

**Table 4.4.1: Recommended doses and schedules for use of inactivated hepatitis A and hepatitis A combination vaccines\***

Vaccine	Age of vaccine recipient (years)	Dose (HAV antigen)	Volume per dose (mL)	Number of doses	Vaccination schedule
<b>Monovalent hepatitis A vaccines</b>					
Avaxim	≥2	160 antigen U	0.5	2	1st dose: day 0 (day of vaccination) 2nd dose: 6 to 36 months after 1st dose
Havrix Junior	2–<16	720 ELISA U	0.5	2	1st dose: day 0 (day of vaccination) 2nd dose: 6 to 12 months after 1st dose
Havrix 1440	≥16	1440 ELISA U	1.0	2	1st dose: day 0 (day of vaccination) 2nd dose: 6 to 12 months after 1st dose
Vaqa Paediatric/Adolescent	1–<18	25 U	0.5	2	1st dose: day 0 (day of vaccination) 2nd dose: 6 to 18 months after 1st dose
Vaqa Adult	≥18	50 U	1.0	2	1st dose: day 0 (day of vaccination) 2nd dose: 6 to 18 months after 1st dose
<b>Combination hepatitis A/hepatitis B vaccines</b>					
Twinrix Junior (360/10)	1–<16	360 ELISA U	0.5	3	1st dose: day 0 (day of vaccination) 2nd dose: 1 month after 1st dose 3rd dose: 6 months after 1st dose
Twinrix (720/20) <sup>†</sup>	1–<16	720 ELISA U	1.0	2	1st dose: day 0 (day of vaccination) 2nd dose: 6 to 12 months after 1st dose
Twinrix (720/20)	≥16	720 ELISA U	1.0	3	1st dose: day 0 (day of vaccination) 2nd dose: 1 month after 1st dose 3rd dose: 6 months after 1st dose
Twinrix (720/20)	≥16	720 ELISA U	1.0	4	1st dose: day 0 (day of vaccination) 2nd dose: 7 days after 1st dose 3rd dose: 21 days after 1st dose 4th dose: 12 months after 1st dose <i>Note: This accelerated schedule is not suitable for all circumstances.<sup>‡</sup></i>
<b>Combination hepatitis A/typhoid vaccine</b>					
Vivaxim	≥16	160 antigen U	1.0	1 (+ 1 monovalent hepatitis A vaccine)	1st dose: single dose of Vivaxim (mixed vaccine) on day 0 (day of vaccination) 2nd dose: for long-term protection against hepatitis A, a 2nd dose of hepatitis A-containing vaccine (monovalent hepatitis A vaccine) should be given between 6 and 36 months after the dose of Vivaxim

\* For more information on combination hepatitis A/hepatitis B vaccines and schedules, refer also to 4.5 *Hepatitis B*.

† This schedule should not be used for persons who require prompt protection against hepatitis B, for example, if there is close contact with a person known to be chronically infected with hepatitis B.

‡ This 'accelerated' schedule should be used only if there is very limited time before departure to either moderately or highly endemic regions (refer also to 4.5 *Hepatitis B*, 'Accelerated schedules').

Source: Australian Technical Advisory Group on Immunisation. *The Australian Immunisation Handbook*. 10th ed (2017 update). Canberra: Australian Government Department of Health; 2017.

<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook10-home>