

Risk for acute myocardial infarction not increased with two-dose HepB-CpG vaccine

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The rate of type 1 acute myocardial infarction (MI) is not increased with receipt of the two-dose hepatitis B vaccine with a cytosine phosphoguanine adjuvant (HepB-CpG vaccine) versus the three-dose hepatitis B vaccine with an aluminum hydroxide adjuvant (HepB-alum vaccine), according to a study published online March 25 in the *Journal of the American Medical Association*.

Katia Bruxvoort, Ph.D., from the University of Alabama at Birmingham, and colleagues conducted a prospective cohort noninferiority study to

compare the rate of acute MI between recipients of the HepB-CpG [vaccine](#) (31,183 individuals) and HepB-alum vaccine (38,442 individuals). Participants were followed for 13 months after the index dose.

After inverse probability of treatment weighting, the characteristics were well-balanced between the vaccine groups. The researchers identified 52 type 1 acute MI events among recipients of HepB-CpG vaccine and 71 type 1 acute MI events among recipients of HepB-alum vaccine, for rates of 1.67 and 1.86 per 1,000 person-years, respectively (absolute rate difference, -0.19 ; adjusted hazard ratio, 0.92, which was below the noninferiority margin).

"Further research is needed to determine if individuals would be more likely to initiate a shorter two-dose series than a longer three-dose series, as well as to address vaccine hesitancy and other barriers to hepatitis B vaccine uptake among adults," the authors write.

Several authors disclosed financial ties to biopharmaceutical companies, including Dynavax Technologies, which manufactures HEPLISAV-B and funded the study.

More information: Katia Bruxvoort et al, Association Between 2-Dose vs 3-Dose Hepatitis B Vaccine and Acute Myocardial Infarction, *JAMA* (2022). [DOI: 10.1001/jama.2022.2540](https://doi.org/10.1001/jama.2022.2540)

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