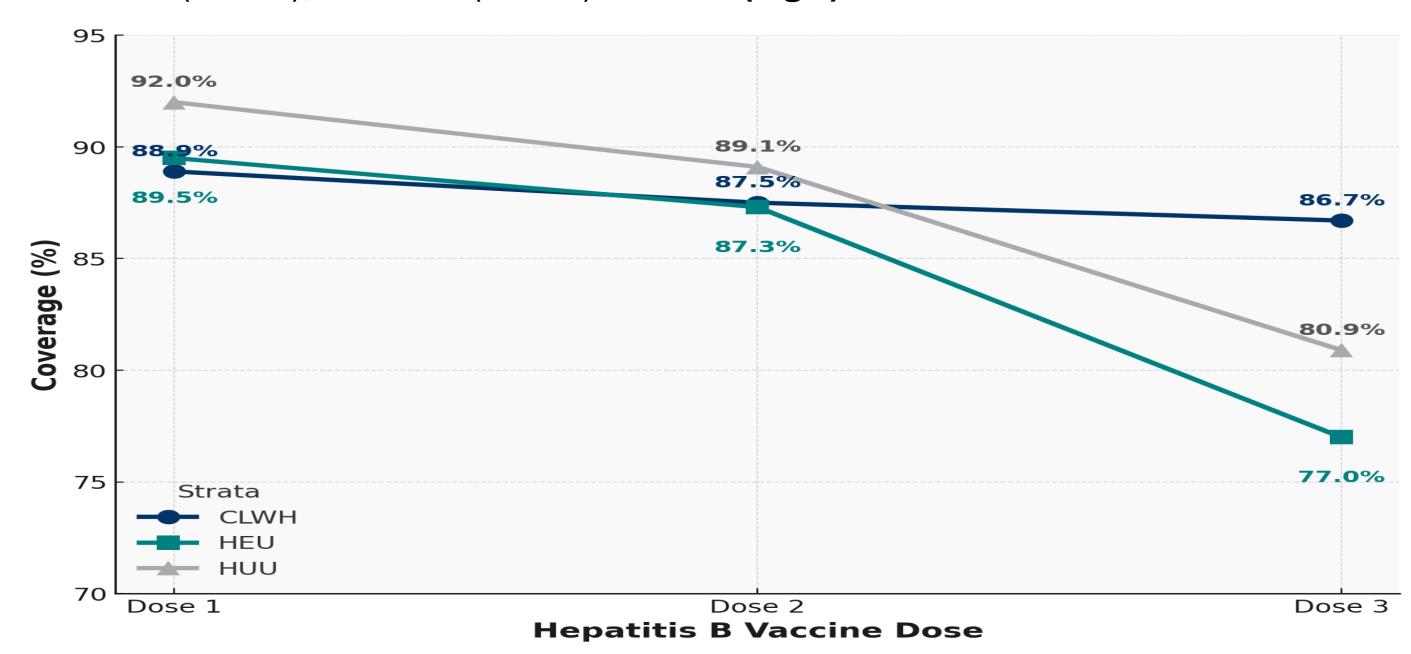


Fig 3: Declining hepatitis B vaccine coverage rates from dose one to three among among HIVexposed and unexposed children.

- CLWH and HEU children consistently show high rates of timely dose completion (Fig 4).
- The drop in timely completion for the second dose highlights potential challenges in adhering to vaccination schedules for these groups.

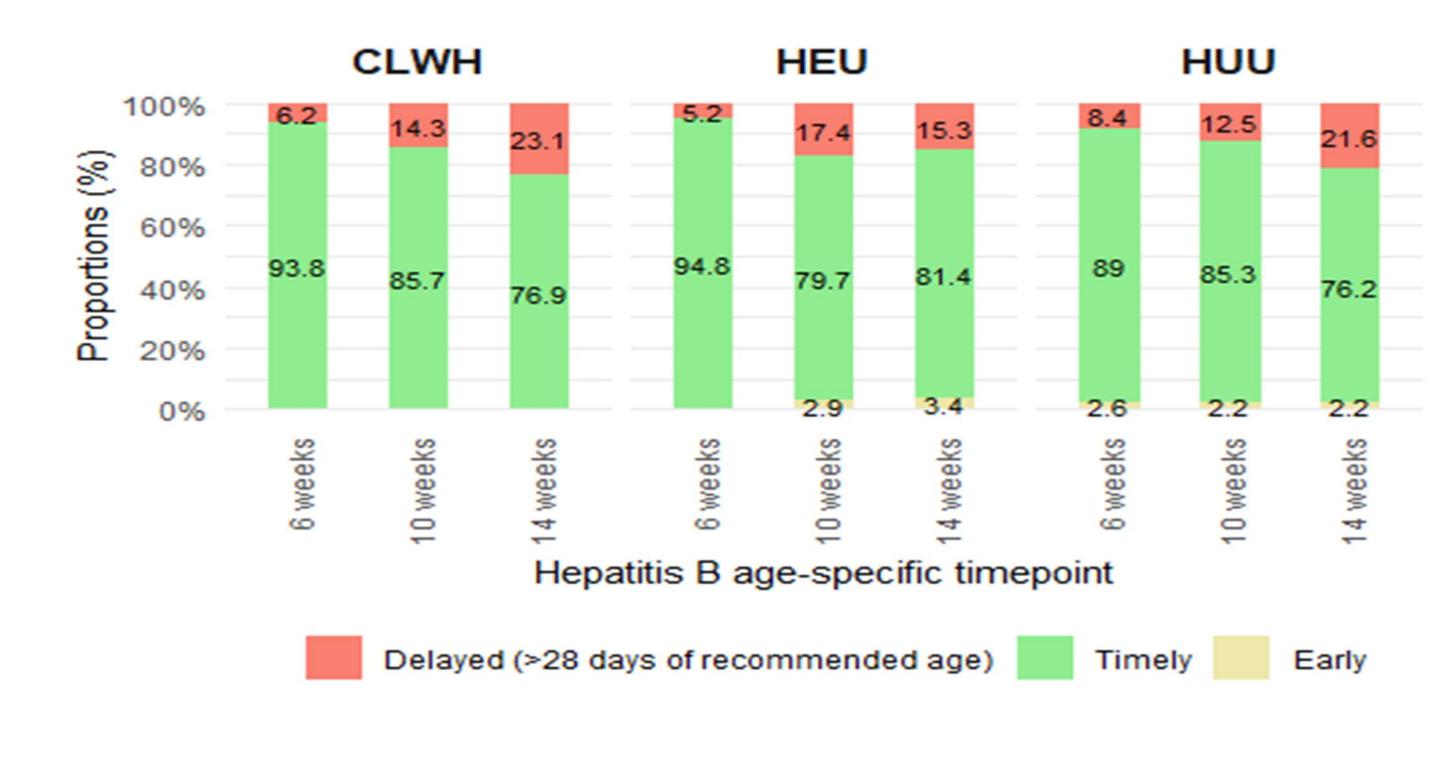


Fig 4: Proportions of timely vaccine dose completion for the primary vaccination series per HIV strata.

The prevalence of chronic HBV infection based on the detection of HBsAg was 0%, 1.35%, and 0.30% among CLWH, HEU and HUU, respectively.

Advancing Towards Viral Elimination: Recommendations to Strengthen **National Hepatitis B Strategies**

Achieving viral elimination in South Africa requires greater focus on both HIV-exposed and unexposed children (Fig 5).

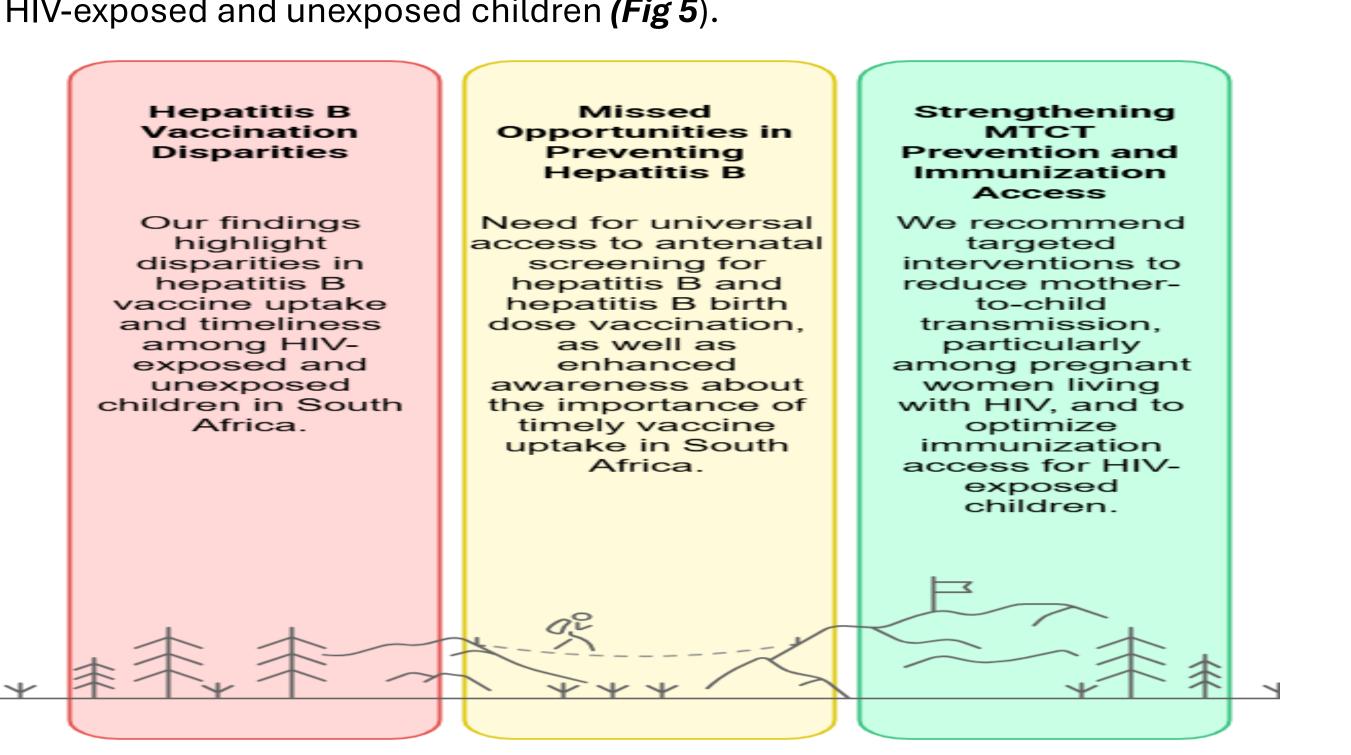


Figure 5: Key target areas for improvement in the country.



