

Renal Medicine – Administration of Vaccine

Introduction

The Covid pandemic has had a significant impact on the NHS ability to provide routine elective services. We recognise that patients are waiting longer than we would all like and it is not always possible to identify when treatment will take place. This document provides you with information on how you are able to support yourself while waiting to attend the hospital. The guidance has been written by clinicians who are responsible for your care.

Renal Association Guidelines recommend that patients who require renal replacement therapy (RRT) should be immunised against Hepatitis B (HBV). The introduction of HBV immunisation was associated with a reduction in the incidence of HBV infection in dialysis units. People at increased risk of contracting hepatitis B should be immunised.

The hepatitis B vaccine is very effective at preventing infection with hepatitis B if you have been at risk from a possible source of infection (for example blood from dialysis lines) and you are not immunised. It is for this reason the Department of Health recommends that all patients with kidney failure be vaccinated against the virus. Ideally patients are vaccinated before they start dialysis.

Please read the following information in conjunction with the staying healthy guidance appropriate for your condition.

Guidance for Patients

Hepatitis B is a disease caused by the hepatitis B virus. The disease mainly affects the liver. However, if you are infected the virus is present in body fluids such blood, saliva, semen and vaginal fluid. In the UK it is estimated that about 1 in 1000 people are infected with the hepatitis B virus. It is much more common in other countries - these include sub-Saharan Africa, most of Asia and the Pacific islands.

If you are infected with the hepatitis B virus, the initial symptoms can range from no symptoms at all to a severe illness. After this 'acute phase', in a number of cases the virus remains in the body long-term. These people are called 'carriers'. Some carriers do not have any symptoms but can still pass on the virus to other people. About 1 in 4 carriers eventually develop a serious liver disease such as chronic hepatitis, cirrhosis, and in some cases liver cancer develops after a number of years.

How is Hepatitis B passed on?

The hepatitis B virus is passed from person to person as a result of:

- Blood to blood contact.
- Having unprotected sex with an infected person.
- From an infected mother passing it to her baby.
- A human bite from an infected person.

A course consisting of three or four routine injections (dependent on the vaccine brand used) will be administered into the upper part of your arm, over a number of months. You will be given the dates you will need to return for your injections. If you are already on dialysis, the injections will be performed at your dialysis unit on a dialysis day.

My Planned Care Patient Information Platform

Two months after your course of injections you will need to have a blood test. This checks if you have made antibodies against the hepatitis B virus and are immune. This is because for some people, a booster is needed. If you have been referred to the transplant team you may be given a further course of an alternative type of Hepatitis B vaccine.

Following the booster or alternative course of immunisation, if your antibody level remains 0 you are known as a non-responder and no further immunisations will be given. Otherwise blood tests will be taken annually to monitor levels and boosters may be required to maintain antibody levels. We aim to achieve levels above 100. If levels are between 10-100 boosters will be administered and levels below 10 non-responders.

What should I do if my health is deteriorating?

As with any vaccine or medicine, there will be some people who have a reaction or suffer side effects. However this is rare. The most common are tenderness, redness, pain or swelling at the site of the injection or mild fever. These will only last a few days at the most. If you are concerned please contact your GP or renal team at UHCW.

Contact Us

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