



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Centers for Disease Control and Prevention (CDC)
Atlanta GA 30333

October 29, 2002

Mr. Patrick J. McConnon, M.P.H. Executive Director

Council of State and Territorial Epidemiologists (CSTE) 2872 Woodcock Boulevard, Suite 303 Atlanta, Georgia 30341-4015

Dear Mr. McConnon:

Thank you for your letter forwarding the positions statements, adopted by the Council of State and Territorial Epidemiologists (CSTE), in 2002.

Enclosed are the Centers for Disease Control and Prevention's (CDC) responses to the CSTE Position Statements sent to the National Center for Infectious Disease (NCID) and the National Immunization Program (NIP).

We look forward to continued collaboration with CSTE regarding public health issues of mutual concern.

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Sincerely,

A handwritten signature in blue ink, appearing to read "James M. Hughes".

James M. Hughes, M.D.
Assistant Surgeon General Director
National Center for Infectious Diseases

LU~(, \ _ Walter A. Orenstein, M.D. Assistant Surgeon General Director
National Immunization Program

Enclosures

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**COMMENTS PROVIDED BY THE CENTERS FOR DISEASE CONTROL AND PREVENTION ON THE
COUNCIL OF STATE AND TERRITORIAL EPIDEMIOLOGISTS' (CSTE)
2002 POSITION STATEMENTS -Infectious Diseases/Immunization**

02-ID-05

Committee: Infectious Diseases

~: Securing Hepatitis A and Hepatitis B Vaccine for Adults at High Risk of Infection or the Serious Consequences of Infection

CDC Response:

CDC concurs with CSTE's recommendation that CDC work in partnership with other federal and state agencies and the private sector to create a mechanism to make Hepatitis A and Hepatitis B vaccine available to adults at high risk for infection or the serious consequences of infection.

Vaccinating high-risk adults against Hepatitis A and B is a critical component of an adult immunization initiative, with two main areas that need attention: (1) vaccine financing, and (2) development of an infrastructure to administer immunizations, particularly in public health care facilities. Vaccinating adults against Hepatitis A and B is a cost effective way public health can reduce the disease burden among adults.

CDC has been exploring several avenues to understand the scope of the challenge and develop potential strategies to address the issue. CDC has been working to promote the need for and importance of implementing hepatitis A and B vaccination programs in state and local STD and HIV prevention programs. This is of particular importance because many of the individuals at high risk of hepatitis A and B infection also lack health insurance and seek care in public health facilities. At CDC's request, the Institute of Medicine is conducting a study on the mechanism of funding pediatric and adult vaccines, including hepatitis A and B vaccines. Their report is due to be released in 2003.

Over the past several years, through the Viral Hepatitis Integrations Projects, CDC has been working with state and local health departments to promote immunizations for adults for whom the vaccine is recommended by the ACIP. CDC and the Substance Abuse and Mental Health Administration (SAMSHA) have also developed a needs assessment to determine the number of individuals who access public Sill, HN and substance abuse treatment and prevention programs and could potentially receive hepatitis A and B vaccine at these facilities. This needs assessment, Vaccines for Adults at Risk for Hepatitis (VF ARB), will also incorporate data on the number of individuals in long term correctional facilities since this population is also at high risk for hepatitis A, B, and C infection. The data are currently being analyzed and will be shared with CSTE when it is available. Finally, CDC has provided approximately \$2.1 million to date, in 2002, for the purchase of adult hepatitis A and B vaccines.

In spite of these efforts, many individuals at high risk of hepatitis A or B infection, or serious consequences of infection, remain unvaccinated. CDC supports CSTE's position statement and remains committed to working with other government and private sector partners to develop strategies to fund and deliver vaccine for adults at high risk of infection. We also encourage CSTE and ASTHO to continue to promote the importance of and need for a sustained adult hepatitis A and B vaccination program.