



**衛生防護中心**  
Centre for Health Protection

**Scientific Committee on AIDS and STI and  
Scientific Committee on Vaccine Preventable Diseases**

**Statement on hepatitis A vaccination and  
men who have sex with men**

On 25 April 2017, in a meeting of the Scientific Committee on AIDS and STI (SCAS) and the Scientific Committee on Vaccine Preventable Diseases (SCVPD), discussion was held on the ongoing outbreak of hepatitis A in Hong Kong together with the current recommendations on hepatitis A vaccination. Reference was also made to recent overseas outbreaks of hepatitis A and recommendations of major international authorities.

2. It was resolved at this meeting that *the recommendation for hepatitis A vaccine should be extended to men who have sex with men (MSM)*, in addition to persons with chronic liver disease, persons with clotting factor disorders receiving plasma-derived replacement clotting factors, and travellers to endemic areas as laid out previously in the recommendations developed by SCVPD<sup>1</sup>, in order to reduce the risk of infections in vulnerable communities.

3. This recommended extension was based on the following observations.

*Very low endemicity of hepatitis A in Hong Kong*

4. Hong Kong has transitioned to a place with very low endemicity of hepatitis A. Seroprevalence of hepatitis A antibody is particularly low among the younger population, at less than 50% by age 30. In addition, the annual number of reported hepatitis A cases has also declined from over 1000 cases in 1988 to less than 100 cases in recent years. Against this epidemiologic background with a relatively large susceptible population, outbreaks may occur given the right circumstances.



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Men who have sex with men (MSM) are at risk of hepatitis A

5. Since late 2016, there has been an unusual rise of reported hepatitis A infections among men in Hong Kong. Most of these infections belonged to one of three genetically distinguishable groups. Epidemiologic investigation suggested that transmission was by way of sexual contact between men, a high proportion of whom were HIV-infected. In fact, similar outbreaks among MSM have been and are being observed in Europe<sup>2</sup> and Asia.<sup>3, 4</sup> Literature has also confirmed MSM as a population group at risk for hepatitis A, consistent with the views of the World Health Organization.

Hepatitis A vaccine is available and highly effective

6. Currently there are several inactivated vaccines licensed and available for active immunisation against hepatitis A in Hong Kong. Two doses are required, to be given 6 to 18 months apart. Vaccination is safe and highly effective, conferring protection to almost all after a two-dose series, although the degree of protection may be less in those who are HIV infected. It is indicated for both pre-exposure and post-exposure prophylaxis. As such, vaccination of MSM is an appropriate measure contributing to the control of the current outbreak, alongside publicity to raise awareness of the infection.

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## References

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- 4 GJ Chen, KY Lin, CC Hung, SC Chang. Hepatitis A outbreak among men who have sex with men in a country of low endemicity of hepatitis A infection [letter]. *J Infect Dis.* 15 March 2017